

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: center; font-size: 2em;">6</div>																						
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: small;">MS / MRS / MR</td> <td style="width:40%; text-align: center;">FIRST</td> <td style="width:20%; font-size: small;">MI</td> <td style="width:20%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">Jonathan</td> <td style="text-align: center;">D</td> <td></td> </tr> <tr> <td style="font-size: small;">NICKNAME</td> <td style="text-align: center;">LAST</td> <td style="font-size: small;">SUFFIX</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Gracia</td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI			Jonathan	D		NICKNAME	LAST	SUFFIX			Gracia			<div style="text-align: center; font-weight: bold; font-size: 0.8em;">OFFICE USE ONLY</div> <p style="font-size: 0.7em;">Date Received: CAMERON COUNTY DEPARTMENT OF ELECTIONS & VOTER REGISTRATION</p> <p style="font-size: 0.8em;">11:42am JUL 15 2015</p> <p style="font-size: 0.7em;">RECEIVED By: <i>Quade</i></p> <p style="font-size: 0.7em;">Date Hand-delivered or Date Postmarked</p> <table style="width:100%; font-size: 0.6em;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td>Date Processed</td> <td></td> </tr> <tr> <td>Date Imaged</td> <td></td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged	
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4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: small;">ADDRESS / PO BOX;</td> <td style="width:15%; font-size: small;">APT / SUITE #;</td> <td style="width:20%; font-size: small;">CITY;</td> <td style="width:15%; font-size: small;">STATE;</td> <td style="width:20%; font-size: small;">ZIP CODE</td> </tr> <tr> <td colspan="5">932 E. Van Buren Street</td> </tr> <tr> <td colspan="5">Brownsville, TX 78520</td> </tr> </table>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	932 E. Van Buren Street					Brownsville, TX 78520													
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; text-align: center; font-size: small;">Month Day Year</td> <td style="width:40%; text-align: center;">THROUGH</td> <td style="width:30%; text-align: center; font-size: small;">Month Day Year</td> </tr> <tr> <td style="text-align: center;">01 / 01 / 2015</td> <td></td> <td style="text-align: center;">06 / 30 / 2015</td> </tr> </table>			Month Day Year	THROUGH	Month Day Year	01 / 01 / 2015		06 / 30 / 2015																
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12 OFFICE	OFFICE HELD (if any) Justice of the Peace Pct. 2, pl. 2	13 OFFICE SOUGHT (if known)																							

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Jonathan Gracia 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

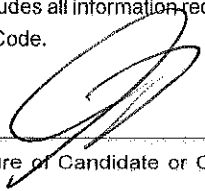
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO 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	\$ _____
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ _____
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 189.64
	4. TOTAL POLITICAL EXPENDITURES	\$ 2089.64
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 13.33
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,000.00

18 AFFIDAVIT

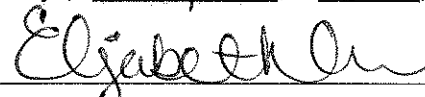
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jonathan D. Gracia, this the 7th day of July, 2015, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Elizabeth Correa
 Printed name of officer administering oath

Notary Public (Texas)
 Title of officer administering oath

POLITICAL EXPENDITURES 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

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:	2 FILER NAME <i>Jonathan Gracia</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1/5/15</i>	5 Payee name <i>FedEx</i>	
6 Amount (\$) <i>34.10</i>	7 Payee address; City; State; Zip Code <i>1100 N Expy 7783 Brownsville, TX 78521</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Printing expense</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Printing Services</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name <i>Jonathan Gracia</i> Office sought Office held	
Date <i>1/31/15</i>	Payee name <i>IBC Bank</i>	
Amount (\$) <i>12.87</i>	Payee address; City; State; Zip Code <i>1600 FM 802 Brownsville, TX 78526</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Accounting/ Banking</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Analysis Charge.</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name <i>Jonathan Gracia</i> Office sought Office held	
Date <i>2/18/15</i>	Payee name <i>Solice</i>	
Amount (\$) <i>70.00</i>	Payee address; City; State; Zip Code <i>7200 Bonham Rd Brownsville, TX 78521</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event expense.</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Magnets.</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name <i>Jonathan Gracia</i> Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jonathan Gracia	3 Filer ID (Ethics Commission Filers)
4 Date 1/2/15	5 Payee name Juan Hernandez, Camperos event center	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 1800 N Expressway Brownsville, TX 78526	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event 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 Event Center was rented for "New Years" political party/celebration
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 2/18/15	Payee name Charro Days	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 455 E. Elizabeth street Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Registration
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 2/28/15	Payee name IBC Bank	
Amount (\$) \$12.87	Payee address; City; State; Zip Code 1600 FM 802 Brownsville, TX 78526	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/ Banking	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Analysis Charge
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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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)

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1 Total pages Schedule F1:		2 FILER NAME Jonathan Gracia		3 Filer ID (Ethics Commission Filers)	
4 Date 3/30/15		5 Payee name IBC Bank			
6 Amount (\$) \$12.45		7 Payee address; City; State; Zip Code 1600 FM 802 Brownsville, TX 78526			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/ Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Analysis Charge.	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/30/15		Payee name IBC Bank			
Amount (\$) \$12.45		Payee address; City; State; Zip Code 1600 FM 802 Brownsville, TX 78526			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Analysis Charge	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8/30/15		Payee name IBC Bank			
Amount (\$) \$12.45		Payee address; City; State; Zip Code 1600 FM 802 Brownsville, TX 78526			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Analysis Charge	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

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1 Total pages Schedule F1:		2 FILER NAME Jonathan Gracig		3 Filer ID (Ethics Commission Filers)	
4 Date 9/30/15		5 Payee name IBC Bank			
6 Amount (\$) \$ 5.00		7 Payee address; City; State; Zip Code 1600 FM 802 Brownsville, TX 78526			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting / Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Inactivity fee		
	Candidate / Officeholder name		Office sought		Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 6/30/15		Payee name IBC Bank			
Amount (\$) \$ 12.45		Payee address; City; State; Zip Code 1600 FM 802 Brownsville, TX 78526			
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