

**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: 60	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Roberto	FIRST Roberto	MI C	OFFICE USE ONLY
	NICKNAME	LAST Trevino	SUFFIX	
	4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 15975 San Antonio TX 78212			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ()	PHONE NUMBER -	EXTENSION	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Henry	MI B	
	NICKNAME	LAST Gonzalez III	SUFFIX	
	7 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 419 Thelma San Antonio TX 78212 (Residence or Business)			
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 569-8489	EXTENSION	
9 REPORT TYPE	January 15: Semi-Annual			
10 PERIOD COVERED	Month Day Year 7/1/2016		THROUGH	Month Day Year 12/31/2016
11 ELECTION	ELECTION DATE Month Day Year 5/6/2017		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
	12 OFFICE OFFICE HELD (if any) Council District 1		13 OFFICE SOUGHT (if known) Council District 1	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Roberto C Trevino	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <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.								
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	<table border="1" style="width:100%"> <tr> <td style="width:25%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME		COMMITTEE ADDRESS		COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME								
	COMMITTEE ADDRESS								
	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS								

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 35070.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 8483.78
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 66506.99
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.

***** Electronically Certified *****

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Roberto C Trevino, this the 17th day of January, 2017, 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

SUBTOTALS - COH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME Roberto C Trevino		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 35070.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		\$ 0
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 8483.78
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$ 0
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 0
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$ 0
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 28

2 FILER NAME
Roberto C Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
7/5/2016

5 Full name of contributor out-of-state PAC (ID# _____)
Kamil Alavi

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**1201 Avenue B
San Antonio, TX 78215**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
7/5/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**4515 San Pedro Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
7/5/2016

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

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**7113 San Pedro Ave #111
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/10/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**300 West French Place
San Antonio, TX 78212**

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 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 10/10/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Agather	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 300 West French Place San Antonio, TX 78212		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jim Reed	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 7317 Ashton Place San Antonio, TX 78229		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bob Braubach	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 106 S St. Marys St. #200 San Antonio, TX 78205		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barbara Witte-Howell	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 105 Magnolia Dr. San Antonio, TX 78212		
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: 3 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gabriel Durand Hollis	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 14603 Huebner Rd. Bldg. 18 San Antonio, TX 78230		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Henry B Gonzalez III	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 419 Thelma Dr San Antonio, TX 78212		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lyn Selig	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 108 Barrera San Antonio, TX 78210		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PRATIK PATEL	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 4801 NW LOOP 410 #530 SAN ANTONIO, TX 78229		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 28

2 FILER NAME
Roberto C Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
10/21/2016

5 Full name of contributor out-of-state PAC (ID# _____)
Corinna Richter

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**300 Joliet Ave.
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
10/25/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**127 Burr Rd. #4
SaliAntonio, TX 78209**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/27/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**4515 San Pedro Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/28/2016

Full name of contributor out-of-state PAC (ID# _____)
J. CARY BARTON

Amount of contribution (\$)
400.00

Contributor address; City; State; Zip Code
**700 N St Marys Street
san antonio, TX 78205**

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:
5 of 28

2 FILER NAME
Roberto C Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
10/31/2016

5 Full name of contributor out-of-state PAC (ID# _____)
Hamilton Barton

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**4103 Sylvan Oaks
San Antonio, TX 78229**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
10/31/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**999 E Basse Rd
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/31/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 13380
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/31/2016

Full name of contributor out-of-state PAC (ID# _____)
G. Wade Caldwell

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**700 N St Marys St
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)

Employer (See instructions)

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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:
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2 FILER NAME
Roberto C Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
10/31/2016

5 Full name of contributor out-of-state PAC (ID# _____)
Hector Cardenas

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**539 W Elsmere Pl
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
10/31/2016

Full name of contributor out-of-state PAC (ID# _____)
J. Cary Barton

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**700 N St Marys St
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/31/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**131 W Agarita
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/31/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**405 E Mulberry Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

Employer (See instructions)

