

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: 17	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Emett	MI	OFFICE USE ONLY Date Received RECEIVED JUN 28 2021 City Secretary Out 10:27 AM Date Hand-delivered or Date Postmarked JUN 28 2021 Out Receipt # Amount \$ Date Processed Date Imaged
	NICKNAME	LAST Alvarez	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
	PO Box 282 Victoria TX 77902			
<input type="checkbox"/> Change of Address				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (361)	PHONE NUMBER 218-9464	EXTENSION	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Clara	MI	
	NICKNAME	LAST Ramos	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
	2001 E Sabine, Ste. 109 Victoria TX 77901			
8 CAMPAIGN TREASURER PHONE	AREA CODE (361)	PHONE NUMBER 5419250	EXTENSION	
9 REPORT TYPE	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year 6 / 4 / 2021		THROUGH Month Day Year 6 / 25 / 2021	
11 ELECTION	ELECTION DATE Month Day Year 7 / 3 / 2021		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input checked="" type="checkbox"/> Special	
	None		Mayor	
12 OFFICE	OFFICE HELD (if any)			
14 NOTICE FROM POLITICAL COMMITTEE(S)	OFFICE SOUGHT (if known)			
<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	COMMITTEE ADDRESS		
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

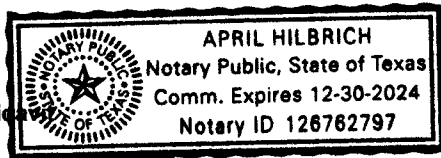
15 C/OH NAME <i>Emett Alvarez</i>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 617.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,852.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 9,973.74
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 48.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,500.00

18 SIGNATURE 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.

Emett Alvarez

Signature of Candidate or Officeholder

Please complete either option below:



(1) Affirmation

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Emett Alvarez this the 28th day of June, 2021, to certify which, witness my hand and seal of office.

April Hilbrich Signature of officer administering oath
April Hilbrich Printed name of officer administering oath
Notary Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
 (street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Emett Alvarez</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>5,595.00</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>640.00</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>0</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>9,338.84</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>0</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>53.65</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>0</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>581.25</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>0</i>

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Emett Alvarez		3 Filer ID (Ethics Commission Filers)
4 Date 6/3/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupe Rivera	7 Amount of contribution (\$) 150.00
6 Contributor address; City; State; Zip Code P O Box 241 Bloomington, TX 77951		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George + Terry Flores	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 104 Yuca Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benny + Melba Ortiz	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 2602 Kay Dr. Victoria TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron Reyna	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code Po Box 2521 Victoria TX 77902		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Emett Alvarez		3 Filer ID (Ethics Commission Filers)
4 Date 6/3/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanessa Calloway	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 603 Broadmore Victoria, TX 77904		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Vasquez	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2106 E Sabine Victoria TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfred Hinojosa	Amount of contribution (\$) 300.00
Contributor address; City; State; Zip Code 522 Hancock #434 Corpus Christi, TX 78404		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Flores	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 412 Avenue E Victoria, TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Emmet Alvarez		3 Filer ID (Ethics Commission Filers)
4 Date 6/3/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janie Hernandez	7 Amount of contribution (\$) 50.00
	6 Contributor address; City; State; Zip Code 2512 Booker Victoria TX 77901	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Rivera	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 706 S. main Victoria TX 77901	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rey Herrera	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 307 Bridge Victoria TX 77901	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viola Saenz	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 6010 A Country Club Victoria, TX 77904	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Emett Alvarez		3 Filer ID (Ethics Commission Filers)
4 Date 6/3/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Rivera	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 3505 Mistletoe Victoria TX 77901		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dale Zuck	Amount of contribution (\$) 180.00
Contributor address; City; State; Zip Code 2001 E Sabine Stel 08 Victoria TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frances Garcia	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 1300 Faltysek Victoria TX 77905		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 6/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dale Zuck	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2001 E Sabine Stel 08 Victoria, TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **6**

2 FILER NAME **Emett Alvarez**

3 Filer ID (Ethics Commission Filers)

4 Date
6/3/21

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
205 Brocton Victoria TX 77904

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

6/3/21

Rudy Guzman

Contributor address; City; State; Zip Code

104 Champions Row Victoria TX 77904

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

6/3/21

Catherine Humphrey

Contributor address; City; State; Zip Code

108 Rosewood Victoria TX 77901

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Emet H Alvarez		3 Filer ID (Ethics Commission Filers)
4 Date 6/19/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha Hinojosa <hr/> 6 Contributor address; City; State; Zip Code 3303 Cedar Victoria TX 77901	7 Amount of contribution (\$) 75.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 6/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victor Mendoza <hr/> Contributor address; City; State; Zip Code 110 Sagemont Victoria TX 77904	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnulfo Gonzalez <hr/> Contributor address; City; State; Zip Code 344 West Park Victoria TX 77905	Amount of contribution (\$) 2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>Emett Alvarez</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <u>640.00</u>	
5 Date <u>6/6/21</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Janie Alvarez</u>	8 Amount of Contribution \$ <u>140.00</u>	9 In-kind contribution description <u>Banner, Stamps, Sign Supplies, Office Supplies</u>
7 Contributor address; City; State; Zip Code <u>1108 E Colorado Victoria TX 77901</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Administrator</u>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <u>Dr. Afridi</u>	
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)			
Date <u>6/9/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Joseph Garza</u>	Amount of Contribution \$ <u>500.00</u>	In-kind contribution description <u>Radio ads</u>
Contributor address; City; State; Zip Code <u>1101 N Navarro Victoria TX 77901</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Attorney</u>		Employer (FOR NON-JUDICIAL)(See Instructions) <u>Self</u>	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

