

# 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:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr Gilbert D.  
HERRERO

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

803 North Alamo Pecos TX 79772

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(432) 448-3121

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr Gilbert D.  
HERRERA

7 CAMPAIGN TREASURER ADDRESS

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

CITY;

STATE;

ZIP CODE

803 North Alamo

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(432) 448-3121

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

Month

Day

Year

12 / 11 / 2023 THROUGH 1 / 16 / 2024

11 ELECTION

ELECTION DATE

Month

Day

Year

3 / 5 / 2024

ELECTION TYPE

Primary  
General

Runoff

Special

Other Description

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Commissioner PCT. 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		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	\$ 3,397.71
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	\$

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.

*Gilbert D. Herrera*

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Gilbert D. Herrera this the 16 day of January

20 24, to certify which, witness my hand and seal of office.

Rebecca R. Granado Rebecca R. Granado Deputy Clerk  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (month) (year)

Signature of Candidate/Officeholder (Declarant)

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.

•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME

*C. Albert D. Herrera*

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

*C. Albert D. Herrera*

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

**A. CAMPAIGN FUNDS**

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

**B. ASSETS**

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder

# 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.

<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME <i>Gilbert D Herrera</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>11/14/23</i>	<b>5</b> Payee name <i>Gibson Home Center</i>	
<b>6</b> Amount (\$) <i>\$431.91</i> <small>Reimbursement from political contributions intended</small>	<b>7</b> Payee address; <i>810 Walthall</i>	City; State; Zip Code <i>Pecos TX 79772</i>
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	<b>(b)</b> Description <i>2x4's</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Gilbert D Herrera</i>	Office sought <i>Commissioner Pct 3</i>
Date <i>11/16/23</i>	Payee name <i>Gibsons Home Center</i>	
Amount (\$) <i>\$4.91</i> <small>Reimbursement from political contributions intended</small>	Payee address; <i>810 Walthall</i>	City; State; Zip Code <i>Pecos TX 79772</i>
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Stop Advertising Expense</i>	Description <i>Staples</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Gilbert D Herrera</i>	Office sought <i>Commissioner Pct 3</i>
Date <i>11/15/23</i>	Payee name <i>Gibson Home Center</i>	
Amount (\$) <i>\$23.30</i> <small>Reimbursement from political contributions intended</small>	Payee address; <i>810 Walthall</i>	City; State; Zip Code <i>Pecos TX 79772</i>
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Paint Roller</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Gilbert D Herrera</i>	Office sought <i>Commissioner Pct 3</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(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.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date	<b>6</b> Payee name	
<b>7</b> Amount (\$)	<b>8</b> Payee address;	City; State; Zip Code
<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
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
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>

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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.

<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME <i>Gilbert D. Herrera</i>	<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <i>11/18/23</i>	<b>5</b> Payee name <i>Gibson Home Center</i>		
<b>6</b> Amount (\$) <i>\$ 27.15</i> <small>Reimbursement from political contributions intended</small>	<b>7</b> Payee address; <i>810 Walthall</i>	City; State; Zip Code <i>Pecos TX. 79772</i>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	<b>(b)</b> Description <i>Staple Gun</i>	
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Gilbert D Herrera</i>	Office sought <i>Commissioner Pct 3</i>	Office held
	Date <i>1/6/24</i>	Payee name <i>WalMart</i>	
Amount (\$) <i>\$42.30</i> <small>Reimbursement from political contributions intended</small>	Payee address; <i>1903 S. Cedar</i>	City; State; Zip Code <i>Pecos TX. 79772</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Spot light</i>	
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Gilbert D Herrera</i>	Office sought <i>Commissioner Pct 3</i>	Office held
	Date <i>1/4/24</i>	Payee name <i>Tractor Supply</i>	
Amount (\$) <i>\$ 38.94</i> <small>Reimbursement from political contributions intended</small>	Payee address; <i>2208 West Cannon</i>	City; State; Zip Code <i>Pecos TX. 79772</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Solar lamps</i>	
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>G. D Herrera</i>	Office sought <i>Commissioner Pct 3</i>	Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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### 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			

