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:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR) FIRST	MI	OFFICE	E USE ONLY
	HERRY Palace	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #:	STATE; ZIP CODE	10-07-19	P03:53 IN
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	40.71	
OFFICEHOLDER PHONE			Date Hand-delivere	d or Date Postmarked
6 CAMPAIGN TREASURER	MS MR FIRST	MI	Receipt #	Amount \$
NAME	NICKNAME LAST	SUFFIX	Date Processed	
	Lee CRUZ		Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL	JITE #; CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (956) 289-6299	EXTENSION		
9 REPORT TYPE	January 15 30th day before ele			fter campaign appointment er Only)
	July 15 8th day before elec	Exceeded \$500 limit	Final Repo	rt (Attach C/OH - FR)
10 PERIOD COVERED	07/01/19	THROUGH 09	Day Yea / 26 / 19	
11 ELECTION	Month Day Year Primary 11/05/19 General	Runoff Other Description Special		
12 OFFICE	Edinburg Municipa Court Judge	L Edinburg Count Ji	Munici	pal
	GO ТО	PAGE 2		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	oribio "	Terry" Palacios 15 F	iler ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR M	NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT ONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFO	T THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	PLEDGI	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS, OR IBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 20,500.00
EXPENDITURE TOTALS	3. TOTAL UNLESS	POLITICAL EXPENDITURES OF \$100 OR LESS, SITEMIZED	\$
	4. TOTAL	POLITICAL EXPENDITURES	\$ 8,503.44
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY ORTING PERIOD	\$ 539.74
OUTSTANDING LOAN TOTALS	6. TOTAL P	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$ 0
18 AFFIDAVIT	OLGA REYES Notary ID #2952264 My Commission Expires Apr 28, 2021	I swear, or affirm, under penalty of perjury true and correct and includes all informati under Title 15, Election Code.	
AFFIX NOTARY STAMI	~~~~	Signature of Candidate	e or Officeholder
Sworn to and subscr	ribed before me, b	by the said <u>Jorebio</u> " <u>Jerry</u> " Pulacio to certify which, witness my hand and seal of office.	S, this the
Signature of officer a	dministering oath	Olga Reys Printed name of officer administering oath	Totary Public Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	TORIDIO "Terry" Palacios 20 Filer ID (Ethics	Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULEA1: MONETARY POLITICAL CONTRIBUTIONS	\$ 20,500.00
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	\$ 8503.44
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/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense **Event Expense** Loan Repayment/Reimbursement Office Overhead/Rental Expense Accounting/Banking Solicitation/Fundraising Expense Fees Consulting Expense Food/Beverage Expense Transportation Equipment & Related Expense Polling Expense Contributions/Donations Made By Travel In District Gift/Awards/Memorials Expense **Printing Expense** Candidate/Officeholder/Political Committee Travel Out Of District 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: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date Conference Center 7 Payee address; 1903 South Closner Edinburg 2191.61 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Campaign Kickoff EVENT EXPENSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Castilleja Amount (\$) Payee address: Zip Code 500.00 Edinburg Tr. 18539 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Jailer/Banner Campaign Material EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Leo Castilleja Amount (\$) Payee address; City; Edinburg 1,000.00 1420 Fay ST. upaign Matrial **PURPOSE** nailer Banner OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By 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/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: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) erry" Palacios 4 Date 5 Payee name 6 Amount Zip Code 18501 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE campaign material OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Castellejo Amount (\$) Payee address: Zip Code Edinburg 150.00 Description PURPOSE Campaign material EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Rio Dutdoor Payee address; 1217 S. Clasner, BIVd. Edinburg TX. 78539 Amount (\$) 1,500.00 Category (See Categories listed at the top of this schedule) Description PURPOSE advertising OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking **Event Expense** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Fees Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Transportation Equipment & Related Expense Polling Expense Contributions/Donations Made By Travel In District Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Legal Services Credit Card Payment Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Terry" Palacios 4 Date 6 Amount McColl Rd. Edinburg 18539 8 (a) Category (See Categories listed at the top of this schedule) (b) Description Embroidery/Shirts PURPOSE EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH office Depot Amount (\$) Zip Code 55.68 McAllen TX. Description **PURPOSE** Pens, Marken, Labels OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Sam's Club Amount (\$) 7601 N. 10th ST. 67.15 McAllen Category (See Categories listed at the top of this schedule) Description **PURPOSE** Event Expense TUM OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Politing Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

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: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Terry" Palacios 4 Date dy owens BIVd. HCAVEN TX. 78504 6 Amount (\$) 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Robert Vela H.S. FFA Booster Club Amount (\$) Zip Code E. Canton Rd Edinburg Category (See Categories listed at the top of this schedule) Description **PURPOSE** nation EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Pavee name Amount (\$) Payee address; City; State: Zip Code Category (See Categories listed at the top of this schedule) Description PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Date 7 Amount of contribution (\$) 1500.00 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of contribution (\$) Margaret + Jerry Moore Contributor address; City; State; Zip Code 312 Clubhowse M. Edinburg TX. 7854 250.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) 1,500.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) 50.00 78572 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.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Toribio "Terry" Palacios 5 Full name of contributor ___ out-of-state_PAC (ID#: 4 Date 7 Amount of contribution (\$) Daniel Quirino Longovia 6 Contributor address; City; 4610 S. Closner Edinburg 750.00 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Rene A. Anzaldua dress; 2658 Winburg 1,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID# Amount of contribution (\$) A-Action Bail Bonds McMilen 78502 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date out-of-state PAC (ID#: Amount of contribution (\$) W. Pecan Bird. McAllen Tr. 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.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) A-Fast Bail Bond/L-Irma Montemayor 6 Contributor address; City; State; Zip Code 710 E. El Cibblo Rd Edinburg TX. 78542 1,000.00 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) A Cantu Bail Bond Contributor address; City; State 1506 W. Pecan Blud. HCAINEN TX. 1,000,00 State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Date out-of-state PAC (ID#: Amount of contribution (\$) Normanz. Gordova, Ir. Bail Bond Contributor address: City: City: State: Zip. 1206 Susanm. Edinburg Tx. 785 1,500.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) 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.

www.ethics.state.tx.us

Revised 9/26/2019

Forms provided by Texas Ethics Commission

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Pribio "Terry" Palacios	3 Filer ID (Ethics Commission Filers)
4 Date 9/12/19	5 Full-game of contributor Rod victore PAC (ID#:	7 Amount of contribution (\$) 250.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	ctions)
Date 9116119	Full name of contributor out-of-state PAC (ID#:) Rudy Moveno Contributor address; City; State; Zip Code 5526 N. 1040 MCANEN TX. 78504	Amount of contribution (\$)
	5526 N. 104N McAllen TX. 78504	1,000.
Principal occup	eation / Job title (See Instructions) Employer (See Instructions)	ctions)
Date 911619	Full name of contributor out-of-state PAC (ID#:) 10% Bail Bonds	Amount of contribution (\$)
1110171	10% Bail Bonds Contributor address; City: State: Zip Code 1401 W.E. Pancho Blanco Rd. Phan, 7x. 78577	500.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	ctions)
Date	Full name of contributor	Amount of contribution (\$)
9/2019	Aurelio Garza Contributor address; City; State; Zip Code 1208 S. McColl Rd Edinburg TX. 78539	300.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	otions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS I	

MONE	TARY POLITICAL CONTR	IBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete thi	is form.	1 Total pages Schedule A1:
2 FILER NAME	ribio "Terry" Palacio:	S	3 Filer ID (Ethics Commission Filers)
* Date	5 Full name of contain to		7 Amount of contribution (\$)
412019	Me don G. Ni Xon 6 Contributor address; City; 2008 Dorado M. Mission	State; Zip Code	1,000.00
Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date		C (ID#:)	Amount of contribution (\$)
1120119	Arnado Maldonado contributor address; City; 2810 Leolie ST. Edinburg T	State; Zip Code 7. 78539	1,000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAG	C (ID#:)	Amount of contribution (\$)
7/20/19	Elida Garza Contributor address; City; 4108 N. 21st ST. McAllen	State; Zip Code	500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	; (ID#:)	Amount of contribution (\$)
1/20/19	Luis G. Alamia Contributor address; City; 1508 Yance ST Edinburg	State; Zip Code	100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
	ATTACH ADDITIONAL COPIES O	OF THIS SCHEDULE AS NE	EDED

The Instruction Guide explains how to complete this form. 2 FILER NAME Toribio "Terry" Palacios	1 Total pages Schedule A1:
Toribio "Terra" Palacios	The state of the s
	3 Filer ID (Ethics Commission Filers)
5 Full name of contributor Out-of-state PAC (ID#:	7 Amount of contribution (\$)
9/25/19 Ramona Salinas 6 Contributor address; City; State; Zip Code 9/115 Calle Hicky Edinburg Tk. 78542	600.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Pate Full name of contributor Full name of contributor Out-of-state PAC (ID#:) 9/as/19 J.R.Ramirez	Amount of contribution (\$)
1601 W. Trenton Rd. Edinburg TX. 78539	500.00
Principal occupation / Job title (See Instructions) Employer (See Instruc	tions)
Pate Full name of contributor Out-of-state PAC (ID#:	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Pate Full name of contributor Out-of-state PAC (ID#:	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ons)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE	EDED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Date 7 Amount of contribution (\$) 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date ut-of-state PAC (ID# Amount of contribution (\$) City; Zip Code Mission Parkway # 1 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Brodie Lane ST. Austin Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Daniel R. Reyes, Attorney Atlaw Contributor address; Lip Code 4016 H. 22nd ST McAllen TX. 78504 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.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date The Law office of Jorge Munoz 6 Contributor address; City; State; Zip Code 210 W. Cano ST. STEA Edinburg TX, 78539 7 Amount of contribution (\$) 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 (\$) 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 (\$) Contributor address; City; State; Zip Code 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.