

626 Freiling • San Antonio, TX 78213 • 210.365.0926

January 10, 2019

Office of the Superintendent
San Antonio ISD
141 Lavaca
San Antonio, TX 78210

RE: January 2019 Semiannual Campaign Finance Report

To Whom It May Concern:

As required by state law, I am submitting my January semiannual campaign finance report due January 15, 2019.

I filed my Campaign Treasurer Appointment form via US Certified Mail to the attention of Mrs. Carmen Vazquez-Gonzalez, Executive Director of the Office of Governmental and Community Relations on October 1, 2018. It was received and signed for on October 3, 2018.

Should you have any questions, please feel free to contact me at 210-365-0926.

Yours in service,

Chris Castro

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: <div style="text-align: right; font-size: 1.2em;">12</div>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Chris	MI 	<div style="text-align: center; font-weight: bold; font-size: 1.1em;">OFFICE USE ONLY</div> <hr/> <p>Date Received</p> <p style="font-size: 1.2em; font-family: cursive;">Rec'd by US Mail. See attached postmark</p> <p style="font-size: 1.5em; font-family: cursive; text-align: center;">SAM</p> <p>Date Hand-delivered or Date Postmarked 1-10-19</p> <hr/> <p>Receipt # R23054126820-06 Amount \$ \$1.62</p> <p>Date Processed 1-15-19</p> <hr/> <p>Date Imaged 1-15-19</p>
	NICKNAME	LAST Castro	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 626 Freiling	CITY; STATE; ZIP CODE San Antonio, TX 78213		
<input type="checkbox"/> Change of Address				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (210)	PHONE NUMBER 365-0926	EXTENSION 	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Rachel	MI 	
	NICKNAME	LAST Ponce	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 1607 W. Mariposa Dr.		CITY; STATE; ZIP CODE San Antonio, TX 78201	
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 241-6126	EXTENSION 	
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 10 / 01 / 2018		Month Day Year 12 / 31 / 2018	
11 ELECTION	ELECTION DATE Month Day Year 05 / 04 / 2019	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) N/A		13 OFFICE SOUGHT (if known) San Antonio ISD School Board of Trustees SMD 6	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME **Chris Castro** 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
		N/A
	COMMITTEE ADDRESS	N/A
	COMMITTEE CAMPAIGN TREASURER NAME	N/A
	COMMITTEE CAMPAIGN TREASURER ADDRESS	N/A

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 440.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4160.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 21.78
	4. TOTAL POLITICAL EXPENDITURES	\$ 1031.78
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 3128.22
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.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Christopher D. Castro, this the 9th day of January, 20 19, to certify which, witness my hand and seal of office.

Rose Tejeda-Villanueva
Signature of officer administering oath

Rose Tejeda-Villanueva
Printed name of officer administering oath

Administrative Assistant to the Principal
Title of officer administering oath

SUBTOTALS - C/OH

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

19 FILER NAME Chris Castro		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3020.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 700.00
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	\$ 260.00
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 750.00
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: 6
2 FILER NAME Chris Castro		3 Filer ID (Ethics Commission Filers)
4 Date 10/8/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronnie Escobedo 6 Contributor address; City; State; Zip Code 1010 NW Loop 410 Ste.101 San Antonio, TX 78213	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/11/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adelfa Reyna Contributor address; City; State; Zip Code 655 Freiling San Antonio, TX 78213	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dianna Buxkemper Contributor address; City; State; Zip Code 309 Ripley San Antonio, TX 78212	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Bland Contributor address; City; State; Zip Code 2960 Mistywood Lane Schertz, TX 78108	Amount of contribution (\$) \$50.00
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: 6
2 FILER NAME Chris Castro		3 Filer ID (Ethics Commission Filers)
4 Date 12/13/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Hansen 6 Contributor address; City; State; Zip Code 19501 Encino Knoll San Antonio, TX 78259	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/13/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mari Mitchell Contributor address; City; State; Zip Code 712 S. Browne St. Karnes City, TX 78118	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tricia Davila Contributor address; City; State; Zip Code 5314 Lost Tree San Antonio, TX 78244	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diego Bernal Contributor address; City; State; Zip Code 213 Woodlief San Antonio, TX 78212	Amount of contribution (\$) \$500.00
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: **6**

2 FILER NAME **Chris Castro**

3 Filer ID (Ethics Commission Filers)

4 Date
12/15/18

5 Full name of contributor out-of-state PAC (ID#: _____)
Jeff Blum

7 Amount of contribution (\$)
\$75.00

6 Contributor address; City; State; Zip Code
6231 Sunset Haven San Antonio, TX 78249

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
12/19/18

Full name of contributor out-of-state PAC (ID#: _____)
Joe Hollingsworth c/o Hambrick-Ferguson, Inc.

Amount of contribution (\$)
\$1000.00

Contributor address; City; State; Zip Code
PO Box 470245 Tulsa, OK 74147

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
12/20/18

Full name of contributor out-of-state PAC (ID#: _____)
Mona Lopez

Amount of contribution (\$)
\$125.00

Contributor address; City; State; Zip Code
3818 Manchester Dr. San Antonio, TX 78223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
12/20/18

Full name of contributor out-of-state PAC (ID#: _____)
Eddie Moreno

Amount of contribution (\$)
\$50.00

Contributor address; City; State; Zip Code
4510 Clear Spring Dr. San Antonio, TX 78217

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: 6
2 FILER NAME Chris Castro		3 Filer ID (Ethics Commission Filers)
4 Date 12/21/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Marsh 6 Contributor address; City; State; Zip Code 627 W. Russell Pl. San Antonio, TX 78212	7 Amount of contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/25/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theresa Canales Contributor address; City; State; Zip Code 474 E. French Pl. San Antonio, TX 78212	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/26/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angelita Ramos Contributor address; City; State; Zip Code 6114 Royal Sun San Antonio, TX 78238	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/26/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Barrientes Contributor address; City; State; Zip Code 11914 Edward Conrad San Antonio, TX 78253	Amount of contribution (\$) \$25.00
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: 6
2 FILER NAME Chris Castro		3 Filer ID (Ethics Commission Filers)
4 Date 12/26/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry Yu <hr style="border-top: 1px dotted black;"/> 6 Contributor address; City; State; Zip Code 1825 Witte Rd. Houston, TX 77080	7 Amount of contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/26/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christa Carreno Aldrich <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code 1402 Tranquil Trail San Antonio, TX 78232	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/27/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebecca Calvillo <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code 440 Brandywine San Antonio, TX 78228	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jesus Hernandez <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code 140 Parkview San Antonio, TX 78210	Amount of contribution (\$) \$300.00
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: **6**

2 FILER NAME **Chris Castro**

3 Filer ID (Ethics Commission Filers)

4 Date
12/28/18

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

Rodrick Aleman

7 Amount of contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code
2314 Raintree Corpus Christi, TX 78409

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
12/30/18

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

Mark and Sandra Fernandez

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

12123 Jimmer Cove San Antonio, TX 78221

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
12/31/18

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

Phoebe Gonzalez and Veronica Mendez

Amount of contribution (\$)

\$40.00

Contributor address; City; State; Zip Code

143 Matthews Ave. San Antonio, TX 78207

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
12/31/18

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

Robert Luevanos

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

24522 Arrow Canyon San Antonio, TX 78258

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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1	
2 FILER NAME Chris Castro		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 700.00	
5 Date 12/13/18	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorna L. Klokkenga	8 Amount of Contribution \$ \$700.00	9 In-kind contribution description Food and beverage for campaign event
7 Contributor address; City; State; Zip Code 260 Hermine San Antonio, TX 78212		<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)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor 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)

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

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.

1 Total pages Schedule F1: 1	2 FILER NAME Chris Castro	3 Filer ID (Ethics Commission Filers)
4 Date 12/20/18	5 Payee name WIX.COM LTD.	
6 Amount (\$) \$240.00	7 Payee address; City; State; Zip Code 2601 Mission St. San Francisco, CA 94110	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(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 12/31/18	Payee name USPS	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 1064 Vance Jackson San Antonio, TX 78201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) postage stamps	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 (\$)	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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: 1	2 FILER NAME Chris Castro	3 Filer ID (Ethics Commission Filers)
4 Date 10/27/18	5 Payee name Mateo Alanis	
6 Amount (\$) \$150.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 150 E. Vestal San Antonio, TX 78221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense/photography	(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 12/12/18	Payee name Harold Orosco	
Amount (\$) \$600.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8015 2nd St. Somerset, TX 78069	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense/t-shirts	(b) 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

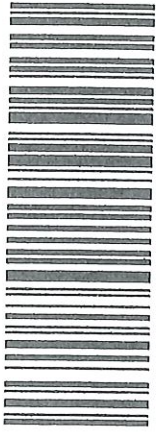
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. 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

C. Castro
676 Freilings
San Antonio, TX 76213

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL®



7018 0680 0001 8877 7952



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78210-1039

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FCM LG ENVY
SAN ANTONIO, TX
78210
JAN 09 '19
AMOUNT

\$7.62

R2305H126820-06

SCHOLASTI

Rec'd 1/10/201

To: Sandy

SAISD
Office of the Superintendent
141 Lavaca
San Antonio, TX 78210