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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: 7 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 10/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linebarger Goggan Blair & Sampson LLP	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Campbell	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 524 King William San Antonio, TX 78204		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) TC Frost	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patricia De Berry	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 330 Corona Ave San Antonio, TX 78209		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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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:
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2 FILER NAME
Roberto C Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
10/31/2016

5 Full name of contributor out-of-state PAC (ID# _____)
Alfonso Chiscano

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**7887 Broadway St
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
10/31/2016

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**18 Gallery Oak
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/31/2016

Full name of contributor out-of-state PAC (ID# _____)
Edward Collins III

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**114 Camp St
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/31/2016

Full name of contributor out-of-state PAC (ID# _____)
Edward Cross II

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2 Laurel Pl
San Antonio, TX 78209**

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:
9 of 28

2 FILER NAME
Roberto C Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
10/31/2016

5 Full name of contributor out-of-state PAC (ID# _____)
Michael Hogan

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**1535 Yosemite Oaks Cir
San Antonio, TX 78213**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
10/31/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**405 E Mulberry Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/31/2016

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1220 E Commerce
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
10/31/2016

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**405 E Myrtle
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

Employer (See instructions)

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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:
10 of 28

2 FILER NAME
Roberto C Trevino 3 Filer ID (Ethics Commission Filers)

4 Date 10/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Suzanne Lewis	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 1305 S College St Charlotte, NC 28203		

8 Principal occupation / Job title (See instructions) 9 Employer (See instructions)

Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Lifshutz	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 215 W Travis St San Antonio, TX 78205		

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roger Perez	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 427 S St Marys St San Antonio, TX 78205		

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frank Monaco	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code PO Box 1325 La Vernia, TX 78121		

Principal occupation / Job title (See instructions) Employer (See instructions)



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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: 11 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 10/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dan Parma	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 18585 Sigma Rd San Antonio, TX 78258		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marmon Mok LLP	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 700 N St Marys St San Antonio, TX 78205		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raba-Kistner PAC Inc	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 10/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Louis Terrazas	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 11542 Whisper Breeze St San Antonio, TX 78230		
Principal occupation / Job title (See instructions)		Employer (See instructions)



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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: 12 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 10/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leonel Reyes Jr	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 1201 Belknap San Antonio, TX 78212		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dan Star	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 7334 Blanco Rd San Antonio, TX 78216		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jocelyn Strauss	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 210 Canyon Dr San Antonio, TX 78209		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis S Fisher	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 306 Barrera San Antonio, TX 78210		
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: 13 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/1/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Derek E Naiser	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 104 Summer Gln Boerne, TX 78006		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yurani Y Nava	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 611 Dipper Dr San Antonio, TX 78216		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curtis R Johnson	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 3703 Broadway San Antonio, TX 78209		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon V Hartman	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1202 Bitters Rd San Antonio, TX 78216		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/1/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pat Frost	7 Amount of contribution (\$) 150.00
6 Contributor address; City; State; Zip Code 604 Garraty Road San Antonio, TX 78209		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack Guenther	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 153 Treeline Park San Antonio, TX 78209		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Rose Brown	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 48 Vineyard San Antonio, TX 78257		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rebecca Waldman	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 112 E Rosewood Ave San Antonio, TX 78212		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/1/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lionel Sosa	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code PO Box 830106 San Antonio, TX 78283		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wan-Yu Elisa Chan	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 613 Contadora San Antonio, TX 78258		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/1/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Louis Barrios	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 1102 Morgans Peak San Antonio, TX 78258		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John S Beauchamp	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 606 W El Prado San Antonio, TX 78212		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 16 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Carlson	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 210 Geddington Shavano Park , TX 78249		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David M Adelman	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 146 Charles Road San Antonio, TX 78209		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John A Ernst	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 9386 Huebner Rd San Antonio, TX 78240		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Colleen Ernst	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 9386 Huebner Rd San Antonio, TX 78240		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tony Davila	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 6727 Lazyridge Dr San Antonio, TX 78229		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eric H Hedlund	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 911 Central Parkway North San Antonio, TX 78232		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grady Jolley	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 201 Wollschlaeger Boerne, TX 78006		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack J Spector	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 227 Devine Rd San Antonio, TX 78212		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amy Sugarman	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 1646 Fawn Bluff San Antonio, TX 78248		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kathleen Weir Vale	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 102 E Hollywood Ave San Antonio, TX 78212		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) D. Ash Construction Management LLC	Amount of contribution (\$) 300.00
Contributor address; City; State; Zip Code 3140 Falling Brook San Antonio, TX 78258		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Wilson	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 7 Westelm Garden San Antonio, TX 78230		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 19 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Janice Wilson	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 7 Westelm Garden San Antonio, TX 78230		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clinton L Wynn	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 15614 Cloud Top San Antonio, TX 78248		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephen Yndo	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 935 S Alamo San Antonio, TX 78205		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Analco Gonzalez	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 118 Broadway San Antonio, TX 78205		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1:
20 of 28

2 FILER NAME
Roberto C Trevino 3 Filer ID (Ethics Commission Filers)

4 Date 12/19/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Feik	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 727 Elizabeth Rd San Antonio, TX 78209		

8 Principal occupation / Job title (See instructions) 9 Employer (See instructions)

Date 12/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luis Gonzalez	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 123 Roy Smith San Antonio, TX 78215		

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steven Douglas Krauskopf	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 13151 N Hunters Circle San Antonio, TX 78230		

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blaine Lopez	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 8531 Espanola Drive Helotes, TX 78023		

Principal occupation / Job title (See instructions) Employer (See instructions)



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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Suzanne Harter	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 8 Winston Woods Dr Houston, TX 77024		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steven Harter	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 8 Winston Woods Dr Houston, TX 77024		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Dice	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 438 W Grammercy Place San Antonio, TX 78212		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eduardo Belmares	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 5919 Pearl Pass San Antonio, TX 78222		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Greehey	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code PO Box 780489 San Antonio, TX 78278		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sam Dawson	Amount of contribution (\$) 350.00
Contributor address; City; State; Zip Code 129 Turnberry Way San Antonio, TX 78230		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lisa Astorga	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 311 Basin Drive San Antonio, TX 78216		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jose Alberto Vidal	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 118 Broadway San Antonio, TX 78205		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1:
23 of 28

2 FILER NAME
Roberto C Trevino 3 Filer ID (Ethics Commission Filers)

4 Date 12/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) George Weron	7 Amount of contribution (\$) 500.00
	6 Contributor address; City; State; Zip Code 18200 Blanco Springs San Antonio, TX 78258	

8 Principal occupation / Job title (See instructions) 9 Employer (See instructions)

Date 12/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carlos Uresti	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 924 McCullough San Antonio, TX 78215	

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 12/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jessica McGuire	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 11051 Andover Peak San Antonio, TX 78254	

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Enrique Alfonso Mejia	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 1117 S. 1st McAllen, TX 78501	

Principal occupation / Job title (See instructions) Employer (See instructions)



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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1:
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2 FILER NAME
Roberto C Trevino 3 Filer ID (Ethics Commission Filers)

4 Date 12/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Enrique Mejia	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code 1117 South 1st Street McAllen, TX 78501	

8 Principal occupation / Job title (See instructions) 9 Employer (See instructions)

Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Federica Padilla	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 409 Argo Ave San antonio, TX 78209	

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Laurence Seiterle	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 118 Broadway St #324 San Antonio, TX 78205	

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis Phillips	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 13507 Shelbriitt Rd San Antonio, TX 78249	

Principal occupation / Job title (See instructions) Employer (See instructions)



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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ricardo Rincon	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 1800 N. Broadway Street McAllen, TX 78501		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosario Rincon	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1800 N. Broadway Street McAllen, TX 78501		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Valadez	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 306 Pearl Pkwy #2409 San Antonio, TX 78215		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernando Trevino	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1800 N. Broadway Street Mcallen, TX 78501		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26 of 28
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Felix Ziga	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 130 Greenhaven Dr. San Antonio, TX 78201		
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jennifer Alonzo	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 518 Cherry Ridge San Antonio , TX 78213		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andrew Kellis Chandler	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 135 Larchmont Dr San Antonio , TX 78209		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murray Van Eman	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1118 Grey Oak San Antonio, TX 78213		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1:
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2 FILER NAME
Roberto C Trevino 3 Filer ID (Ethics Commission Filers)

4 Date 12/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Edwards	7 Amount of contribution (\$) 250.00
	6 Contributor address; City; State; Zip Code 340 Arcadia Place San Antonio, TX 78209	

8 Principal occupation / Job title (See instructions) 9 Employer (See instructions)

Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martha Martinez-Flores	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 204 Clay St San antonio, TX 78204	

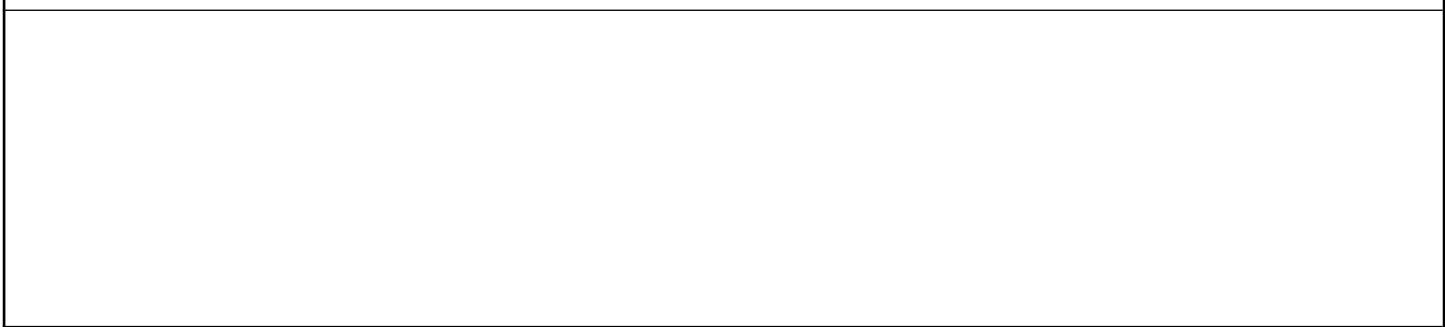
Principal occupation / Job title (See instructions) Employer (See instructions)

Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abe Juarez	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 415 West French Place San Antonio, TX 78212	

Principal occupation / Job title (See instructions) Employer (See instructions)

Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paul Karam	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 208 Shannon Lee San Antonio, TX 78216	

Principal occupation / Job title (See instructions) Employer (See instructions)



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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1:
28 of 28

2 FILER NAME
Roberto C Trevino 3 Filer ID (Ethics Commission Filers)

4 Date 12/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eddie Hernandez	7 Amount of contribution (\$) 500.00
	6 Contributor address; City; State; Zip Code 110 Antrim San Antonio, TX 78218	

8 Principal occupation / Job title (See instructions)	9 Employer (See instructions)
---	-------------------------------

Date 12/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christopher Hill	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 5111 Broadway San Antonio, TX 78209	

Principal occupation / Job title (See instructions)	Employer (See instructions)
---	-----------------------------

Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See instructions)	Employer (See instructions)
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Contributor address; City; State; Zip Code	8 Amount of Contribution \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of Contribution \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)
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)		

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PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1 of 1
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input 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?	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)

