

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

9326

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <div style="font-size: 2em; text-align: center;">5</div>												
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST MI NICKNAME LAST SUFFIX <div style="font-size: 1.5em; text-align: center;">Carlos H. Barrera</div>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">OFFICE USE ONLY</th> </tr> <tr> <td style="width:50%; padding: 2px;">Date Received</td> <td style="width:50%; padding: 2px; text-align: center;">2019 JAN 14 PM 4:22</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 2px;">Date Hand-delivered or Date Postmarked</td> </tr> <tr> <td style="width:50%; padding: 2px;">Receipt #</td> <td style="width:50%; padding: 2px;">Amount \$</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Processed</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Imaged</td> </tr> </table>		OFFICE USE ONLY		Date Received	2019 JAN 14 PM 4:22	Date Hand-delivered or Date Postmarked		Receipt #	Amount \$	Date Processed		Date Imaged	
OFFICE USE ONLY															
Date Received	2019 JAN 14 PM 4:22														
Date Hand-delivered or Date Postmarked															
Receipt #	Amount \$														
Date Processed															
Date Imaged															
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="font-size: 1.2em; text-align: center;">509 W. 11th St 5th Floor AUSTIN, TX 78701</div>														
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em; text-align: center;">(512) 470-8320</div>														
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST MI NICKNAME LAST SUFFIX <div style="font-size: 1.5em; text-align: center;">Irma D. Barrera</div>														
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="font-size: 1.2em; text-align: center;">509 W. 11th St 5th Floor Austin TX 78701</div>														
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em; text-align: center;">(512) 417-4443</div>														
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)														
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <div style="font-size: 1.5em; text-align: center;">7 / 01 / 18 12 / 31 / 18</div>														
11 ELECTION	ELECTION DATE Month Day Year <div style="font-size: 1.5em; text-align: center;">/ /</div>	ELECTION TYPE <input 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) <div style="font-size: 1.2em; text-align: center;">Judge; Travis County Court @ Law #8</div>	13 OFFICE SOUGHT (if known)													

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

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

\$ 0

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

\$ 0

EXPENDITURE
TOTALS

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

\$ 50⁰⁰

4. TOTAL POLITICAL EXPENDITURES

\$ 1300⁰⁰

CONTRIBUTION
BALANCE

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

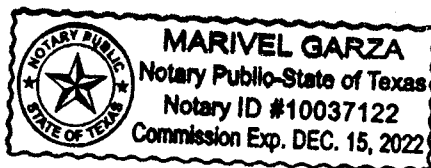
\$ 8979.86

OUTSTANDING
LOAN TOTALS

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

\$ 200

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

[Handwritten Signature]

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Carlos H. Barrera, this the 14th

day of January 20 19, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Marivel Garza
Printed name of officer administering oath

Notary Public-State of Texas
Title of officer administering oath

SUBTOTALS - JC/OH

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

19 FILER NAME <i>Carlos H. Barrera</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$
2.	<input type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>1300</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Carlos H. Barreva</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>8/20/18</i>	5 Payee name <i>LA PRENSA newspaper.</i>	
6 Amount (\$) <i>500.</i>	7 Payee address; City; State; Zip Code <i>1704 E 5th St.; Austin, TX 78702</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Political Ad.</i>	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>7/31/18</i>	Payee name <i>Tejano Democrats.</i>	
Amount (\$) <i>500.</i>	Payee address; City; State; Zip Code <i>At Large, Austin TX</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contribution for event SPONSORSHIP.</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>9/17/18</i>	Payee name <i>Capital Area Progressive Democrats</i>	
Amount (\$) <i>250.</i>	Payee address; City; State; Zip Code <i>P.O. Box 413; Austin TX 78767</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contribution for event SPONSORSHIP.</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form. 1 Total pages Schedule L: 1

2 FILER NAME Carlos H. Barrera 3 Filer ID (Ethics Commission Filers)

LENDER INFORMATION 4 Name of lender
Carlos H. Barrera
 5 Lender address; City; State; Zip Code 78701
509 W. 11th St. 5th floor, Austin TX

GUARANTOR INFORMATION 6 Name of guarantor
N/A
 not applicable 7 Guarantor address; City; State; Zip Code

LENDER INFORMATION Name of lender
 Lender address; City; State; Zip Code

GUARANTOR INFORMATION Name of guarantor
 not applicable Guarantor address; City; State; Zip Code

LENDER INFORMATION Name of lender
 Lender address; City; State; Zip Code

GUARANTOR INFORMATION Name of guarantor
 not applicable Guarantor address; City; State; Zip Code

LENDER INFORMATION Name of lender
 Lender address; City; State; Zip Code

GUARANTOR INFORMATION Name of guarantor
 not applicable Guarantor address; City; State; Zip Code

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