

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:

16

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

Mr.

FIRST

Roy

MI

NICKNAME

LAST

De los Santos

SUFFIX

Jr.

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

Brownsville, TX 78526

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(956) 371-7221

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

Mrs.

FIRST

Cristina

MI

NICKNAME

LAST

Quiqui

SUFFIX

Tijerina

OFFICE USE ONLY

Date Received

OFFICE OF THE
CITY SECRETARY

APR - 5 2021

RECEIVED

Date Hand-delivered or Date Postmarked

by email

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #:

CITY:

STATE:

ZIP CODE

Brownsville

TX

78520

(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)

☐ July 15

☐ 8th day before election

☐ Exceeded Modified
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

01 / 19 / 2021

THROUGH

Month

Day

Year

03 / 22 / 2021

11 ELECTION

ELECTION DATE

Month

Day

Year

05 / 01 / 2021

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

City Commissioner - District 3

14 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

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Roy De los Santos, Jr.		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,675.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,087.07
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,863.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,275.64

18 SIGNATURE 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.

Roy De los Santos Jr.
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Roy De los Santos, Jr., and my date of birth is .
My address is , Brownsville, TX, 78526, USA.
(street) (city) (state) (zip code) (country)

Executed in Cameron County, State of Texas, on the 1st day of April, 2021.
(month) (year)

Roy De los Santos Jr.
Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME Roy De los Santos, Jr.		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,475.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 6,275.64
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8,077.35
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 12,500.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1,575.64
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 1 of 4
2 FILER NAME Roy De los Santos, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 2/8/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellena Elizabeth Pace 6 Contributor address; City; State; Zip Code [REDACTED] Rancho Viejo TX 78575	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalo Hernandez Contributor address; City; State; Zip Code [REDACTED] Brownsville, TX 78521	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hele's Used Auto Parts Contributor address; City; State; Zip Code [REDACTED] Brownsville, TX 78521	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellena H. Conner Contributor address; City; State; Zip Code [REDACTED] Brownsville, TX 78520	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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 4
2 FILER NAME Roy De los Santos, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Barajas	7 Amount of contribution (\$)
6 Contributor address; City; State; Zip Code Austin TX 78741		\$15.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norma I. Alvarez	Amount of contribution (\$)
Contributor address; City; State; Zip Code [REDACTED] Brownsville TX 78521		\$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy De los Santos, Jr.	Amount of contribution (\$)
Contributor address; City; State; Zip Code [REDACTED] Brownsville, TX 78526		\$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda A. De los Santos	Amount of contribution (\$)
Contributor address; City; State; Zip Code [REDACTED] Brownsville, TX 78526		\$1,000.00
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 4
2 FILER NAME Roy De los Santos, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 3/4/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary B. Alvarez	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code [REDACTED] Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue Brandon Fielder Collins & Mott LLP	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code [REDACTED] Edinburg, TX 78539		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobbleheads Bar & Grill	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code [REDACTED] Brownsville, TX 78520		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eduardo Rodriguez	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code [REDACTED] Brownsville, TX 78521		
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4 of 4
2 FILER NAME Roy De los Santos, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 03/02/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy Arellano 6 Contributor address; City; State; Zip Code Brownsville, TX 78520	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvia Rodriguez Contributor address; City; State; Zip Code South Padre Island, TX 78597	Amount of contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonathan Cowen Contributor address; City; State; Zip Code Houston TX 77001	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.		

LOANS**SCHEDULE E**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <div style="text-align: right; font-size: 1.2em;">1 of 3</div>
2 FILER NAME Roy De los Santos, Jr.		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 01/23/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy De los Santos, Jr.	9 Loan Amount (\$) \$487.12
6 Is lender a financial institution? Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	8 Lender address; City; State; Zip Code [REDACTED] Brownsville, TX 78526	10 Interest rate 0
		11 Maturity date 05/01/2022
12 Principal occupation / Job title (See Instructions) Sr. Business Mgr. Sales Operations		13 Employer (See Instructions) AT&T
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 02/12/2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy De los Santos, Jr.	Loan Amount (\$) \$1,012.00
Is lender a financial institution? Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Lender address; City; State; Zip Code [REDACTED] Brownsville, TX 78526	Interest rate 0
		Maturity date 05/01/2022
Principal occupation / Job title (See Instructions) Sr. Business Mgr. Sales Operations		Employer (See Instructions) AT&T
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

