CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

| 43.159 | | | |
|---|--|--|---|
| | Guide explains how to complete this form. | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS/MRS/MR KAREN | Mendiola | OFFICE USE ONLY |
| | NICKNAME LAST | SUFFIX | Date Received |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address | ADDRESS / PO BOX; APT / SUITE #; 23110 DRAGON | ROCK, Elmand | af) |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE PHONE NUMBER (Z/O) 300-640 | TX. 78112 EXTENSION | Date Hand-delivered or Date Postmarked |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST | mendiola | Receipt # Amount \$ Date Processed |
| | TANGUM | | Date Imaged |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / S 23110 DRAGOW S | ROCK, Elmendo | ZIP CODE 194, TX_78/17 |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER (Z/O) 300-6404 | EXTENSION | |
| 9 REPORT TYPE | January 15 30th day before el | lection Runoff | 15th day after campaign treasurer appointment (Officeholder Only) |
| | July 15 8th day before elec | Exceeded \$500 limit | Final Report (Attach C/OH - FR) |
| 10 PERIOD COVERED | Month Day Year / 2018 | THROUGH 6/3 | Day Year |
| 1 ELECTION | Month Day Year Primary | ELECTION TYPE Runoff Other Description Special | |
| 2 OFFICE | OFFICE HELD (if any) Mayor | 13 OFFICE SOUGHT (if known) | |
| | GO TO F | PAGE 2 | |

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

| 14 C/OH NAME | | A STANSFORM | 15 Filer ID (Ethics Commission Filers) |
|---|---|---|--|
| 16 NOTICE FROM POLITICAL COMMITTEE(S) | | NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDI DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE W DISSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT TH URES. | |
| | COMMITTEE TYPE GENERAL SPECIFIC | COMMITTEE NAME COMMITTEE ADDRESS | |
| Additional Pages | | COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 17 CONTRIBUTION TOTALS | 1. TOTAL P | OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE | N \$ () |
| 1 27 1 | 2. TOTAL F | POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 0 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | | \$ () |
| CONTRIBUTION | 4. TOTAL P | OLITICAL EXPENDITURES | \$ 0 |
| BALANCE | 5. TOTAL PO | DLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D RTING PERIOD | AY \$ 0 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PE LAST DAY | RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH OF THE REPORTING PERIOD | E \$ ⊘ |
| AFFIX NOTARY STAMP | ped before me, by | I swear, or affirm, under penalty of per true and correct and includes all informunder Title 15, Election Code. Karen Mendugger Signature of Candidate the said Karen Menduga Certify which, witness my hand and seal of office. | nation required to be reported by me |
| Signature of officer adn | ninistering oath | Printed name of officer administering oath | Title of officer administering oath |
| | | | January Call |

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

| | | <u> </u> | |
|--|---|---------------------------------------|---|
| The C/OH Instruction | Guide explains how to complete this form. | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: |
| 3 CANDIDATE/ OFFICEHOLDER NAME | MS/MRS/MR FIRST KAREN ME | NDIOLA | OFFICE USE ONLY |
| | NICKNAME LAST | SUFFIX | Date Received |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / | 23110 DRAGON ROCK | EXTENSION | State of Texas City of Sandy Oaks Est 2014 |
| OFFICEHOLDER PHONE | (210)300-6405 | LA LINGION | Date Hand-delivered or Date Postmarked |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST KAREW NICKNAME LAST | MENDIOLA SUFFIX | Receipt # Amount \$ Date Processed |
| | TANGUM | A | Date Imaged |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUI | | ZIP CODE = 7x-, 78/12 |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER (210) 300-6405 | EXTENSION | |
| 9 REPORT TYPE | January 15 30th day before elections July 15 8th day before elections | | 15th day after campaign treasurer appointment (Officeholder Only) |
| === | July day belone election | Exceeded \$500 limit | Final Report (Attach C/OH - FR) |
| 10 PERIOD COVERED | Month Day Year 10/8/2018 | THROUGH Month | Day Year 19 /2018 |
| 11 ELECTION | Month Day Year Primary General | Runoff Other Description Special | |
| 12 OFFICE | OFFICE HELD (if any) Mayor | 13 OFFICE SOUGHT (if known) Mayor. | |
| | GO TO P | PAGE 2 | |

