CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

PRESIDENT'S OFFICE

		1		=
The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 16	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MS . CHRISTINA NICKNAME LAST	MI A SUFFIX	OFFICE USE ONLY Date Received	\exists
	SANCHEZ			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX. APT / SUITE #: CO 1420 CAMINO ALTO EL PASO, TEXAS 79902	CITY, STATE: ZIP CODE		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (915) 204-0195	EXTENSION	Date Hand-delivered or Date Postmark	ed
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt # Amount \$	\Box
TREASURER NAME	MR. OMAR	· · · · · · · · · · · · · · · · · · ·	Date Processed	
	NICKNAME LAST VILLA	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / ST 1420 CAMINO ALTO EL PASO, TEXAS 79902	UITE #; CITY; STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (915) 533-8538	EXTENSION		
9 REPORT TYPE	January 15 30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 03 / 26 / 2019	THROUGH 04	Day Year / 24 / 2019	
11 ELECTION	Month Day Year Primary 05 / 04 / 2019 X General	Runolf Description Special	E	
12 OFFICE	OFFICE HELD (1f any) EL PASO COMMUNITY COLL. TRUSTEE DISTRICT 4	EGE EL PASO CO TRUSTEE DI		LEC
	go то	PAGE 2	APR 2 6 2019	
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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME CHI	RISTINA SAN	ICHEZ	15 Filer	ID (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CAND	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDI IDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE I INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT T	וד דטסאדוש	HE CANDIDATE'S OR OFFICEHOLDER'S	
	OF SUCH EXPENDIT	tres.		EL PASO	
	COMMITTEE TYPE	COMMITTEE NAME	СО	MMUNITY COLL	EGI
	SPECIFIC	COMMITTEE ADDRESS		APR 2 6 2019	
		COMMITTEE CAMPAIGN TREASURER NAME		RECEIVED	1
			DD	•	
Additional Pages			PR	RESIDENT'S OFF	ICE
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	1. TOTAL PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM	HAN IZED	\$	
	1	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	:	\$6,018.00	
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, SITEMIZED		\$	
	4. TOTAL	POLITICAL EXPENDITURES		\$ 3,399.81	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS	T DAY	\$ 8,016.19	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	THE	\$	
18 AFFIDAVIT					1
	ANDREA RICHA Notary ID #13191 My Commission E March 5, 202	8941 kpires	oformation of the state of the	n required to be reported by me	
AFFIX NOTARY STAN		by the said Christma Sanchez		_, this the	
day of Por.	, 20 19	to certify which, witness my hand and seal of office	Θ.	1	
Signature of officer	administering oath	Printed name of officer administering oath	Ti	No avy	
1					1

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (Ethics Con			mmissio	n Filers)
	Christi				
21	SCHEDULE SUE NAME OF SCHE				SUBTOTAL AMOUNT
1.	SCHE	DULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 3	,330.00
2.	SCHE	EDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 2	,688.00
3.	SCHE	DULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHE	DULE E: LOANS		\$	
5.	SCHE	DULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL COM	NTRIBUTIONS	\$ 3	,399.81
6.	SCHE	DULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHE	EDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL (CONTRIBUTIONS	\$	
8.	SCHE	EDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHE	DULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	IDS	\$	392.21
10.	SCHE	DULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$	
11.	SCHE	DULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	
12.		DULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RNED TO FILER	IONS	\$	

EL PASO
COMMUNITY COLLEGE

APR 2 6 2019

MONET	ARY POLITICAL	CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to	complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Christina Sanchez	1. 100 g	3 Filer ID (Ethics Commission Filers)
4 Date 3/27/2019	5 Full name of contributor A.K. Miller	out-of-state_PAC (ID#)	7 Amount of contribution (\$) \$100.00
	6 Contributor address; 357 Buena Vista	City; State; Zip Code El Paso, Texas 79905	
8 Principal occup	 ation / Job title (See Instructions)	9 Employer (See Instru	ctions)
Date 3/29/2019	Full name of contributor Eliot Shapleigh Contributor address;	City: State: Zip Code	Amount of contribution (\$) \$100.00
	701 N. St. Vrain	El Paso, Texas 79902	
Principal occup	pation / Job title (See Instructions)	Employer (See Instru	ctions)
Date 3/29/2019	Full name of contributor Yvonne Najera Contributor address; 432 Emerald Pass	City, State, Zip Code El Paso, Texas 79928	Amount of contribution (\$) \$50.00
Principal occu	pation / Job titlo (See Instructions)	Employer (See Instru	clions)
Date 3/30/2019	Full name of contributor Christopher Sullivan Contributor address; 6700 Pino Real	City: State: ZipCode El Paso, Texas 79912	Amount of contribution (\$) \$100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instru	ictions)
		ONAL COPIES OF THIS SCHEDULE AS C, please see instruction guide for additional	
<u></u>			APR 2 6 2019