LOANS

SCHEDULE E

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Emett Alvarez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 1,000
5 Date of loan 6/25/21	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Emett Alvarez	9 Loan Amount (\$) 1,000
6 Is lender a financial institution? Y <input checked="" type="radio"/> N <input type="radio"/>	8 Lender address; City; State; Zip Code PO Box 282 Victoria TX 77902	10 Interest rate 0
		11 Maturity date 12/31/2021
12 Principal occupation / Job title (See Instructions) owner / publisher		13 Employer (See Instructions) Revista de Victoria
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 4	2 FILER NAME Emett Alvarez	3 Filer ID (Ethics Commission Filers)
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4 Date 6/3/21	5 Payee name Veracruz
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6 Amount (\$) 248.94	7 Payee address; 3110 N Navarro	City; Victoria	State; TX	Zip Code 77901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food	(b) Description Reception
	(c) <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
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Date 6/4/21	Payee name Kendall Guajardo
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Amount (\$) 220.00	Payee address; 2201 E Sabine St 109	City; Victoria	State; TX	Zip Code 77901
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract labor	Description office work
	<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
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Date 6/5/21	Payee name Paypal
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Amount (\$) 73.03	Payee address; 2211 N First	City; San Jose	State; CA	Zip Code 95131
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Facebook
	<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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 4	2 FILER NAME Emett Alvarez	3 Filer ID (Ethics Commission Filers)
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4 Date 6/7/21	5 Payee name Rapid Printing
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6 Amount (\$) 1,677.88	7 Payee address; 1708 N Navarro	City; Victoria	State; TX	Zip Code 77901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing	(b) Description Post Cards 4x4 Signs
	(c) <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
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Date 6/9/21	Payee name Zip Printing + mailing
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Amount (\$) 1,963.12	Payee address; 1237 S Lincoln Ste. C	City; Clearwater	State; FL	Zip Code 33756
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing/Advertising	Description Printing and mailout postcards
	<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
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Date 6/11/21	Payee name Maic 95.9 FM
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Amount (\$) 506.00	Payee address; PO Box 407	City; Victoria	State; TX	Zip Code 77902
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Radio ads
	<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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 4	2 FILER NAME Emert Alvarez	3 Filer ID (Ethics Commission Filers)
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4 Date 6/14/21	5 Payee name Point Blank Political
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6 Amount (\$) 414.31	7 Payee address; 330 Crown Oak Center	City; Longwood	State; FL	Zip Code 32750
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Text messaging
	(c) <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
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Date 6/18/21	Payee name Victoria Advocate
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Amount (\$) 990.00	Payee address; 101 W Goodwin, Ste 1200	City; Victoria TX	State; TX	Zip Code 77901
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Congressional package
	<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
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Date 6/21/21	Payee name Victoria Television Group
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Amount (\$) 1,020.00	Payee address; 3808 N NAVARRO	City; Victoria TX	State; TX	Zip Code 77901
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Crossroads Today website
	<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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 4	2 FILER NAME Emett Alvarez	3 Filer ID (Ethics Commission Filers)
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4 Date 6/14/21	5 Payee name Rapid Printing
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6 Amount (\$) 674.50	7 Payee address; 1708 N Navarro	City; Victoria	State; TX	Zip Code 77901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Yard signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/25/21	Payee name Kaplan Strategies
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Amount (\$) 1,500.00	Payee address; 2602 Lounsbury Ct.	City; Kissimmee	State; FL	Zip Code 34746
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Text messaging
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/25/21	Payee name USPS
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Amount (\$) 55.00	Payee address; 312 S Main	City; Victoria	State; TX	Zip Code 77901
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Postage	Description mail out - postcards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: <p style="text-align:center">1</p>	2 FILER NAME <p style="text-align:center">Emett Alvarez</p>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 53.65
5 Date <p style="text-align:center">6/23/21</p>	6 Payee name <p style="text-align:center">FedEx</p>	
7 Amount (\$) <p style="text-align:center">53.65</p>	8 Payee address; City; State; Zip Code <p style="text-align:center">1404 E Rio Grande Victoria TX 77901</p>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <p style="text-align:center">Advertising</p>	(b) Description <p style="text-align:center">mailed payment overnight</p>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 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		
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
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

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

If the requested information is not applicable, **DO NOT** include this page in the report.

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 H: <i>1</i>	2 FILER NAME <i>Emett Alvarez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>6/23/21</i>	5 Business name <i>Revista de Victoria</i>	
6 Amount (\$) <i>581.25</i>	7 Business address; City; State; Zip Code <i>Po Box 1412 Victoria TX 77902</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Ads; 5x2, 2x4 color</i>
	(c) <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	Business name	
Amount (\$)	Business 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
Date	Business name	
Amount (\$)	Business 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

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