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT



KLY

| 14 C/OH NAME | | 15 | Filer ID (Ethics Commission Filers) |
|---|--|--|---|
| 16 NOTICE FROM POLITICAL COMMITTEE(S) | SUPPORT THE CANE | OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURE DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITH INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS II URES. | OUT THE CANDIDATE'S OR OFFICEHOLDER'S |
| CEIVED | GENERAL | COMMITTEE NAME | |
| state of Texas v of Sandy Oaks Est 2014 | | COMMITTEE ADDRESS | |
| 2 4 1/2 1/4 2 | | COMMITTEE CAMPAIGN TREASURER NAME | 57.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 - 17.75 |
| Additional Pages | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 17 CONTRIBUTION TOTALS | 1. TOTAL PLEDG | L POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE | \$ 0 |
| 4/9/20 | | POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ |
| EXPENDITURE TOTALS | | POLITICAL EXPENDITURES OF \$100 OR LESS, S ITEMIZED | \$ 0 |
| | 4. TOTAL | POLITICAL EXPENDITURES | \$ 190,00 |
| CONTRIBUTION BALANCE | | POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D | * O |
| OUTSTANDING LOAN TOTALS | | PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH DAY OF THE REPORTING PERIOD | \$ 0 |
| 18 AFFIDAVIT | | I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code. | |
| A Notan | SSE F. BERMEA, JR. Public, State of Te n. Expires 05-19-20 tory ID 13066856 | Karen Mendio | date or Officeholder |
| AFFIX NOTARY STAM | P/SEALABOVE | | IC(+) |
| Sworn to and subsc | | by the said Naren Mendiola Tanguma, to certify which, witness my hand and seal of office. | , this the |
| Signature of officer a | fu administering oath | Jesse F Bermen Jv Printed name of officer administering oath | Votany Public of Texas Title of officer administering oath |

SUBTOTALS - C/OH

| 19 | -2 | | | | | |
|-----|--|--------------------|--|--|--|--|
| | KAREN MENDIOLA TANGUMA | | | | | |
| 21 | SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT | | | | |
| 1. | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | | | | |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | | | | |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | | | | |
| 4. | SCHEDULE E: LOANS | \$ | | | | |
| 5. | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ | | | | |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | | | | |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ | | | | |
| 8. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 190.00 | | | | |
| 9. | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ | | | | |
| 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 | \$ | | | | |



EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

| Candidate/Officeholder/Politica | The Instruction Guide explains how to complete this form. |
|---|--|
| 1 Total pages Schedule F4: | 2 FILER NAME RAKEN MENDIOLA TANGUMA 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEM | ZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 190,00 |
| 5 Date 10-16-18 | 6 Payee name USPS |
| 7 Amount (\$) \$\frac{4}{90.00}\$ | 8 Payee address; City; State; Zip Code 10410 Perrin Beitel Rd. Sam Antonio, Tx. 78224 |
| 9 TYPE OF EXPENDITURE | Political Non-Political |
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Postage Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| 11 Complete ONLY if direct expenditure to benefit C/O | Candidate / Officeholder name Office sought Office held |
| Date | Payee name |
| Amount (\$) | Payee address; City; State; Zip Code |
| TYPE OF EXPENDITURE | Political Non-Political |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/O | Candidate / Officeholder name Office sought Office held H |
| | RECEIVE D |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

AMENDMENT: FORM ACTA CANDIDATE MODIFIED REPORTING DECLARATION PG 2 13 CANDIDATE RAREN MENDIOLA TANGUMA NAME 14 MODIFIED NEW REPORTING COMPLETE THIS SECTION ONLY IF YOU ARE DECLARATION CHOOSING MODIFIED REPORTING ** This declaration must be filed no later than the 30th day before the first election to which the declaration applies. .. ** The modified reporting option is valid for one election cycle only. ** (An election cycle includes a primary election, a general election, and any related runoffs.) · Candidates for the office of state chair of a political party may NOT choose modified reporting. .. I do not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report. Karen Mendola Tanglina

This appointment is effective on the date it is filed with the appropriate filing authority.