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MONET	ARY POLITICAL	CONTRIBUTIONS	SCHEDULE A1
The	instruction Guide explains how to	complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Christina Sanchez	=	3 Filer ID (Ethics Commission Filers)
4 Date 4/1/2019	5 Full name of contributor Jonna Perillo	out-af-state PAC (ID#)	7 Amount of contribution (\$) \$30.00
	6 Contributor address; 2726 Richmond	City; State; Zip Code El Paso, Texas 79930	
8 Principal occupa	l alion / Job title (See Instructions)	9 Employer (See Instru	ctions)
Date 4/1/2019	Full name of contributor Kitty Schild Contributor address; 6136 Pino Real	City: State; Zip Codo El Paso, Texas 79912	Amount of contribution (\$) \$50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date 4/1/2019	Full name of contributor Gloria Lucero Contributor address; 8504 Morley	City: State: Zip Code El Paso, Texas 79925	Amount of contribution (\$) \$100.00
Principal occuj	pation / Job tillo (See Instructions)	Employer (See Instruc	cilons)
Date 4/2/2019	Full name of contributor Erich Morales Contributor address; PO Box 26732	City: State; ZipCode El Paso, Texas 79926	Amount of contribution (\$) \$50.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instru	ctions)
		TIONAL COPIES OF THIS SCHEDULE AS	reporting requirements.
			APH 2 6 2019

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MONET	ARY POLITICAL	CONTRIE	BUTIONS	SCHEDULE A1
The	Instruction Guide explains how to	complete this form.		1 Total pages Schedule A1:
2 FILER NAME	Christina Sanchez			3 Filer ID (Ethics Commission Filers)
4 Date 4/5/2019	5 Full name of contributor Gabriel Lopez	Cul-cf-state PAC	(154)	7 Amount of contribution (\$) \$200.00
	6 Contributor address, 1916 Littlefield		Zip Code Texas 78723	
8 Principal occupa	ation / Job title (See Instructions)	a delit est	9 Employer (See Instru	ctions)
	Full name of contributor			
Date 4/7/2019	Evelina Ortega Contributor address; 1201 Cincinnati	City; State	e, Zip Code , Texas 79902	Amount of contribution (S) \$100.00
Principal occup	pation / Job title (See tristructions)		Employer (See Instruc	ctions)
Date 4/9/2019	Full name of contributor Deborah Kastrin Contributor address: 3940 Flamingo	City; State	; ZIp Code Texas 79902	Amount of contribution (S) \$500.00
Principal occuj	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Date 4/11/2019	Full name of contributor Tracy Yellen Contributor address; 925 McKelligon	City: State	e; Zip Code	Amount of contribution (S) \$100.00
Principal occu	pation / Job title (See Instructions)		Employer (See Instru	ctions)
				EL PASO COMMUNITY COLLEGE
	ATTACH ADDIT		F THIS SCHEDULE AS action guide for addition I	
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MONET	ARY POLITICAL	CONTRIE	BUTIONS	SCHEDULE A1
The	Instruction Guide explains how to	complete this form.		1 Total pages Schedule A1:
2 FILER NAME	Christina Sanchez			3 Filer ID (Ethics Commission Filers)
4 Date 4/12/2019	5 Full name of contributor Paul Foster	out-of-state PAC	(Dr)	7 Amount of contribution (\$) \$500.00
	6 Contributor address; 123 W. Mills	- 1,1	Zip Code , Texas 79901	
8 Principal occupa	ation / Job title (See Instructions)		9 Employer (See Instruc	Lations)
Date 4/15/2019	Full name of contributor L. Frederick Francis Contributor address; 500 North Mesa	City; State	Zip Code , Texas 79901	Amount of contribution (S) \$500.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	illons)
Date 4/16/2019	Full name of contributor Edward Escudero Contributor address; 34 Goodwin	City; State	; Zip Code Texas 79902	Amount of contribution (\$) \$500.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Date 4/17/2019	Full name of contributor David Stout Contributor address; 2808 Grant	_	c (ID#) e, ZipCode exas 79930	Amount of contribution (S) \$150.00
Principal occuj	 pation / Job title (See Instructions)		Employer (See Instruc	dions)
	1000		Anadori (account)	_
				EL PASO
	ATTACH ADDI		F THIS SCHEDULE AS action guide for additional	eporting requirements.
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MONET	ARY POLITICAL	CONTRIE	BUTIONS	SCHEDULE A1
The	instruction Gulde explains how to c	omplete this form.	:	1 Total pages Schedule A1: 5
2 FILER NAME	Christina Sanchez			3 Filer ID (Ethics Commission Filers)
4 Date 4/22/2019	5 Full name of contributor Amy O'Rourke	ul-of-sta e PAC	(C)	7 Amount of contribution (\$) \$100.00
	6 Contributor address; 1100 Los Angeles	4274.5	, Zip Code , Texas 79902	
8 Principal occupa	ation / Job little (See Instructions)		9 Employer (See Instruc	ctions)
Date	Full name of contributor	Out-of-state PAG	(ID#)	Amount of contribution (S)
4/22/2019	Carmen Calderon Dominguez Contributor address; 355 Pratt		e; Zip Code ,Texas 79915	\$100.00
Principal occup	ation / Job tille (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAI	C (ID#)	Amount of contribution (\$)
	Contributor address;	City; State	e, Zip Code	
Principal occup	l action / Job title (See Instructions)	41-2-11-2-1	Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PA	C (ID#)	Amount of contribution (\$)
	Contributor address,	City; State	e; Zip Code	
Principal occup	I Dation / Job title (See Instructions)		Employer (See Instruc	tions)
				EL PASO
	ATTACH ADDITI	ONAL COPIES C	OF THIS SCHEDULE AS action guide for additional	COMMUNITY COLLEGE POOR PROPERTY OF THE PROPERT
				APR 2 6 2019
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