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 1 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 7/5/2016	5 Payee name Google	
6 Amount (\$) 15.00	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Email hosting
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 7/5/2016	Payee name Pirya	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 7/5/2016	Payee name Pirya	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 7/5/2016	5 Payee name Piryx	
6 Amount (\$) 4.25	7 Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 7/22/2016	Payee name Norma Denham & Assoc	
Amount (\$) 1000.00	Payee address; City; State; Zip Code PO Box 461753 San Antonio, TX 78246	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Fundraising Management
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 8/1/2016	Payee name Amazon.com	
Amount (\$) 69.96	Payee address; City; State; Zip Code 1516 2nd Avenue Seattle, WA 98101	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Display easels
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 3 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 8/1/2016	5 Payee name Amazon.com	
6 Amount (\$) 94.55	7 Payee address; City; State; Zip Code 1516 2nd Avenue Seattle, WA 98101	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Speaker stands for PA System
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

Date 8/2/2016	Payee name Google	
Amount (\$) 15.00	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Email hosting
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

Date 9/2/2016	Payee name Google	
Amount (\$) 15.00	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Email hosting
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 4 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2016	5 Payee name Home Depot	
6 Amount (\$) 15.00	7 Payee address; City; State; Zip Code 1066 Central Parkway San Antonio, TX 78232	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Materials for banner
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/1/2016	Payee name PC Creative Services	
Amount (\$) 166.21	Payee address; City; State; Zip Code 10711 Hillpoint #100 San Antonio, TX 78217	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Postage
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/3/2016	Payee name Google	
Amount (\$) 15.00	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Email hosting
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 5 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 10/10/2016	5 Payee name Piryx	
6 Amount (\$) 39.80	7 Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/10/2016	Payee name Piryx	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/13/2016	Payee name Piryx	
Amount (\$) 8.20	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 6 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2016	5 Payee name Amazon.com	
6 Amount (\$) 56.87	7 Payee address; City; State; Zip Code 1516 2nd Avenue Seattle, WA 98101	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Microphones & cables for PA system <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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/17/2016	Payee name Piryx	
Amount (\$) 8.20	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees <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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/17/2016	Payee name Piryx	
Amount (\$) 20.05	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees <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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 7 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2016	5 Payee name Piryx	
6 Amount (\$) 8.20	7 Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/19/2016	Payee name Edera Osteria Enoteca	
Amount (\$) 1155.48	Payee address; City; State; Zip Code 1903 San Pedro Avenue San Antonio, TX 78212	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Event Expense
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/20/2016	Payee name Allens Flowers	
Amount (\$) 151.50	Payee address; City; State; Zip Code 2101 McCullough Ave San Antonio, TX 78212	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Event Expense
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 8 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 10/20/2016	5 Payee name Piryx	
6 Amount (\$) 8.20	7 Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/21/2016	Payee name Piryx	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/21/2016	Payee name Piryx	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 9 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 10/21/2016	5 Payee name Piryx	
6 Amount (\$) 20.05	7 Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/25/2016	Payee name Piryx	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 10/27/2016	Payee name Piryx	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 10 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 10/28/2016	5 Payee name Piryx	
6 Amount (\$) 31.90	7 Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 11/2/2016	Payee name Google	
Amount (\$) 15.00	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Email hosting
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 11/21/2016	Payee name Sam Ash	
Amount (\$) 52.86	Payee address; City; State; Zip Code 25 NE Loop 410 San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Audio Cables
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 11 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 11/21/2016	5 Payee name Sam Ash	
6 Amount (\$) 54.11	7 Payee address; City; State; Zip Code 25 NE Loop 410 San Antonio, TX 78216	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Microphone & stand for PA system
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/2/2016	Payee name Google	
Amount (\$) 15.00	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Email hosting
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/5/2016	Payee name PC Creative Services	
Amount (\$) 1188.82	Payee address; City; State; Zip Code 10711 Hillpoint #100 San Antonio, TX 78217	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Mailers
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 12 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 12/5/2016	5 Payee name Norma Denham & Assoc	
6 Amount (\$) 610.50	7 Payee address; City; State; Zip Code PO Box 461753 San Antonio, TX 78246	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Fundraising Management <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 Roberto Trevino	Office sought Council District 1 Office held Council District 1
Date 12/9/2016	Payee name Cards Direct	
Amount (\$) 305.71	Payee address; City; State; Zip Code 12750 Merit Drive #900 Dallas, TX 78251	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Holiday cards <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 Roberto Trevino	Office sought Council District 1 Office held Council District 1
Date 12/12/2016	Payee name Broadway Bank	
Amount (\$) 10.00	Payee address; City; State; Zip Code 1177 NE Loop 410 San Antonio, TX 78209	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Fees <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 Roberto Trevino	Office sought Council District 1 Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 13 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 12/13/2016	5 Payee name GoFundMe	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 1010 2nd #1770 San Diego, CA 92101	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Brandon Castillo Funeral Donation
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

