

# 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:

6

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS MR

FIRST

MI

Toribio

NICKNAME

LAST

SUFFIX

"Terry"

Palacios

OFFICE USE ONLY

Date Received

12-02-20 P04:24 RCVD

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Audra

NICKNAME

LAST

SUFFIX

Lee

Cruz

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(956) 289-6299

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(Officeholder Only)

☐ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

10 / 28 / 19

THROUGH

Month

Day

Year

11 / 06 / 19

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 05 / 19

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other  
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Edinburg Municipal  
Court Judge

13 OFFICE SOUGHT (if known)

Edinburg Municipal  
Court Judge

GO TO PAGE 2

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Toribio "Terry" Palacios

3 Filer ID (Ethics Commission Filers)

4 Date

11/01/19

5 Full name of contributor

☐ out-of-state PAC (ID#)

Ballesteros Gonzalez Law Firm

7 Amount of contribution (\$)

1,500.00

6 Contributor address;

3900 N. 10th ST.  
Suite-980

City;

State;

Zip Code

McAllen TX. 78501

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/01/19

Full name of contributor

☐ out-of-state PAC (ID#)

Juan E. Garcia

Amount of contribution (\$)

2,500.00

Contributor address;

509 W. 2nd ST. Rio Grande city TX 78582

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.



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

Toribio "Terry" Palacios

15 Filer 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

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

4,000.00

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

7,402.14

EXPENDITURE  
TOTALS

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

7,787.67

CONTRIBUTION  
BALANCE

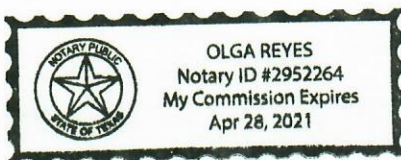
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

0

OUTSTANDING  
LOAN TOTALS

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Toribio "Terry" Palacios this the 2nd day of December 2019, to certify which, witness my hand and seal of office.

Olga Reyes

Signature of officer administering oath

Olga Reyes

Printed name of officer administering oath

Notary Public

Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Toribio "Terry" Palacios

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,000.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7402.14
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> 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  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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 F1:	2 FILER NAME <b>Toribio "Terry" Palacios</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>10/28/19</b>	5 Payee name <b>Julie Olivarez</b>	
6 Amount (\$) <b>2,000.00</b>	7 Payee address; <b>1803 Crawfish Dr.</b> City: <b>Edinburg</b> State: <b>TX.</b> Zip Code: <b>78539</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Salaries/wages/Labor</b>	(b) Description
	(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 <b>11/04/19</b>	Payee name <b>American Express</b>		
Amount (\$) <b>2,837.63</b>	Payee address; <b>P.O. Box 650448</b> City: <b>Dallas</b> State: <b>TX.</b> Zip Code: <b>75265</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Credit card payment</b>	Description <b>Event Expense</b>	
	<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 <b>11/04/19</b>	Payee name <b>Lowe's</b>		
Amount (\$) <b>114.51</b>	Payee address; <b>P.O. Box 530914</b> City: <b>Atlanta</b> State: <b>GA</b> Zip Code: <b>30353</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Credit card payment Campaign material</b>	Description <b>Sand</b>	
	<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**



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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:	2 FILER NAME <b>Toribio "Terry" Palacios</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>11/06/19</b>	5 Payee name <b>Arnoldo Cantu, Jr. Campaign</b>			
6 Amount (\$) <b>1,000.00</b>	7 Payee address; <b>505 W. 9th Street</b>	City; <b>San Juan</b>	State; <b>TX.</b>	Zip Code <b>78589</b>

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Campaign Contribution</b>	(b) Description
	(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 <b>11/6/19</b>	Payee name <b>Joe Vega</b>			
Amount (\$) <b>400.00</b>	Payee address; <b>4604 S. Sugar Rd. apt. 421</b>	City; <b>Edinburg</b>	State; <b>TX.</b>	Zip Code <b>78539</b>

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	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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Date <b>11/6/19</b>	Payee name <b>Reyna Campos</b>			
Amount (\$) <b>1,050.00</b>	Payee address; <b>8301 Humprey St.</b>	City; <b>Edinburg</b>	State; <b>TX.</b>	Zip Code <b>78542</b>

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>Food / Beverages</b>
	<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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