CONT	RIBUTIONS		Soliebote Az
Th	e Instruction Guide explains how to complete this form	1,	1 Total pages Schedule A2:
2 FILER NAME	E Christina Sanchez		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 2,688.00
5 Date	6 Full name of contributor		8 Amount of 9 In-kind contribution Contribution description
4/12/19	Everardo Ramirez 7 Contributor address: City: State: Zip Cod 8701 Castner El Paso, Texas		\$336.00 Printing Expense Check if travel outside of Texas. Complete Schedule T.
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (If any) (FOR JUDICIAL)		
Date 4/12/19	Full name of contributor out of state PAC (ID# Everardo Ramirez Contributor address City: State: Zip Co- 8701 Castner El Paso, Texas		Amount of Contribution \$ In-kind contribution description \$2,352.00 Printing Expense Check if travel outside of Texas. Complete Schedule T.
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribi	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	e employer/law firm (FOR JUDICIAL)	Law fire	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED APR 2 6 2019
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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SCHEDULE F1

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 Git/Awards/Memoruls Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Exponse Travol In District Travol 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		3 Filer ID (Ethics Commission Filers)
	Christina Sanchez		
4 Date 3/30/2019	5 Payee name		
	Home Depot		
6 Amount (\$) \$17.23	7 Payee address: City; State; Zip Cede 7545 N. Mesa		
911.23			
	El Paso, Texas 79912		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Advertising Expense	Sign posts	
PURPOSE			
OF EXPENDITURE			
EXPERIOR		l	
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C	/OH		
Date	Payee name		
	Office Depot		
3/30/2019	orrice peboc		
Name (6)	Payce address; City; State; Zip Code		
Amount (\$) \$179.01	Payce address; City; State; Zip Code 801 Sunland Park Dr Space B		
4213102	El Paso, Texas 79912		
	HI IUSO, ICAUS 19912		
	Calegory (See Categories listed at the top of this schedule)	Description	
PURPOSE	Overhead Expense	Office su	upplies; ink
OF EXPENDITURE			* *
Complete ONLYif direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C	он		
Date	Payoe name		
3/30/2019	Michaels		
Amount (S)	Payoe address; City; State; Zip Code		
\$23.82	811 Sunland Park Dr		
	El Paso, Texas 79912		
	Calagory (Can Catagories felled at the loss of this cabadida)	Description	
BUBBOSE	Category (See Categories listed at the lop of this schedule)		
PURPOSE OF	Advertising Expense	T-Shirts	
EXPENDITURE			
Complete ONLY if direct	Candidate / Officeholder name	Office sought	C Office held
expenditure to benefit C.			EL°#A'S'O
l			COMMUNITY COLLE
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APR 2 6 2019