Date 12/14/2016	Payee name Duabe	
Amount (\$) 2665.00	Payee address; City; State; Zip Code 201 Groveton San Antonio, TX 78210	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Website development
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

Date 12/15/2016	Payee name FexEd Office	
Amount (\$) 32.27	Payee address; City; State; Zip Code 13420 San Pedro Ave San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Event Expense
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 14 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 12/19/2016	5 Payee name United States Post Office	
6 Amount (\$) 28.20	7 Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Postage
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/19/2016	Payee name Piryx	
Amount (\$) 8.20	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/19/2016	Payee name Piryx	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 15 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 12/20/2016	5 Payee name Piryx	
6 Amount (\$) 8.20	7 Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/20/2016	Payee name United States Post Office	
Amount (\$) 28.20	Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Postage
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/20/2016	Payee name United States Post Office	
Amount (\$) 18.80	Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Postage
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 16 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 12/20/2016	5 Payee name Hallmark Creations	
6 Amount (\$) 17.16	7 Payee address; City; State; Zip Code 255 E Basse Road San Antonio, TX 78209	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Holiday cards
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/21/2016	Payee name Piryx	
Amount (\$) 4.25	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/23/2016	Payee name Office Depot	
Amount (\$) 5.08	Payee address; City; State; Zip Code 13484 San Pedro Ave San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Office supplies
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 F1: 17 of 17	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 12/26/2016	5 Payee name Piryx	
6 Amount (\$) 39.80	7 Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date 12/27/2016	Payee name Piryx	
Amount (\$) 39.80	Payee address; City; State; Zip Code 144 2nd St San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Transaction Fees
	<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 Roberto Trevino	Office sought Council District 1
		Office held Council District 1
Date	Payee name	
Amount (\$)	Payee 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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
 Fees
 Food/Beverage Expense
 Gifts/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 F2: 1 of 1	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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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
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Date	Payee name
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PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.	1 Total pages Schedule F3: 1 of 1
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2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Name of person from whom investment is purchased

	6 Address of person from whom investment is purchased; City; State; Zip Code
	7 Description of investment
	8 Amount of investment (\$)

Date	Name of person from whom investment is purchased

	Address of person from whom investment is purchased; City; State; Zip Code
	Description of investment
	Amount of investment (\$)

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 1 of 1	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
--	---	--

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
--	-------------

5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description <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
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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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
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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 G: 1 of 1	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee Name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description <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	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee 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	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee 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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PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/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)
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The Instruction Guide explains how to complete this form

1 Total pages Schedule H: 1 of 1	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
		<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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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 1	2 FILER NAME Roberto C Trevino	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
1 of 1

2 FILER NAME
Roberto C Trevino

3 Filer ID (Ethics Commission Filers)

4 Date	5 Name of person from whom amount is received	8 Amount (\$)
 6 Address of person from whom amount is received; City; State; Zip Code	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
 Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
 Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
 Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 1 of 1
2 FILER NAME Roberto C Trevino		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
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Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT**

FORM C/OH - FR

**The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••**

C/OH NAME
Roberto C Trevino

Filer ID (Ethics Commission Filers)

SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

OFFICEHOLDER

•• Complete this section *only* if you are an officeholder. ••

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder