The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
GANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr. Joseph NICKNAME LAST Medina	H. suffib De	office use only putty Superintenda	
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 11719 Rousseau San Antonio, T	JUN 2 5 2019		
Change of Address		R	usiness & Finance	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (210) 784-6165	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt # Amount \$	
TREASURER NAME	Mary	Kathryn	Date Processed	
	NICKNAME LAST Luna	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SI 407 Bertetti Dr. San Antonio, TX	,	ZIP CODE	
CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (210) 215-2780	EXTENSION		
REPORT TYPE	January 15 30th day before e X July 15 8th day before ele		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
0 PERIOD COVERED	Month Day Year	Month	Day Year	
	January 1, 2019	through June 30, 2019	,	
1 ELECTION	Month Day Year Primary 05 / 04 / 19 X General	ELECTION TYPE Runoff Other Description Special		
2 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)		
NISD Trustee	Single-Member District #1			
	go то	PAGE 2		

14 C/OH NAME	oh H. Medina	1	5 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		
Additional Pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	\$.00	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$.00			
	4. TOTAL	POLITICAL EXPENDITURES	\$.00	
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DRTING PERIOD	\$.00	
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T Y OF THE REPORTING PERIOD	**************************************	
18 AFFIDAVIT				
MARY GARCIA Notary Public, State of Texas Comm. Expires 10-16-2021 Notary ID 13131631-5 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 / SEALABOVE				
Sworn to and subscribed before me, by the said <u>Joseph H. Medina</u> , this the <u>25</u>				
The state of the s		o certify which, witness my hand and seal of office.	,	
may 60	ucia	Mary Farcia	Secretary	
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of officer administering oath	

The C/OH Instruction G	2 Total pages filed:			
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	. MI	OFFICE USE ONLY	
NAME	Mrs. M' Lissa	M.	Date Received	
	NICKNAME LAST	SUFFIX	Superintendant	
	Chumbley	Deputy	Superintendant	
4 CANDIDATE / OFFICEHOLDER		CITY; STATE; ZIP CODE	HIN 0 F 2040	
MAILING ADDRESS	6718 Forest Haven, San Antonio	o, TX 78240	JUN 2 5 2019	
Change of Address				
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION BUSI	ness & Finance	
OFFICEHOLDER PHONE	(210) 202-6677	D 40	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	Receipt # Amount \$	
NAME	NICKNAME LAST		Date Processed	
	NIONVAINE EAST	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SI	JITE #; CITY; STATE;	ZIP CODE	
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15 30th day before el	lection Runoff	15th day after campaign treasurer appointment	
	X July 15 Sth day before ele	ction Exceeded \$500 limit	(Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD	Month Day Year	Month	Day Year	
COVERED		THROUGH	<i>′</i>	
	January 1, 2019 th	rough June 30, 2019		
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month Day Year Primary	Runoff Other Description		
	05 / 04 /19 X General	Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)		
NISD Trustee	Single-Member District #3			
	GO ТО	PAGE 2		

14 C/OH NAME M' I	Lissa M. Chumb		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			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	1. TOTAL F	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THATES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	AN \$.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$.00			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$.00			
, , ,	4. TOTAL	POLITICAL EXPENDITURES	\$.00	
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	DAY \$.00	
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T Y OF THE REPORTING PERIOD	THE \$.00	
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. MARY GARCIA Notary Public, State of Texas Comm. Expires 10-16-2021 Notary ID 13131631-5 Signature of Candidate or Officeholder				
AFFIX NOTARY STAMP/SEALABOVE				
day of June		y the said M' Lissa M. Chumbley o certify which, witness my hand and seal of office.	, this the	
Mary Garcia Mary Garcia Secretary				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

The C/OH Instruction (Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE/	MS / MRS / MR FIRST	OFFICE USE ONLY		
OFFICEHOLDER NAME	Mr. Robert		Date Received	
	NICKNAME LAST	SUFFIX		
	Blount	_{Jr.} Dep	uty Superintenda	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE		
MAILING ADDRESS	13450 Sunnyview Trails, San An	JUN 2 5 2019		
Change of Address				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (210) 334-1320	EXTENSION	Sings Server Sor Date Post na Rece	
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt # Amount \$	
TREASURER NAME	MS Sandra		Date Processed	
	NICKNAME LAST Sandoval	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / SI	UITE #; CITY; STATE;	ZIP CODE	
ADDRESS	13450 Sunnyview Trails,	San Antonio, TX	78253	
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (210) 643-3300	EXTENSION		
9 REPORT TYPE	January 15 30th day before e	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	X July 15 Sth day before ele	ection Exceeded \$500 limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year	Month	Day Year	
	January 1, 2010	THROUGH	/	
11 ELECTION	ELECTION DATE	through June 30, 2019 ELECTION TYPE		
	Month Day Year Primary	Runoff Other		
	05 / 04 / 19 X General	Description		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)		
NISD Trustee	Single-Member District #4			
And the second s	go то	PAGE 2		

14 C/OH NAME Robert Blount, Jr.			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	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH. S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	AN SED \$.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.00
EXPENDITURE TOTALS			\$.00
	4. TOTAL	POLITICAL EXPENDITURES	\$.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$.00		
OUTSTANDING LOAN TOTALS	6. TOTAL P LAST DA	THE \$.00	
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. Notary ID 13131631-5			
		Signature of Ocean	
		Signature of Cand	didate or Officeholder
AFFIX NOTARY STAMP	/SEALABOVE		
Sworn to and subscri	bed before me, b	y the said Robert Blount, Jr.	, this the <u>25</u>
day of June	1 400	o certify which, witness my hand and seal of office.	, and the
Mary Go	ucia	mary Garcia	secretary
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer administering oath

The C/OH Instruction 0	T Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs. Katie N. NICKNAME LAST SUFFIX Reed	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		uty Superintendar
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 308-5555	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION	
9 REPORT TYPE	January 15 30th day before election Runoff X July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year Month THROUGH	Day Year
11 ELECTION	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
12 OFFICE NISD Trustee	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) Single Member District #5	
	GO TO PAGE 2	

14 C/OH NAME Katie N. Reed	: .	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		
		COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$.00
	2. TOTAL	POLITICAL CONTRIBUTIONS	¢ 00
	(OTHER	THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.00
EXPENDITURE			:
TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, ITEMIZED	\$.00
	4. TOTAL	POLITICAL EXPENDITURES	\$.00
CONTRACTOR			
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA	× \$.00
· · · · · · · ·	OF KEP	ORTING PERIOD	¥
OUTSTANDING LOAN TOTALS	6. TOTAL P	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE	
LOAN TOTALS	LAST DA	Y OF THE REPORTING PERIOD	\$.00
18 AFFIDAVIT			
		lawaar ar officer under the first	ing that the assessment
anning.	MARVCAROLA	I swear, or affirm, under penalty of perjutus and correct and includes all inform	
SOLARY PUBLISHED NO.	MARY GARCIA ary Public, State of	true and correct and includes all inform Texas under Title 15, Election Code.	auon required to be reported by me
	mm. Expires 10-16		100
	Notary ID 1313163		/
11111		Jate / To	20
		Signature of Candida	ate or Officeholder
AFFIX NOTARY STAMP	PISEALABOVE		
ALLANOIANTSIAMP	/ SEALADUVE		
Sworn to and subseri	ibed before me. h	y the said Katie N. Reed	this the 25
day of June			, this the
day of July	, 20 <u>\9</u> , t	o certify which, witness my hand and seal of office.	
man c	ANCIO	andri Karela	
Signature of -ff	Iministaria - "	Printed Towns of "	secretary
Signature of officer ac	iministering oath	Printed name of officer administering oath	Title of officer administering oath

	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
The C/OH Instruction 0	Guide explains how to complete this form.	= 16tat pages 1116d.	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST MI	OFFICE USE ONLY	
NAME	Mrs. Carol B	uty Superintendan	
k .		diy Superintendani	
	Harle		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 423 Cliffside Shavano Park, Texas 78231	JUN 2 5 2019	
Change of Address	423 Cliffside Shavano Park, Texas 78231	siness & Finance	
5 CANDIDATE/	AREA CODE PHONE NUMBER EXTENSION		
OFFICEHOLDER PHONE	(210) 954-4206	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN	MS / MRS / MR FIRST MI	Receipt # Amount \$	
TREASURER NAME	<u> </u>	Date Processed	
	NICKNAME LAST SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE	
(Residence or Business)			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
· · · · · · · · · · · · · · · · · · ·			
9 REPORT TYPE	January 15 30th day before election Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	X July 15 8th day before election Exceeded \$500 limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year Month	Day Year	
COVERED	THROUGH		
	January 1, 2019 through June 1, 2019		
11 ELECTION	ELECTION DATE ELECTION TYPE		
	Month Day Year Primary Runoff Other Description		
	05 / 06 / 17 X General		
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known))	
NISD Trustee	Single Member District #6		
	GO TO PAGE 2		

14 C/OH NAME Carol Berg Harle			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			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH. SS, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$.00			
	4. TOTAL POLITICAL EXPENDITURES \$.00			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$.00			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$.00			
18 AFFIDAVIT				
			perjury, that the accompanying report is	
STARY PUBL	MARY GARCIA		ormation required to be reported by me	
	ry Public, State of T nm. Expires 10-16-2		11.1/2	
	otary ID 13131631-		CHAILE	
			didate or Officeholder	
Signature of Candidate of Officeholder				
AFFIX NOTARY STAMP / SEALABOVE				
Sworn to and subscr	ibed before me, b	y the said <u>Carol Berg Harle</u>	, this the35	
day of June, 2019, to certify which, witness my hand and seal of office.				
Mary (Mary Garcia Mary Garcia secretary			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

					
The C/OH Instruction C	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages file	ed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI OFFICE USE Mrs. Karen NICKNAME LAST SUFFIX Deputy Super				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CO 9522 Maytum Circle, Helotes, To	JUN 2	5 2019		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (210) 413-5736	EXTENSION	USINESS O		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST	MI 	Receipt # Date Processed Date Imaged	Amount \$	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL	JITE #; CITY; STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15 30th day before electrical Sth day before electrical Strength Sth day before electrical Strength Sth day before electrical Strength Stre		15th day aftr treasurer api (Officeholder Final Report	pointment	
10 PERIOD COVERED	Month Day Year Month Day Year THROUGH January 1, 2019 through June 30, 2019				
11 ELECTION	ELECTION DATE Month Day Year Primary 05 / 6 / 17 X General	ELECTION TYPE Runoff Other Description Special			
12 OFFICE NISD Trustee	OFFICE HELD (if any) Single-Member District #7	13 OFFICE SOUGHT (if known))		
	GO TO	PAGE 2			

14 C/OH NAME Karen Freeman		15	5 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		
	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
47 CONTRIBUTION			
17 CONTRIBUTION TOTALS	1. TOTAL F	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	\$.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.00
EXPENDITURE TOTALS	RE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$.00		
	4. TOTAL	POLITICAL EXPENDITURES	\$.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$.00		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$.00		
18 AFFIDAVIT	White district the second seco		
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. Notary ID 13131631-5			
		Signature of Candi	idate or Officeholder
AFFIX NOTARY STAMP / SEAL ABOVE			
Sworn to and subscribed before me, by the said Karen Freeman , this the			
Sworn to and subscribed before me, by the said <u>Karen Freeman</u> , this the day of <u>June</u> , to certify which, witness my hand and seal of office.			
Mary Garcia mary farcia secretary			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath			

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE USE ONLY		
NAME	Mr. Gerald	В.	Date Received		
	NICKNAME LAST	SUFFIX	/ Cunorintondant		
	Lopez	CITY; STATE; ZIP CODE	Superintendant		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 7835 Emerald Elm San Antonio,	JUN 2 5 2019			
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (210) 375-5211	EXTENSION Busin	16.55.nd Will red I Tall 16.00 ked		
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST Alfredo	МІ	Receipt # Amount \$		
NAME	NICKNAME LAST		Date Processed		
	Al Dominguez		Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / S 7902 Emerald Elm Sar	suite #; city; state; n Antonio, Texas 78251	ZIP CODE		
(Residence or Business)		,			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (210) 562-3245	EXTENSION			
9 REPORT TYPE	January 15 30th day before e	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	X July 15 8th day before ele	ection Exceeded \$500 limit	Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year January 1, 2019 thro	THROUGH ough June 30, 2019	Day Year		
11 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year Primary 05 / 04 / 19 X General	Runoff Other Description Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)			
NISD Trustee	Single-Member District #2				
GO TO PAGE 2					

14 C/OH NAME Gerald B. Lopez		1	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				
	Портолено	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION	1. TOTAL F	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA	N A a a		
TOTALS	PLEDGE	S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	\$.00		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.00		
EXPENDITURE TOTALS			\$.00		
	4. TOTAL	POLITICAL EXPENDITURES	\$.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$.00				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$.00				
18 AFFIDAVIT	e de la conseguio persona de la conse nsa de la consensa de la consensa de la consensa de la consensa de la conse				
			erjury, that the accompanying report is		
MARY GARCIA true and correct and includes all information required to be reported by me under-Title 15, Election Code.					
Notary Public, State of Texas Comm. Expires 10-16-2021					
Notary ID 13131631-5					
Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP / SEALABOVE					
Sworn to and subscribed before me, by the said Gerald B. Lopez, this the					
day of <u>June</u> , 2019, to certify which, witness my hand and seal of office.					
mary barcia mary barcia secretary					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					