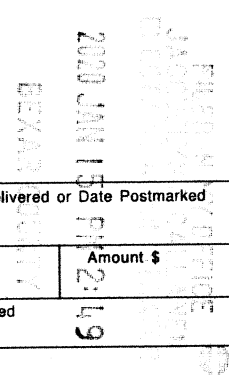


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**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: 21	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR	FIRST Jose	MI A	OFFICE USE ONLY
	NICKNAME	LAST Trevino	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; P.O. Box 2026		CITY; STATE; ZIP CODE Adkins, TX 78101	
	AREA CODE PHONE NUMBER EXTENSION (210) 596-6354			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 596-6354			Date Hand-delivered or Date Postmarked
	6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Julio	MI
NICKNAME		LAST Gonzalez	SUFFIX Jr.	Date Processed 2:49
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 1251 SW Military Drive		CITY; STATE; ZIP CODE San Antonio, Texas 78221	Date Imaged
	AREA CODE PHONE NUMBER EXTENSION (210) 927-0622			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 927-0622			
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 07 / 01 / 2019 THROUGH 12 / 31 / 2019			
11 ELECTION	ELECTION DATE Month Day Year / /		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Sheriff-Bexar County	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

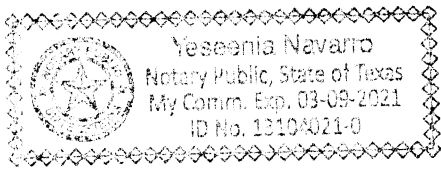
14 C/OH NAME Jose A Trevino **15 Filer ID (Ethics Commission Filers)**

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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> Additional Pages	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	\$ NA
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 13,395.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ NA
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,287.09
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 13,395.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ NA

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jose A Trevino Jr., this the 15th day of January, 2020, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Yeseenia Navarro
Printed name of officer administering oath

Notary
Title of officer administering oath

SUBTOTALS - C/OH

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

19 FILER NAME

Jose A 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	\$ 13,395.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7,287.09
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	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1/1

2 FILER NAME

Jose A Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
07/11/2019

5 Full name of contributor out-of-state PAC (ID#: _____)
Manuel Longoria

7 Amount of contribution (\$)
\$500.00

6 Contributor address; City; State; Zip Code

Mill Ranch 2 #7 Rocksprings, TX 78880

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

Date
07/15/2019

Full name of contributor out-of-state PAC (ID#: _____)
Darren Westfall

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code

P.O. Box 2074 Pleasanton, TX 78064

Principal occupation / Job title (See Instructions)

Law Enforcement

Employer (See Instructions)

Date
07/17/2019

Full name of contributor out-of-state PAC (ID#: _____)
Raul Banasco

Amount of contribution (\$)
\$250.00

Contributor address; City; State; Zip Code

P.O. Box 11222 Clayton, MO 63105

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date
07/21/2019

Full name of contributor out-of-state PAC (ID#: _____)
Reynaldo Lujan

Amount of contribution (\$)
\$300.00

Contributor address; City; State; Zip Code

10716 barnsford Lane Helotes, TX 78023

Principal occupation / Job title (See Instructions)

Law Enforcement

Employer (See Instructions)

San Antonio Park Police

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:

11

2 FILER NAME

Jose A Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
07/26/2019

5 Full name of contributor out-of-state PAC (ID#: _____)
Donna Barr

7 Amount of contribution (\$) \$100.00

6 Contributor address; City; State; Zip Code

1806 Tierra Nueva San Antonio, TX 78263

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

Date
07/28/2019

Full name of contributor out-of-state PAC (ID#: _____)
Rachel Hidalgo

Amount of contribution (\$) \$100.00

Contributor address; City; State; Zip Code

11826 Ware Seguin Road Schertz, TX 78154

Principal occupation / Job title (See Instructions)

Medical

Employer (See Instructions)

Christus Children's Hospital

Date
08/02/2019

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

Amount of contribution (\$) \$250.00

Contributor address; City; State; Zip Code

4729 Stanteen San Antonio, TX 78263

Principal occupation / Job title (See Instructions)

Insurance Agent

Employer (See Instructions)

Farmer's Insurance

Date
08/19/2019

Full name of contributor out-of-state PAC (ID#: _____)
Karl Hempel

Amount of contribution (\$) \$100.00

Contributor address; City; State; Zip Code

12903 Blanche Coker San Antonio, TX 78216

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

11

2 FILER NAME

Jose A Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
08/19/2019

5 Full name of contributor out-of-state PAC (ID#: _____)
David Santos

7 Amount of contribution (\$)
\$200.00

6 Contributor address; City; State; Zip Code
16803 Parkstone Blvd. San Antonio, TX 78232

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

Date
08/21/2019

Full name of contributor out-of-state PAC (ID#: _____)
Robert Adelman

Amount of contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
120 East Wildwood Dr. San Antonio, TX 78212

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date
08/21/2019

Full name of contributor out-of-state PAC (ID#: _____)
Diana Adelman

Amount of contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
120 East Wildwood Dr. San Antonio, TX 78212

Principal occupation / Job title (See Instructions)

Accountant

Employer (See Instructions)

Self-employed

Date
08/25/2019

Full name of contributor out-of-state PAC (ID#: _____)
Frank Bellino

Amount of contribution (\$)
\$50.00

Contributor address; City; State; Zip Code
10010 Raspberry Oak San Antonio, TX 78223

Principal occupation / Job title (See Instructions)

Law Enforcement

Employer (See Instructions)

East Central ISD

Type text here

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

11

2 FILER NAME

Jose A Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
08/29/2019

5 Full name of contributor out-of-state PAC (ID#: _____)
John Kuntz

7 Amount of contribution (\$)
\$250.00

6 Contributor address; City; State; Zip Code

130 E. Travis San Antonio, TX 78205

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Self-employed

Date
09/05/2019

Full name of contributor out-of-state PAC (ID#: _____)
Ian Lovestock

Amount of contribution (\$)
\$250.00

Contributor address; City; State; Zip Code

5903 Babcock Rd. Apt. 401 San Antonio, TX. 78240

Principal occupation / Job title (See Instructions)

Educator

Employer (See Instructions)

UIW/SHSU

Date
09/20/2019

Full name of contributor out-of-state PAC (ID#: _____)
Rose Castillo

Amount of contribution (\$)
\$50.00

Contributor address; City; State; Zip Code

4931 Stoneleigh San Antonio, TX 78220

Principal occupation / Job title (See Instructions)

Administration

Employer (See Instructions)

San Antonio ISD

Date
09/23/2019

Full name of contributor out-of-state PAC (ID#: _____)
Joseph Dean McCracken

Amount of contribution (\$)
\$1,000.00

Contributor address; City; State; Zip Code

11446 Whisper Green San Antonio, TX 78230

Principal occupation / Job title (See Instructions)

Physician

Employer (See Instructions)

Self-employed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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