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advortising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment

Event Expense
Foes
Food/Sovorage Expense
Gitt/Awards/Memorials Expense
Legal Services

Loan Repayment/Rombursement
Office Overhoad/Rontal Expense
Polling Expense
Printing Expense
Salarios/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.		
Total pages Schedule F1	2 CILER HAME		3 Filer ID (Ethics Commission Filers)	
	Christina Sanchez			
Date	5 Payee name			
/4/2019	Regency Printing			
Amount (\$)	7 Payee address: City; Stale, Zip Code			
\$146.14	2313 N Piedras			
	El Paso, Texas 79930			
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
	Printing Expense	Printing- F	Duch cards	
PURPOSE		Françaig.	Table Cards	
OF				
EXPENDITURE				
Complete ONLY if direct expenditure to benefit C.		Office sought	Office held	
Date	Payee name			
4/6/2019	Network Solutions			
1/0/4012				
Amount (\$)	Payee address; City; State; Zip Code			
\$1.99	12808 Gran Bay Parkway			
	Jacksonville, Florida 32258			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Overhead Expense	Internet	hostina	
OF EXPENDITURE		1110011100	1103 021119	
EXPENDITURE				
Complete <u>ONLY</u> if direct expenditure to benefit C.	Candidate / Officeholder name C/OH	Office sought	Office held	
Date	Payee name			
4/8/2019	Taco Cabana			
1,0,=0-0				
Amount (S)	Payoe address: City; State; Zip Code			
\$15.14	6345 Gateway Blvd W			
•	El Paso, Texas 79925			
33,18 1				
	Calegory (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Food/Beverage Expense	Food for	canvassers	
EXPENDITURE				
Complete ONLY if direct	Candidate / Officeholder name	Office sought	F1 Officeheld	
Complete ONLY if direct expenditure to benefit Co	/ОН		EL°PA'S'O	
			COMMUNITY COLLE	G
	ATTACH ADDITIONAL COPIES OF THI	IS SCHEDULE AS N		
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APR 2 6 2019

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advartising Expanse Event Expense Loan Repayment/Reimbursement Accounting/Banking Foes Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Poling Expense Contributions/Donations Made By Gilf/Awards/Memorials Expense Poling Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Credit Card Paymont

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 now to c		
1 Total pages Schedulo F1	2 PILET NAME		3 Filer ID (Ethics Commission Filers)
A Data	Christina Sanchez		
4 Date 4/8/2019	5 Payee name Constant Contact		
6 Amount (\$)	7 Payoe address: City, State: Zip Code		
\$47.97	1601 Trapelo Rd.		
,	Waltham, Massachusetts 02451		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense	Email campa	aign
OF			
EXPENDITURE	1		
9 Complete ONLY if direct		Office sought	Office held
expenditure to benefit C	ООН		
Date	Payoe name		
4/13/2019	Verizon		
4,10,2015			
Amount (\$)	Payce address; City; State; Zip Code		
\$223.80	820 Sunland Park Ste. B		
	El Paso, Texas 79912		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Overhead Expense	,	internet
OF EXPENDITURE	•		
		access	
Complete QNLYif direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C			
Date	Payce name Alexander Galarza		
4/15/2019	Alexander Galarza		
Amount (S)	Payoe address, City, State, Zip Code		
\$150.00	8459 Waterfall		
+ · · ·	El Paso, Texas 79907		
		T	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Contract Labor	Canvasse	
EXPENDITURE		١.	
Complete QNLY if direct	Candidato / Officeholder name	Office sought	F Collect (NO)
expenditure to benefit C	С/ОН	·	
			COMMUNITY COLLE
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS	NEEDED
orms provided by Texas I	Ethics Commission www.ethics.state.tx.i	JS	APR 2 Revised 9/8/2015

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Food Food/Bevarage Expense Gitt/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarros/Wagos/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travol In District Travel Out of District Other (enter a category not listed above)

Crodit Card Payment	The Instruction Guide explains how to co	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Christina Sanchez		
4 Date	5 Payoe name		
4/15/2019	Nicole Drury		
6 Amount (\$)	7 Payee address; City, State; Zip Code		
\$354.00	816 N. Estrella		
	El Paso, Texas 79903		
8	(a) Chtegory (See Categories listed at the top of this schedule)	(b) Description	
	Contract Labor	Canvasser	
PURPOSE	- F		
OF EXPENDITURE	60		
EXPERIOR	0		
9 Complete ONLY if direct expenditure to benefit Co	Candidate / Officeholder name /OH	Office sought	Office held
Date	Payee namo		
4/16/2019	NGP VAN		
4/10/2013			
Amount (\$)	Payee address; City; State; Zip Code		
\$67.20	1445 New York Ave. NW, Suite	200	
	Washington, DC 20005		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Polling Expense	Voter Lis	st
OF EXPENDITURE	n		
Complete ONLYil direct expenditure to benefit Co	Candidate / Officeholder name /OH	Office sought	Office held
Date	Payee name		
4/17/2019	Luis Chavira		
Amount (S)	Payue address; City; State; Zip Code		
\$342.00	6080 Belladonna		
•	El Paso, Texas 79924		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contract Labor	Canvasse	r
OF EXPENDITURE			
Complete QNLY if direct Candidate / Officeholder name exponditure to benefit C/OH		Office sought	EL°#X50
expenditions to benefit of	· • · · ·		
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDIII E AS	COMMUNITY COLLE
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

AdvertIsing Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officoholder/Political Committee Credit Card Payment Event Expense Foos Food/Boverage Expenso Gitt/Awards/Memorials Expense Logal Sorvices Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salanes/Wages/Contract Labor Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travol 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		3 Filer ID (Ethics Commission Filers)
-	Christina Sanchez		
4 Date	5 Payee name		*
4/22/2019	Sun Circle Strategic Group		
6 Amount (\$)	7 Payce address: City; State; Zip Code		
\$1,777.98	1401 Montana		
	El Paso, Texas 79902		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Advertising Expense	Postage	
PURPOSE	N 2 2	1	
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above) Advertising Exponse Event Expense Loan Repayment/Reimbursement Accounting/Banking Consulting Expense Contributions/Donations Made By Focs Food/Beverage Expense Gift/Awards/Memorials Expense Office Overhead/Rental Expense Polting Expense Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule G. Christina Sanchez 4 Date 5 Pavec name 4/12/2019 Wix.com 6 Amount (S) 7 Payee address: City; State; Zip Code \$22.00 500 Terry A Francois Blvd XX Reimbursament from San Francisco, California 94158 political contributions intended (b) Description (a) Category (See Categories listed at the top of this schedule) В PURPOSE Internet hosting OF EXPENDITURE Overhead Expense 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Date Payce name 4/5/2019 Regency Printing City: State: Zip Code Payce address; Amount (\$) \$181.86 2313 N Piedras XX Reimbursement from El Paso, Texas 79930 political contributions intended (b) Description Category (See Categories listed at the top of this schedule) **PURPOSE** OF EXPENDITURE Printing- Push cards Printing Expense Complete ONLYif direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Date Payee name 3/29/2019 Regency Printing Amount (S) Payee address; City: State; Zip Code 2313 N Piedras \$146.14 El Paso, Texas 79930 XX Rombursoment from political contributions intended (b) Description Category (See Categories listed at the top of this schedule) PURPOSE Printing Expense Printing- Push cards OF EXPENDITURE **EL PASO** Complete ONLY if direct expenditure to benefit C/OH COMMUNITY COLLEGE Candidate / Officeholder name Office sought ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED APR 2 6 2019

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POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above) Advertising Expense Event Expense Loan Repayment/Reimbursement Foes Food/Beverage Expense Gilt/Awards/Memorials Expense Office Overhead/Rental Exponse Polling Expense Printing Expense Salaries/Wages/Contract Labor Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Logal Services Credit Card Payment The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule G Christina Sanchez 4 Date 5 Payee name 4/15/2019 Papa Johns 6 Amount (\$) 7 Payee address, City, State; Zip Code \$42.21 2600 N. Mesa El Paso, Texas 79902 XX Reimbursoment from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE Food for volunteers OF EXPENDITURE Food/Beverage Expense 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Date Payee name City, State, Zip Code Amount (S) Pavee address: Reimbursement from political contributions intended (b) Description Category (See Categories listed at the top of this schedule). PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office held Office sought Date Payce name Amount (\$) Payee address; City; State; Zip Code ☐Reimbursement from political contributions intended (b) Description Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE **EL PASO** COMMUNITY COLLEGE Complete QNLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS MEEDED APR 2 6 2019

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