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us or Fax this form to (512) 463-8808 or mail to Texas Ethics Commission P.O. Box 12070
Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC

For more information about where to file go to: https://www.ethics.state.tx.us/whatsnew/NewFilersGettingStarted.html

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

| 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 KAREN | Mandala | OFFICE USE ONLY |
| NAME | . <u> </u> | | Date Received |
| " and or | NICKNAME LAST | SUFFIX | DECEIVED |
| | TANGUMA | | 10/25/18 D |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | 23110 DRAGON ROC | | State of Texas |
| Change of Address | ELMENDORF, TX. | 78112 | City of Sandy Oaks Est 2014 |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE PHONE NUMBER (210) 300-6405 | EXTENSION | Date Hand-delivered or Date Postmarked |
| 6 CAMPAIGN | MS / MRS / MR FIRST | 0 MI | Receipt # Amount \$ |
| TREASURER NAME | KAREN | | Date Processed |
| | NICKNAME LAST TANGUMA | SUFFIX | Date Imaged |
| 7 CAMPAIGN | STREET ADDRESS (NO PO BOX PLEASE); APT / S | SUITE #; CITY; STATE; | ZIP CODE |
| TREASURER ADDRESS | 23110 DRAGON | Rock | |
| (Residence or Business) | ELMENDORF, Tx. 78 | 3112 | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER PHONE NUMBER PHONE NUMBER | EXTENSION | |
| 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 10/16/2018 | THROUGH 10/ | 25/2018 |
| 11 ELECTION | ELECTION DATE | ELECTION TYPE | |
| | Month Day Year Primary | Runoff Other Description Special | 1 |
| 12 OFFICE | OFFICE HELD (if any) | 13 OFFICE SOUGHT (if known |) |
| | Mayor | Mayor | |
| | GO ТО | PAGE 2 | |

EXPENDITURES MADE BY CREDIT CARD

State of TSCHEDULE F4 City of Sandy Oaks

Est 2014

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

| Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica | | | | |
|--|---|--|--|--|
| | The Instruction Guide explains how to complete this form. | | | |
| 1 Total pages Schedule F4: | 2, FILER NAME KAREN MENDIOLA TANGUMA 3 Filer ID (Ethics Commission Filers) | | | |
| 4 TOTAL OF UNITEM | ZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 142.59 | | | |
| 5 Date 10-24-18 | Office Depot | | | |
| 7 Amount (\$) 50.00 | 8 Payee address; City; State; Zip Code 2321 5-W-Military DR | | | |
| 9 TYPE OF EXPENDITURE | San Antonio Texas, 7800 78224 Non-Political | | | |
| 10 | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | |
| PURPOSE OF EXPENDITURE | Advertisement Expense Check if Austin, TX, officeholder living expense | | | |
| 11 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH KAREN MENDIOLA Mayor Mayor | | | | |
| Date 10-24-18 | Payee name TANGUMA OFFICE DEPOT | | | |
| Amount (\$) 92.59 | Payee address; City; State; Zip Code 2321 5-W- Mulitary DA. San Antonio TX 78224 | | | |
| TYPE OF EXPENDITURE | Political Non-Political | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Pavertisch mant Check if Austin, TX, officeholder living expense | | | |
| Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH KAREN MENDINA TANGUMA MAYOT MAYOT | | | | |
| | | | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | |

State of Texas City of Sandy Oaks Est 2014

DECEIVED KLY

SUBTOTALS - C/OH

| 19 | 19 FILER NAME RAREN Mendiala Tangung 20 Filer ID (Ethics Commission Filers) | | | | |
|-----|--|--------------------|--|--|--|
| 21 | SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT | | | |
| 1. | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | | | |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | | | |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | | | |
| 4. | SCHEDULE E: LOANS | \$ | | | |
| 5. | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ | | | |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | | | |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ | | | |
| 8. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 142.59 | | | |
| 9. | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ | | | |
| 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 | \$ | | | |

State of Texas City of Sandy Oaks CANDIDATE / OFFICEHOLDER Est 2014 FORM C/OH **CAMPAIGN FINANCE REPORT** KLI **COVER SHEET PG 2** 14 C/OH NAME 15 Filer ID (Ethics Commission Filers) 16 NOTICE FROM POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO **POLITICAL** SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S COMMITTEE(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 COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME Additional Pages COMMITTEE CAMPAIGN TREASURER ADDRESS 17 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED 2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, 3. \$ **TOTALS** UNLESS ITEMIZED **TOTAL POLITICAL EXPENDITURES** 4. CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ BALANCE OF REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE \$ LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 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. JOSHUA HERNANDEZ Notary Public, State of Texas Comm. Expires 08-18-2021 Notary ID 131250901 Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEALABOVE Sworn to and subscribed before me, by the said_ day of C to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

