

**SHEILA  
GARCIA  
BENCE**

**SEMI-ANNUAL  
REPORT  
JULY 15, 2024**

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

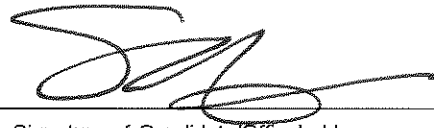
The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>5</b>																	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR: <b>Mrs.</b> FIRST: <b>Sheila</b> MI: _____ NICKNAME: _____ LAST: <b>Garcia Bence</b> SUFFIX: _____	<div style="text-align: center; border: 1px solid black; padding: 5px;"><b>OFFICE USE ONLY</b></div> <p style="text-align: center; font-size: small;">CAMERON COUNTY DEPARTMENT OF ELECTIONS VOTER REGISTRATION</p> <p style="text-align: center; font-size: large; font-weight: bold;">JUL 15 2024</p> <p style="text-align: center; font-size: x-large; font-weight: bold;">9/6 @ 12:27 PM</p> <p style="text-align: center; font-size: small;">Date Hand Delivered or Date Postmarked</p> <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged												
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Date Imaged																				
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>974 E. Harrison, Brownsville, Texas 78520</b>																			
<input type="checkbox"/> Change of Address																				
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION <b>( 956 ) 574-8116</b>																			
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR: <b>Mr.</b> FIRST: <b>Travis</b> MI: <b>L.</b> NICKNAME: _____ LAST: <b>Bence</b> SUFFIX: _____																			
<b>7 CAMPAIGN TREASURER ADDRESS</b> <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>1018 E Tyler, Harlingen, Texas 78550</b>																			
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION <b>( 956 ) 440-8900</b>																			
<b>9 REPORT TYPE</b>	<input 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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)																			
<b>10 PERIOD COVERED</b>	<table style="width:100%; border: none;"> <tr> <td style="text-align: center; font-size: x-small;">Month    Day    Year</td> <td style="text-align: center; font-size: x-small;">THROUGH</td> <td style="text-align: center; font-size: x-small;">Month    Day    Year</td> </tr> <tr> <td style="text-align: center; font-size: large;">01 / 01 / 2024</td> <td></td> <td style="text-align: center; font-size: large;">07 / 14 / 2024</td> </tr> </table>	Month    Day    Year	THROUGH	Month    Day    Year	01 / 01 / 2024		07 / 14 / 2024													
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<b>11 ELECTION</b>	<table style="width:100%; border: none;"> <tr> <td style="width:40%; border-bottom: 1px solid black;">ELECTION DATE Month    Day    Year <b>11 / 05 / 2024</b></td> <td style="width:60%; border-bottom: 1px solid black;">ELECTION TYPE  <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special                 </td> </tr> </table>	ELECTION DATE Month    Day    Year <b>11 / 05 / 2024</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special																	
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<b>12 OFFICE</b>	OFFICE HELD (if any) <b>Probate Court No. 1 - Judge</b>	<b>13 OFFICE SOUGHT (if known)</b> <b>PROBATE COURT NO.1</b>																		
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>	<p style="font-size: x-small;">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.</p> <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none; vertical-align: top;"> <input type="checkbox"/> Additional Pages   <input type="checkbox"/> GENERAL   <input type="checkbox"/> SPECIFIC                 </td> <td style="border: none;"> <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr><td style="width:20%;">COMMITTEE TYPE</td><td>COMMITTEE NAME</td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td>COMMITTEE ADDRESS</td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td>COMMITTEE CAMPAIGN TREASURER NAME</td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td></tr> <tr><td> </td><td> </td></tr> </table> </td> </tr> </table>		<input type="checkbox"/> Additional Pages  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr><td style="width:20%;">COMMITTEE TYPE</td><td>COMMITTEE NAME</td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td>COMMITTEE ADDRESS</td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td>COMMITTEE CAMPAIGN TREASURER NAME</td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td></tr> <tr><td> </td><td> </td></tr> </table>	COMMITTEE TYPE	COMMITTEE NAME				COMMITTEE ADDRESS				COMMITTEE CAMPAIGN TREASURER NAME				COMMITTEE CAMPAIGN TREASURER ADDRESS		
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<b>GO TO PAGE 2</b>																				

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

15 JC/OH NAME		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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 150,000.00

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.



Signature of Candidate/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 Sheila Garcia Bence, and my date of birth is September 26, 1973

My address is 974 E. Harrison, Brownsville, Texas, 78520, USA  
(street) (city) (state) (zip code) (country)

Executed in Cameron County, State of Texas, on the 15 day of July, 2024.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - JC/OH

# FORM JC/OH COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 150,000.00
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
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 type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
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	\$

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): 1
<b>2</b> FILER NAME Sheila Garcia Bence		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 10/16/2018	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) First Community Bank	<b>9</b> Loan Amount (\$) 150,000.00
<b>6</b> Is lender a financial institution? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<b>8</b> Lender address; City; State; Zip Code 405 N. Stuart Plance, Harlingen, Texas 78552	<b>10</b> Interest rate 7.000%
		<b>11</b> Maturity date
<b>12</b> Lender's Principal Occupation		<b>13</b> Lender's Job Title
<b>14</b> Lender's Employer/Law Firm		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is a child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input type="checkbox"/> none Lot 25, Blk 47 Padre Subdivision		<b>18</b> <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
<b>19</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>20</b> Name of guarantor Travis L. Bence & Sheila Garcia Bence	<b>22</b> Amount Guaranteed (\$) \$150,000.00
	<b>21</b> Guarantor address; City; State; Zip Code 1018 E Tyler, Harlingen, Texas 78550	
<b>23</b> Guarantor's Principal Occupation Attorney (Travis) & Judge (Sheila)		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm Cameron County (Sheila)		<b>26</b> Law Firm of guarantor's spouse (if any) Bence & Associates, LLC (Travis)
<b>27</b> If guarantor is a child, law firm of parent(s) (if any)		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# OUTSTANDING LOANS

## SCHEDULE L

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 L: <b>1</b>
2 FILER NAME Sheila Garcia Bence		3 Filer ID (Ethics Commission Filers)
LENDER INFORMATION	4 Name of lender First Community Bank	
	5 Lender address; City; State; Zip Code 405 N. Stuart Plance, Harlingen, Texas 78552	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	6 Name of guarantor Travis L. Bence & Sheila Garcia Bence	
	7 Guarantor address; City; State; Zip Code 1018 E Tyler, Harlingen, Texas 78550	
LENDER INFORMATION	Name of lender	
	Lender address; City; State; Zip Code	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	
	Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender	
	Lender address; City; State; Zip Code	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	
	Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender	
	Lender address; City; State; Zip Code	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	
	Guarantor address; City; State; Zip Code	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**