Candidat Canipaigi				_			cov		ORM C/ON HEET PG 1
The C/OH instruction G	uide explains how	o complet	e this form.	1	Filer ID (Ethic	Commission Filers)	2 Tota	al pages f	iled:
3 CANDIDATE / OFFICEHOLDER	MS / MRS (MC)		ardo	-	THE STATE STATE STATES	A		OFFICE	USE ONLY
NAME	NICKNAME Gerry	Loza	ast ano			SUFFIX	Oct.	,	25,2021
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	AP	PT / SUITE #;	CITY;	STATE	ZIP CODE	1 .	1:24	
Change of Address 5 CANDIDATE/	AREA CODE	FHONE I	NUMBER		EXTEN	SION	Date Ha	ind-delivers	d or Date Postmarked
OFFICEHOLDER PHONE							Oct	ber	25,2021
6 CAMPAIGN TREASURER	;uS/MRS/MR		FIRST Avier			MŁ	Receipt		Amount 8
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7 CAMPAIGN TREASURER ADDRESS	3008 Vera		PLEASE); .PI	/ SUITE #		inbu rg		TX	78539
(Rusidence or Business)		ONONE 1						garage agreed part agree to the second	Salakova da de
8 CAMPAIGN TREASURER PHONE	(956)	793-	-8299		EXTÉN	SION			
9 REPORT TYPE	January 15		30th day befor	re election	n [] R	lunoff			after campaign appointment for Only)
	July 15	Z	8th day before	election		xceeded Modified reporting Limit		Final Repo	ort (Atlach C/OH - FR)
10 PERIOD	Month	D£y	Year			Manth	Day	Yea	ar
COVERED	10	. 04	2021		THROUGH	10	/ 25	20)21
11 ELECTION	ELECTION D.Y	TE Year	Prima	sy	Runoff	ELECTION TYPE	E		
	11/02	2021	☑ Gane	rai	Special	Discription			
12 OFFICE	OFFICE HELD (if any)		1			E SOUGHT (if know	•	described difference	
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	EHOLDER T	HESE EXPENDITU	IRES MAY	PTED OR POLITIC	AL EXPENDITURES E WITHOUT THE CAL	MADE BY PO	R OFFICEHO	DMMITTEES TO SUPPORT DLDER'S KNOWLEDGE OR OF SUCH EXPENDITURES.
COMMITTEE(S)	COMMITTEE TYPE	COMMITTE		QOINED I	O REPORT TRUSK	PORMATION GNET IF	THE T RECEI	AC NOTICE (or sour expenditures.
Auditional Pages	GENERAL	COMMITTE	EF ADDRESS			re value om commente premium p		mercen trans	**************************************
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		COMMITT	EE C/MP/JGN	TREASL	DRER ADDRESS	to the standard design of the standard of the	CONTRACTOR OF THE PARTY OF THE		The second secon
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			GUI	UPA	1GE 2				

····		e/officehold finance repo	_	cc	FORM C/OH OVER SHEET PG 2
15	C/OH NAME	A. Lozano		16 Filer	ID (Ethics Commission Filers)
17	CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PO	OLITICAL CONTRIBUTIONS (OTHER GUARANTEES OF LOANS, OR E ELECTRONICALLY)	R THAN	\$
		2. TOTAL POLITICAL CO	ONTRIBUTIONS S. LOANS, OR GUARANTEES OF L	OANS)	\$ 110,577.81
	EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	DLITICAL EXPENDITURE.		\$
		4. TOTAL POLITICAL EX	PENDITURES		\$ 14,740°
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON- OF REPORTING PERIOR	TRIBUTIONS MAINTAINED AS OF T	HE LAST DAY	\$ 14,740°3 \$ 101,450!3
	OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO LAST DAY OF THE REP	UNT OF ALL OUTSTANDING LOANS ORTING PERIOD	S AS OF THE	\$
		Please c	omplete either option b	elov:	
(1)	Affidavit	ELIZABET RODRIGUEZ Notary Public, State of Texas Comm. Expires 03-14-2023 Notary ID 12848143-8	7	elov:	
Sw	NOTARY STAMP/SEAL	before me by Gerando "(which, witness my hand and seal of of Elizab	Gerry Lozano the	is the 35	day of October
	EROL LA	3	e of officer administering oath		Otan Public Title of officer administering gath
		A CONTRACTOR OF THE PROPERTY O	OR		•
(2)	Unsworn Declaratio				
Vly	name is		, and my date of t	oirth is	
		(street)	(city)	(state)	(zip code) (country)
Exe	cuted in	County, State of	, on the day of _		, 20
			Signature of	Candidate/Office	eholder (Declarant)

SUSTONALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME 20 Filer ID (Ethics	thics Commission Filers)	
Gerado A. Lozano		
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11057781	
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	\$ 14,7400	
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	\$	
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/O	рн \$	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	S	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	s	

MOMEYARY POLITICAL CONTRIBUTIONS

SCHEDULE AT

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Gerardo A. L	ozano	
4 Date	5 Full name of contributor	7 Amount of contribution (\$)
10114रिय	Linebarger, Goggan, Blair 6 Contributor address; City: State; Zip Code 1512 Lone Star way Edinburg TX 785	
8 Principal occu	pution / Job title (See Instructions) 9 Employer (See	Instructions)
		_
Date	Full name of contributorout-of-state PAC (IDX:	Amount of contribution (\$)
	Gerando Lozano	
(chuitz	Contributor address; City; State; Zip Code	2
		2077.8
Principal occup	pation / Job title (See Instructions) Employer (See	Instructions)
Date	Full name of contributor	Amount of contribution (\$)
	Gerardo Lozano	
	Contributor address; City; State; Zip Code	÷
10/12/51		7,000 00
Principal occup	pation / Job title (See Instructions) Employer (See	Instructions)
Datc	Full name of contributor	
ı	Full name of contributor out-of-state P/.C (IL.E	Amount of contribution (\$)
		Amount of contribution (\$)
io hylu	Gerardo Lorano Contributor address; City; State; Zip Code	
io k5lu	Gerardo Lorano	
And the second second second	Gerardo Lorano	100,000
And the second second second	Contributor address; City; State; Zip Code	100,000
And the second second second	Contributor address; City; State; Zip Code	100,000
AMERICAN VIOLENCE VIO	Contributor address; City; State; Zip Code	100,000
And the second second second	Contributor address; City; State; Zip Code	100,000

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

If the requested inf	ormation is	not applicable, DO No	OT include t	his page in the re	port.	
	Administrative and the second	EXPENDITURE CA	ATEGORIES I	OR BOX 8(a)	· · · · · · · · · · · · · · · · · · ·	
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1015/21	Iv	na Peña				
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8 PURPOSE	(a) Category	y (See Categorius listed at the top	of this schedule)	(b) Description		
OF EXPENDITURE	Cont	ribution /	pona from	Donati	0n	
	(c)	Check if travel outside of Texas. Com	plete Sche fule T	Check if . sustin	n, TX, officeholder livin	g expense
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10/6/21	_Le	o Gomez			-	
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10/6/21	Ros	sa Pena				
Amount (\$)	Payee ac			City;	State;	Zip Code
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4 Date	5 Payee name		
10/14/21	Sabernation Foot	ball Booster	
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
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EXPENDITURE	Polling Expense		ivio
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r rotar pages senedale Fr.		A. Lozano			3 Filer ID (Ethics	Commission Filers)
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4 Date	5 Payee name					
10/16/21	Edinburg Profession	al Firefighters				
6 Amount (5)	7 Payee address;	City;	State; Zip Code			
50000	212 W. McInty	ve St Edinbur	9 TX 78539			
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10/16/21	Irene Garra					
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SCHEDULE F1

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	EXPENDITURE CATEGO	RIES FOR BOX 8(a)	The state of the s
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4 Date	5 Payee name		
10/21/21	Beatriz Cantu	· · · · · · · · · · · · · · · · · · ·	
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10/23/21	Rafael Silva		
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