State of Texas of Sandy Oaks Est 2014

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

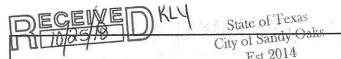
BINGBOOK

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

| | ns/Donations Made E | | Food/Beverage Expense Gift/Awards/Memorials Expense | Polling Expense Printing Expense | Travel In District Travel Out Of District |
|----------------------------|---|----------------|--|-------------------------------------|---|
| Candidate Credit Card P | e/Officeholder/Politic | al Committee | Legal Services | Salaries/Wages/Contract Labo | Other (enter a category not listed above) |
| Oredit Gard / | dyment | | The Instruction Guide explain | s how to complete this form | m. |
| 1 Total pa | ges Schedule G: | 2 FILER NA | ME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | | 5 Payee nam | ne | | ¥ 8 |
| 6 Amoun | nt (\$) | 7 Payee add | lress; City; State; Zip | o Code | |
| polit | mbursement from tical contributions nded | | | | |
| | RPOSE OF NDITURE | (a) Category (| See Categories listed at the top of this scl | Check if trave | el outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense |
| | te ONLY if direct iture to benefit C/C | | ate / Officeholder name | Office sought | Office held |
| Date | | Payee nan | ne | | |
| Amour | nt (\$) | Payee add | dress; City; State; Zi | o Code | 3 |
| poli | mbursement from itical contributions ended | | | | |
| | RPOSE OF NDITURE | Category | See Categories listed at the top of this sc | Check if trav | el outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense |
| | te ONLY if direct iture to benefit C/C | | ate / Officeholder name | Office sought | Office held |
| Date | | Payee nan | ne | | |
| Amour | nt (\$) | Payee add | dress; City; State; Zi | p Code | * |
| poli | imbursement from itical contributions ended | | | | |
| | RPOSE OF NDITURE | Category | See Categories listed at the top of this sc | Check if trav | rel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense |
| | ete ONLY if direct iture to benefit C/C | | ate / Officeholder name | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | |



MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| The I | nstruction Guide explains how to complete this form. | 1 Total pages Schedule A1: |
|-----------------|--|---------------------------------------|
| FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| Date | 5 Full name of contributor | |
| Principal occup | ation / Job title (See Instructions) 9 Employ | yer (See Instructions) |
| Date | Full name of contributor out-of-state PAC (ID#: | Amount of contribution (\$) |
| | Contributor address; City; State; Zip Cod | le |
| Principal occup | ation / Job title (See Instructions) Employ | yer (See Instructions) |
| Date | Full name of contributor | Amount of contribution (\$) |
| | Contributor address; City; State; Zip Cod | le |
| Principal occup | eation / Job title (See Instructions) Emplo | yer (See Instructions) |
| Date | Full name of contributor out-of-state PAC (ID#: | Amount of contribution (\$) |
| | Contributor address; City; State; Zip Cod | de |
| Principal occup | pation / Job title (See Instructions) Emplo | oyer (See Instructions) |
| | | |
| , | | |
| | | * 5 |

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

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

| 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: | OFFICE USE ONLY | | |
|---|---|--|--|--|
| 3 CANDIDATE / MS/MRS/MR OFFICEHOLDER NAME | KAREN MENDIOLA | Date Received | | |
| NICKNAME | LAST SUFFIX | × | | |
| 4 ORIGINAL REPORT TYPE Candidate July 15 Office Bith day before of Torright Alach Source Month Day 4 ORIGINAL REPORT TYPE January 15 July 15 Source Bith day before of Month Day | appointment (officeholder only) Final report | Date Hand-del Ded Date Postmarked Receipt # Amon \$ | | |
| COVERED . | SOIS THROUGH 6/30/2018 | Date Imaged | | |
| 6 EXPLANATION OF CORRECTION | | | | |
| I was whan campaign lon | tributions on my & | place | | |
| . 925 | | erro aronoal | | |
| 7 AFFIDAVIT | for lunning for re ele | etrongene I | | |
| | I swear, or affirm, under penalty of perjury, report is true and correct. | that this corrected mode | | |
| | Check ONLY if applicable: | - Ly-G | | |
| | Semiannual reports: I swear, or affirm, the made in good faith and without an intent sent the information contained in the repo | to mislead or to misropro | | |
| CHRISTIAN EDUARDO MORALES Notary Public, State of Texas Comm. Expires 09-21-2019 | | y after the date I learned | | |
| AFFIX NOTARY STAMP / SEAL ABOVE | Harm Mendela Signature of Candidate or O | Janauna Officeholder V | | |
| Sworn to and subscribed before me, by the sai | d Karen Mendiola Tanguma this the 28 | 3 day of <u>September</u> , | | |
| | | | | |
| Signature of officer administering oath | Christian Educardo Morales Printed name of officer administering oath | Title of officer administering oath | | |
| Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections | | | | |



CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

| 14 C/OH NAME | REN 1 | MENDIOLA TANGUMA | 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 | | | | |
| | | COMMITTEE ADDRESS | 1 | | |
| | SPECIFIC | | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | | |
| Additional Pages | | 4 | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | |
| | | | | | |
| | | 1 | | | |
| 17 CONTRIBUTION TOTALS | 1. TOTAL PLEDG | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 0.00 | | |
| - 2 | 2. TOTAL | POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 167.00 | | |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | | \$ 0.00 | | |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 150,00 | | |
| CONTRIBUTION BALANCE | 5. TOTAL OF RE | \$ 0.00 | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL | \$ \$2,00 | | | |
| 18 AFFIDAVIT | | | - Andrews - Andr | | |
| | | I swear, or affirm, under penalty of perjury, true and correct and includes all information under Title 15, Election Code. | that the accompanying report is on required to be reported by me | | |
| | | Fren Mendelle Signature of Candidate | d Jong Usas | | |
| | | | | | |
| AFFIX NOTARY STA | MP/SEALABOVE | | | | |
| Sworn to and subs | scribed before me | , by the said Karen Mendiola Tanguma | $_$, this the $_28$ | | |
| day of Septem | ber, 20 18 | , to certify which, witness my hand and seal of office. | | | |
| 300, 50 | | | | | |
| | | Christian Eduardo Morales | Notary | | |
| Signature of officer | r administering oath | Printed name of officer administering oath | Title of officer administering oath | | |



SUBTOTALS - C/OH

| HAREN MENDIOLA TANGUMA 20 Filer ID (Ethics Commission | | | | | |
|--|--------------------|--|--|--|--|
| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT | | | | |
| SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | | | | |
| 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$167.00 | | | | |
| 3. SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | | | | |
| 4. SCHEDULE E: LOANS | \$ | | | | |
| 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ | | | | |
| 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | | | | |
| 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 | \$156.00 | | | | |
| 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 | \$ | | | | |
| | | | | | |

NON-MONETARY (IN-KIND) POLITICA CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 5 Date Amount of In-kind contribution 6 Full name of contributor out-of-state PAC (ID# Contribution \$ State; Zip Code Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See Instructions) entributor's job title (FOR JUDICIAL) (See Instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 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) Amount of In-kind contribution Full name of contributor ut-of-state PAC (ID#: Date Contribution \$ description Contributor address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL)(See Instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Contributor's job title (FOR JUDICIAL) (See Instructions) Contributor's principal occupation (FOR JUDICIAL) 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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS



KLY

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

| The Instruction Guide explains how to complete this form. | | | | |
|---|--|---|---------|--|
| 1 Total pages Schedule G: | 2 FILER NAME | 3 Filer ID (Ethics Commission F | Filers) | |
| 7 | KAREN MENDIOLA | TANGUMA | | |
| 4 Date | 5 Payee name | | | |
| 5/27/18 | Screen-Tech A | RTS | | |
| 6 Amount (\$) #150 | 7 Payee address; City; State; Zip Code Morning T | Tail | | |
| Reimbursement from political contributions intended | San Antonio, tx. | 78247 | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| OF EXPENDITURE | Advertising Expense | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | |
| 9 Complete ONLY if direct | Candidate / Office holder name | Office sought Office held | | |
| expenditure to benefit C/C | KAREN MENDIOLA | TANGUMA Mayor May | 101 | |
| Date | Payee name | <i>U</i> | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | |
| Reimbursement from political contributions intended | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/6 | Candidate / Officeholder name DH | Office sought Office held | | |
| Date | Payee name | eji v f prize | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | |
| Reimbursement from political contributions intended | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/4 | Candidate / Officeholder name OH | Office sought Office held | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEEDED | | |