CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| The C/OH Instruction G | uide explains how | to complete this form. | 1 Filer ID (Ethics Commission Filers) | 2 Total pages file | ed: | |
|---|--|----------------------------|---|------------------------------|--------------------|--|
| 3 CANDIDATE / OFFICEHOLDER | MS / MRS / MR | FIRST Ruben | мі J | OFFICE | USE ONLY | |
| NAME | NICKNAME | LAST Olvera | SUFFIX | Date Received |)3 | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address | ADDRESS / PO BOX; | anch, Texas 78015 | CITY; STATE; ZIP CODE | 11-9-203 Qmard | estallez | |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE (210) | PHONE NUMBER 850-3022 | EXTENSION | Date Hand-delivered | | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST Lesley | мі Z | Receipt # Date Processed | Amount \$ | |
| | NICKNAME | olvera (Cast | SUFFIX | Date Imaged | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | | no po box please); APT / S | SUITE #; CITY; | STATE; | ZIP CODE | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE (832) | PHONE NUMBER 492-2857 | EXTENSION | | | |
| 9 REPORT TYPE | January 15 July 15 | 30th day before ele | - Supplied Madified | treasurer ap (Officeholde | | |
| 10 PERIOD COVERED | Month 10 | Day Year / 12 / 23 | THROUGH 11 | Day Year / 9 / 23 | | |
| 11 ELECTION | Month Day | Year Primary 23 General | Runoff Other Description Special | | | |
| 12 OFFICE | OFFICE HELD (if any) | | 13 OFFICE SOUGHT (if known City Council, Place | | | |
| 14 NOTICE FROM POLITICAL COMMITTEE(S) | THE CANDIDATE / OFFIC | EHOLDER. THESE EXPENDITURE | ACCEPTED OR POLITICAL EXPENDITURES IN IS MAY HAVE BEEN MADE WITHOUT THE CAN IRED TO REPORT THIS INFORMATION ONLY IF | DIDATE'S OR OFFICEHOL | DER'S KNOWLEDGE OR | |
| () | COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS | | | | | |
| Additional Pages | GENERAL SPECIFIC | COMMITTEE CAMPAIGN TRE | EASURER NAME | | | |
| | 5. 2511 15 | COMMITTEE CAMPAIGN TR | REASURER ADDRESS | | | |
| | | | | | | |
| GO TO PAGE 2 | | | | | | |

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

| SAM AISI | THINKITOE IXEI OIXI | |
|--|--|--|
| 15 C/OH NAME Ruben J. Olvera | | 16 Filer ID (Ethics Commission Filers) |
| 17 CONTRIBUTION TOTALS | TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 1,300.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 1,300.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ 609.15 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 609.15 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD | \$ 1,300.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD | * THE \$ 0.00 |
| (1) Affidavit | Please complete either option below | ndidate or Officeholder |
| NOTARY STAMP/SEA | | dev. of |
| | before me by this the which, witness my hand and seal of office. | uay or, |
| Signature of officer administe | ering oath Printed name of officer administering oath | Title of officer administering oath |
| (2) Unsworn Declarati | on on | |
| My name is Ruben J. (| Divera, and my date of birth is | |
| My address is | Fair Oaks Ranch , T | (, <u>78015</u> , <u>USA</u> |
| Executed in Bexar | County, State of Texas , on the 9th day of Novem |) (year) |
| 1 | dignature of Candid | ate/Officeholder (Declarant) |

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

| 19 | 9 FILER NAME 20 Filer ID (Ethics Co. | | | | |
|-----|--|-------------|----------|--|--|
| Ru | ben J. Olvera | | | | |
| | 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | | |
| 1. | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 1,300.00 | | |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | | | |
| 3. | 3. SCHEDULE B: PLEDGED CONTRIBUTIONS | | | | |
| 4. | 4. SCHEDULE E: LOANS | | | | |
| 5. | 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | | | | |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | | | |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL | \$ | | | |
| 8. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | 609.15 | | |
| 9, | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUI | \$ | | | |
| 10. | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A | \$ | | | |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO | NTRIBUTIONS | \$ | | |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER | \$ | | | |
| | | | | | |

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 FILER NAME Ruben J. O | lvera | | | 3 Filer ID (Ethics Commission Filers) | | | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:) Roxanna Hall | | | 7 Amount of contribution (\$) | | | |
| 11/04/2023 | 6 Contributor address; | Dallas | State; Zip Code TX 75218 | 100.00 | | | |
| 8 Principal occup retired | pation / Job title (See Instructions) | : | 9 Employer (See Instruc | tions) | | | |
| Date | Full name of contributor Kevin Mickits | out-of-state PAC | C (ID#:) | Amount of contribution (\$) | | | |
| 11/06/2023 | Contributor address; | city; San a | State; Zip Code ntonio, TX 78230 | 750.00 | | | |
| Principal occup Attorney | ation / Job title (See Instructions) | | Employer (See Instruc Upton, Mickits & Hey | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: | | C (ID#:) | Amount of contribution (\$) | | | |
| 11/06/2023 Jessica Hastings Contributor address; City; State; Zip San Antonio, TX 7 | | State; Zip Code nio, TX 78256 | 100.00 | | | | |
| Principal occup N/a | ation / Job title (See Instructions) | | Employer (See Instruc N/a | tions) | | | |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) | | | |
| 11/06/2023 | Blake Boyd Contributor address; | City; | State; Zip Code | 250.00 | | | |
| Fair Oaks Ranch, TX 78015 | | | | | | | |
| Principal occup Self-employed | ation / Job title (See Instructions) | | Employer (See Instruc San Antonio Legal S | • | | | |
| | | | | | | | |
| 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 | 1 Total pages Schedule A1: | | | | | |
| 2 FILER NAME Ruben J. O | lvera | | 3 Filer ID (Ethics Commission Filers) | | | | |
| 4 Date | Full name of contributor out-of-state PAC Karen Maxton | 7 Amount of contribution (\$) | | | | | |
| 11/08/2023 | | State; Zip Code Ranch, TX 78015 | 100.00 | | | | |
| 8 Principal occu n/a | pation / Job title (See Instructions) | 9 Employer (See Instruct | tions) | | | | |
| Date | Full name of contributor out-of-state PAC | C (ID#:) | Amount of contribution (\$) | | | | |
| | Contributor address; City; State; Zip Code | | | | | | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instruct | tions) | | | | |
| Date | Full name of contributor out-of-state PAC (ID#:) | | Amount of contribution (\$) | | | | |
| | Contributor address; City; | State; Zip Code | | | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of contribution (\$) | | | | |
| | Contributor address; City; | State; Zip Code | | | | | |
| 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. | | | | | | | |

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 8/17/2020

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

| | | EXPENDITURE CA | TEGORIES | FOR | BOX 10(a) | | | |
|--|---|--|---|-----------------------------|-----------------|----------------------|--|------------------------|
| Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica | | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services | Office Ov Polling E se Printing I | verhead xpense Expens | | Trar Trav Trav | vel In District vel Out Of District | ment & Related Expense |
| | | The Instruction Guide ex | xplains how to | comp | lete this form. | | | |
| 1 Total pages Schedule F4: | 2 FILER | NAME | | | | 3 File | er ID (Ethics (| Commission Filers) |
| | Ruben J. | Olvera | | | ± | | | |
| 4 TOTAL OF UNITEM | ZED EXP | ENDITURES CHARG | SEDTOAC | RED | IT CARD | \$ | 609.15 | |
| 5 Date | 6 Payee name | | | | | | | |
| 11/01/2023 | Super C | heap Signs | # · · · · | | | | | |
| 7 Amount (\$) | 8 Payee | address; | | | City; | | State; | Zip Code |
| 481.43 | 9200 Waterford Centre Blvd #100, Austin, TX 78758 | | | | | | | |
| 9 TYPE OF EXPENDITURE | | Political | Non-F | Politica | ıl | | | |
| 10 | (a) Categor | y (See Categories listed at the top | of this schedule) | (b |) Description | | | |
| PURPOSE | Advertising Expense | | | P | Political Signs | | | |
| OF Expenditure | | | | | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | | | | | |
| 11 Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Ruben J. Olvera Fair Oaks Ranch City Council, Place 3 | | | | | | eld | | |
| Date | Payee | name | | | | | | |
| 11/05/2023 | Vista Pr | int | | | | | | |
| Amount (\$) | Payee | address; | | | City; | | State; | Zip Code |
| 127.72 | 275 Wyman Street. Waltham, MA 02451 | | | | | | | |
| TYPE OF EXPENDITURE | | Political | Non- | Politica | al | | | |
| | Catego | ry (See Categories listed at the top | of this schedule) | | Description | | | |
| PURPOSE OF Expenditure | Adverti | sing Expense | | P | olitical Brod | chure | es | |
| | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | | | | g expense | |
| | Candidate / Officeholder name Office sought Office held | | | | | | | |
| Complete ONLY if direct expenditure to benefit C/OH Ruben J. Olvera Fair Oaks Ranch City Council, Place 3 | | | | | | | | |
| | | | | | | | | |
| | ATTA | CH ADDITIONAL COPI | ES OF THIS | SCH | EDULE AS NE | EDEC |) | |