CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form	Filer ID (Ethics Commission Filers) n.	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MR. BRIAN NICKNAME LAST DRTE	SUFFIX	OFFICE USE ONLY Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #; 135 CEDAR ELM AREA CODE PHONE NUMBER (512) 784 - 16	TX 78633 EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MR. BRIAN NICKNAME LAST ORTEG	SUFFIX	Receipt # Amount \$ Date Processed Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); AF	PT / SLITTE #; CITY; STATE; VE GEORGE OWN, T	ZIP CODE 78633		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (518) 784-16	87			
9 REPORT TYPE	January 15 30th day be	efore election Runoff Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year O1 /17/2019	THROUGH $\frac{Month}{\mathcal{O}4}$	Day Year / 02/2019		
11 ELECTION	Month Day Year	ELECTION TYPE imary Runoff Other Description Pereral Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	Rustee, Place 2		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 G/OH NAME . MR. BRII	AN KEVIN	Detego	15 Filer ID (Ethics Commission Filers)			
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR IN SUPPORT THE CAND KNOWLEDGE OR CO	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	COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
Additional Pages						
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION TOTALS	1. TOTAL PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	AN \$ 35.00			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 25.00 \$ 25.00			
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, SITEMIZED	\$			
	4. TOTAL POLITICAL EXPENDITURES		\$ 1076.29			
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	\$ 1076.29 THE \$ 25.00			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00		THE \$ 0.00			
18 AFFIDAVIT	1					
	CARMEN DON NOTARY PUBLIC-STATE OF 1 10# 1 1 8 6 9 8 8 COMM. EXP. 02-29-20		perjury, that the accompanying report is formation required to be reported by me			
		Signature of Can	didate or Officeholder			
AFFIX NOTARY STAM	IP/SEALABOVE					
Sworn to and subsc			, this the			
CANCER OF		to certify which, witness my hand and seal of office.	c to Board of Iruste			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILERNAME 20 Filer ID (Ethics C	ommission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1076.29
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$.
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(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)

Credit Card Payment	Credit Card Payment The Instruction Guide explains how to complete this form.				
1 Total pages Schedule G:	2 FILER NAME MR. BRIAN KEUIN DRTEGO 3 Filer ID (Ethics Commission Filers)				
4 Date	5 Payee name	V			
03/06/2019	SUPER CHEAP SITNS				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
1039.76	9200 WATERFORD CENT	RE BLVD	Suit E 100		
Reimbursement from political contributions intended	Anstin, TX 78758				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF	PRINTING EXPERSE	Check if travel outside of	Texas. Complete Schedule T.		
EXPENDITURE	Thirty Experse	Check if Austin, TX,	officeholder living expense		
9 Complete ONLY it direct expenditure to benefit C/0	Candidate / Officeholder name	Office sought	Office held		
	BRIAN KEVIN Ontego	School 7 RMS1	er, Place 2 NONE		
Date	Payee name				
03/25/19	HOME Depot				
Amount (\$)	Payee address; City; State; Zip Code	tout TV	79/2/-		
P36.53	Payee address; City; State; Zip Code 1303 RIVERY BLVO GEOM	egeloux, 12	70620		
Reimbursement from political contributions intended	•				
DUDDOCE	Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF	OTHER (Sign Mounting Sopplies)	Check if travel outside of	Texas. Complete Schedule T.		
EXPENDITURE	OTTICE (SIGNIFICATION 12) 1-111-5	Check if Austin, TX, o	officeholder living expense		
Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name	Office sought	Office held		
onportation to borrow or	BRIAN KEVIN ORTEGO SO	hool Trustee, P.	her 2 NONE		
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
Reimbursement from political contributions intended					
	Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF		Check if travel outside of	Texas. Complete Schedule T.		
EXPENDITURE		Check if Austin, TX, o	officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					