LOANS**SCHEDULE E**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 2 of 3
2 FILER NAME Roy De los Santos, Jr.		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 02/17/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy De los Santos, Jr.	9 Loan Amount (\$) \$76.52
6 Is lender a financial institution? Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code [REDACTED] Brownsville, TX 78526	10 Interest rate 0
		11 Maturity date 05/01/2022
12 Principal occupation / Job title (See Instructions) Sr. Business Mgr. Sales Operations		13 Employer (See Instructions) AT&T
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code [REDACTED] Brownsville, TX 78526	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 02/23/2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy De los Santos, Jr.	Loan Amount (\$) \$200.00
Is lender a financial institution? Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code [REDACTED] Brownsville, TX 78526	Interest rate 0
		Maturity date 05/01/2022
Principal occupation / Job title (See Instructions) Sr. Business Mgr. Sales Operations		Employer (See Instructions) AT&T
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code [REDACTED]	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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LOANS**SCHEDULE E**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 3 of 3
2 FILER NAME Roy De los Santos, Jr.		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 03/05/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy De los Santos, Jr.	9 Loan Amount (\$) \$4,500.00
6 Is lender a financial institution? Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code [REDACTED] Brownsville, TX 78526	10 Interest rate 0
		11 Maturity date 05/01/2022
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 F1: 1 of 3	2 FILER NAME Roy De los Santos, Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2021	5 Payee name Donorbox	
6 Amount (\$) \$0.97	7 Payee address; City; State; Zip Code 5 3rd St., Ste. 900 San Francisco TX 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	
	(b) Description processing fees for online donation	
	(c) <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 02/19/2021	Payee name Pink Ape Media Consulting	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 3101 Pablo Kisel Blvd., Ste. B-4 Brownsville, TX 78526	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting	
	Description Media & Advertising Consulting	
	<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 2/20/2021	Payee name Donorbox	
Amount (\$) \$0.74	Payee address; City; State; Zip Code 5 3rd St., Ste. 900 San Francisco TX 94103	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	
	Description processing fees for online donation	
	<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 POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 F1: 2 of 3	2 FILER NAME Roy De los Santos, Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 03/02/2021	5 Payee name Donorbox	
6 Amount (\$) \$1.41	7 Payee address; City; State; Zip Code 5 3rd St., Ste. 900 San Francisco TX 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description processing fees for online donation
	(c) <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		
Date 03/03/2021	Payee name Donorbox	
Amount (\$) \$3.61	Payee address; City; State; Zip Code 5 3rd St., Ste. 900 San Francisco TX 94103	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description processing fees for online donation
	<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		
Date 03/05/2021	Payee name Donorbox	
Amount (\$) \$4.70	Payee address; City; State; Zip Code 5 3rd St., Ste. 900 San Francisco TX 94103	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description processing fees for online donation
	<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		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 3 of 3		2 FILER NAME Roy De los Santos, Jr.		3 Filer ID (Ethics Commission Filers)	
4 Date 03/05/2021		5 Payee name Pink Ape Media Consulting			
6 Amount (\$) \$5,000.00		7 Payee address; City; State; Zip Code 3101 Pablo Kisel Blvd., Ste. B-4 Brownsville, TX 78526			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description processing fees for online donation		
	(c) <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		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
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
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

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

If the requested information is not applicable, DO NOT include this page in the report.

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.

1 Total pages Schedule F2: 1	2 FILER NAME Roy De los Santos, Jr.	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0		
5 Date 01/26/2021	6 Payee name Pink Ape Media Consulting			
7 Amount (\$) \$12,500.00	8 Payee address; 3101 Pablo Kisel Blvd., Ste. B-4	City; Brownsville,	State; TX	Zip Code 78526
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Media & Advertising Consulting	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
11 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
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political			
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

If the requested information is not applicable, DO NOT include this page in the report.

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
Candidates/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 of 2	2 FILER NAME Roy De los Santos, Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 01/23/2021	5 Payee name Brenda Bazan	
6 Amount (\$) \$270.62 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code [REDACTED] Brownsville, TX 78520	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Photo Shoot
	(c) <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 01/23/2021	Payee name Brenda Bazan	
Amount (\$) \$216.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code [REDACTED] Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Photo Shoot
	<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 02/12/2021	Payee name City of Brownsville	
Amount (\$) \$12.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1001 E. Elizabeth St. Brownsville TX 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Photo Shoot
	<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		

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, **DO NOT** include this page in the report.

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: 2 of 2	2 FILER NAME Roy De los Santos, Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 02/12/2021	5 Payee name Pink Ape Media Consulting	
6 Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3101 Pablo Kisel Blvd., Ste. B-4 Brownsville, TX 78526	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Media & Advertising Consulting
	(c) <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 02/17/2021	Payee name Wix	
Amount (\$) \$24.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 235 W. 23rd St., 8th Floor New York NY 10011	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead	Description Premium Webhosting Plan
	<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 02/17/2021	Payee name Wix	
Amount (\$) \$51.63 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 235 W. 23rd St., 8th Floor New York NY 10011	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead	Description Campaign Email
	<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		

Laure Morgan

From: Roy De los Santos, Jr. <roy.delossantos@sbcglobal.net>
Sent: Friday, April 2, 2021 4:37 AM
To: Laure Morgan
Subject: Re: Due date for filing first report of campaign contributions and expenditures by opposed candidates and SP committees supporting opposed candidates by 5 pm or midnight if filed electronically. CS open til 5 pm.
Attachments: Campaign Finance Report 04 01 2021 FINAL.pdf

Laure,

I apologize for the late filing, computer problems before midnight last night, so I had to recreate my report. Let me know if there are any fees for the late filing.

Report attached.

Thank you,

Roy De los Santos
Candidate for City Commissioner
City of Brownsville District 3

(956) 371-7221
roy.delossantos@sbcglobal.net
info@vote4roy.com

On Wednesday, March 17, 2021, 01:56:13 PM CDT, Laure Morgan <laure.morgan@brownsvilletx.gov> wrote:

Dear City of Brownsville City Commission Candidate for the May 1, 2021 General Election:

Good afternoon! This is a friendly **reminder** to inform you that you are required to file your First Report of Campaign Contributions and Expenditures by opposed candidates on April 1, 2021 by 5 pm or by midnight if filed electronically. This is filed with the Office of the City Secretary, which is the local filing authority. The Office of the City Secretary is open by appointment, so if you choose to file in person, please call me to schedule a time to come in and file your report; however, please be aware that you can file your report by email or by fax. I am including the link to the form below:

Link to page: <https://www.ethics.state.tx.us/forms/local/localcohfrm.php>

Link to form: <https://www.ethics.state.tx.us/data/forms/coh/coh.pdf>