

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

9705

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form. **1** Filer ID **2** Total pages filed:  
4

**3** CANDIDATE / OFFICEHOLDER NAME  
MS / MRS / MR FIRST MI  
Dyana  
NICKNAME LAST SUFFIX  
Limon Mercado

**OFFICE USE ONLY**  
Date Received  
2020 JUL 15 11:11  
FILED FOR RECORD  
DANA K. BEAUVOIR  
COUNTY CLERK  
TRAVIS COUNTY TEXAS  
Date Hand Delivered or Date Postmarked  
Receipt # Amount  
Date Processed  
Date Imaged

**4** CANDIDATE / OFFICEHOLDER MAILING ADDRESS  
ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE  
2100 Mimosa Dr  
Austin, TX 78745  
 Change of Address

**5** CAMPAIGN TREASURER NAME  
MS / MRS / MR FIRST MI  
Aimee  
NICKNAME LAST SUFFIX  
Cunningham

**6** CAMPAIGN TREASURER ADDRESS  
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
628 Brandon Way  
Austin TX, 78733  
(Residence or Business)

**7** CAMPAIGN TREASURER PHONE  
AREA CODE PHONE NUMBER EXTENSION  
512-657-8631

**8** REPORT TYPE  
 January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (officeholder only)  
 July 15  8th day before election  Exceeded \$500 limit  Final Report (Attach C/OH-FR)

**9** PERIOD COVERED  
Month Day Year THROUGH Month Day Year  
06/12/2020 THROUGH 06/30/2020

**10** ELECTION  
ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  Other  
 General  Special

**11** OFFICE  
OFFICE HELD (if any)  
Travis County Party Chair

**12** OFFICE SOUGHT (if known)  
County Judge

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

2 of 4

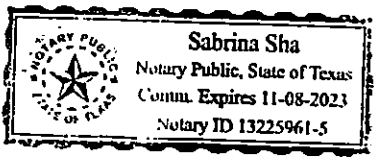
<b>13 C / OH NAME</b> Limon Mercado, Dyana	<b>14 Filer ID</b>
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table border="1" style="width:100%"> <tr> <td style="width:20%"><b>COMMITTEE TYPE</b></td> <td><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td><b>COMMITTEE ADDRESS</b></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td><b>COMMITTEE CAMPAIGN TREASURER NAME</b></td> </tr> <tr> <td></td> <td><b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b></td> </tr> </table>	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	<input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>		
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>								
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>								
	<input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>								
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>									

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	24.34
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 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.



*Dyana*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Dyana Limon-Mercado, this the 15 day of July, 2020, to certify which, witness my hand and seal of office.

<i>Sabrina Sha</i> _____ Signature of officer administering	Sabrina Sha _____ Printed name of officer administering	<i>Notary</i> _____ Title of officer administering oath
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**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Limon Mercado, Dyana	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 24.34
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
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.

<b>1</b> Total pages Schedule F4: Sch: 1/1 Rpt: 4/4	<b>2</b> FILER NAME Limon Mercado, Dyana	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 06/19/2020	<b>6</b> Payee name Go Daddy
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<b>7</b> Amount (\$) \$24.34	<b>8</b> Payee address; City; State; Zip Code 14455 N Hayden Rd Scottsdale, AZ 85260
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website fees
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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