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<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME <i>Gilbert D. Herrera</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>11/22/23</i>	<b>5</b> Payee name <i>Sanat Bhatt</i>	
<b>6</b> Amount (\$) <i>\$150.00</i> <small>Reimbursement from political contributions intended</small>	<b>7</b> Payee address: <i>2301 South Eddy</i>	City; State; Zip Code <i>Pecos TX. 79772</i>
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Rental</i>	<b>(b)</b> Description <i>Space rental for sign</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Gilbert D Herrera</i>	Office sought <i>Commissioner Pct 3</i>
Date <i>11-1-23</i>	Payee name <i>JVC Media, LLC</i>	
Amount (\$) <i>2,338.20</i> <small>Reimbursement from political contributions intended</small>	Payee address: <i>3106 Fall Crest Dr.</i>	City; State; Zip Code <i>San Antonio TX. 78247</i>
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expenses</i>	Description <i>Signs 4'x8' and yard signs</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Gilbert D Herrera</i>	Office sought <i>Commissioner Pct 3</i>
Date <i>12/4/23</i>	Payee name <i>JVC Media, LLC</i>	
Amount (\$) <i>341.00</i> <small>Reimbursement from political contributions intended</small>	Payee address: <i>3106 Fall Crest Dr.</i>	City; State; Zip Code <i>San Antonio TX. 78247</i>
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expenses</i>	Description <i>Signs 4'x8'</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Gilbert D Herrera</i>	Office sought <i>Commissioner Pct 3</i>

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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### 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			

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<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee name	
<b>6</b> Amount (\$)  Reimbursement from political contributions intended	<b>7</b> Payee address;	City; State; Zip Code
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
	Date <span style="float:right">Payee name</span>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
	Date <span style="float:right">Payee name</span>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
	Date <span style="float:right">Payee name</span>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
	Date <span style="float:right">Payee name</span>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# CASH RECEIPT

No. 100

Date 11/22/2023

Received From

Payment Method

Gilbert Hererra

Amount \$150.00

For: Election Sign

Received By: SanatBhatt properties



JVC Media, LLC  
 3106 Fall Crest Dr  
 San Antonio, TX 78247  
 512-585-0544  
 audrey@jcmediasa.com  
 http://www.jcmediasa.com

**Invoice 3504**



<b>BILL TO</b>	<b>SHIP TO</b>
Gilbert D. Herrera	Gilbert D. Herrera
Campaign	Campaign
512 S. El Paso	512 S. El Paso
Balmorhea, Tx 79718	Balmorhea, Tx 79718

DATE 11/01/2023	<b>PLEASE PAY</b> <b>\$0.00</b>	DUE DATE 11/01/2023
--------------------	------------------------------------	------------------------

DATE	DESCRIPTION	QTY	RATE	AMOUNT
	<b>Business cards</b> 2,000 business cards printed 2-sided on 14pt C2S	1	150.00	150.00T
	<b>Signs</b> yard signs 18'x24" printed 2-sides	200	5.00	1,000.00T
	<b>Wire Stakes</b>	1	200.00	200.00T
	<b>Signs</b> Signs 4'x8' printed 1-side	18	45.00	810.00T

We appreciate the opportunity to service you. We look forward to helping you in the future!

SUBTOTAL	2,160.00
TAX	178.20
TOTAL	2,338.20
PAYMENT	2,338.20
<b>TOTAL DUE</b>	<b>\$0.00</b>

THANK YOU.

A 3% convenience fee will be added if paid by credit card. Please email Audrey at, audrey@jcmediasa.com, if you would like to take advantage of this option.

JVC Media, LLC  
 3106 Fall Crest Dr  
 San Antonio, TX 78247  
 512-585-0544  
 audrey@jcmediasa.com  
 http://www.jcmediasa.com

# Invoice 3550



<b>BILL TO</b> Gilbert D. Herrera Campaign 512 S. El Paso Balmorhea, Tx 79718	<b>SHIP TO</b> Gilbert D. Herrera Campaign 512 S. El Paso Balmorhea, Tx 79718	<b>DATE</b> 12/04/2023	<b>PLEASE PAY</b> <b>\$0.00</b>	<b>DUE DATE</b> 12/04/2023
---	---	---------------------------	------------------------------------	-------------------------------

DATE	DESCRIPTION	QTY	RATE	AMOUNT
	<b>Signs</b> 4'x8' signs digitally printed 1-side / full color	7	45.00	315.00T
SUBTOTAL				315.00
TAX				26.00
TOTAL				341.00
PAYMENT				341.00
<b>TOTAL DUE</b>				<b>\$0.00</b>

PAYED

THANK YOU.

A 3% convenience fee will be added if paid by credit card. Please email Audrey at, audrey@jcmediasa.com, if you would like to take advantage of this option.



TractorSupply.com

2208 WEST CANNON ST  
PECOS, TX 79772  
432-445-1306

Ticket: 279032  
Date: 1/4/24  
Store: 2309  
Cashier: Johana  
Time: 3:05 PM  
Register: 1

Item	Qty	Price	Amount
RS SOLAR LAMP BLACK 2088443	1 ( WAS	11.99 19.99 )	11.99
RS SOLAR LAMP BLACK 2088443	1 ( WAS	11.99 19.99 )	11.99
RS SOLAR LAMP BLACK 2088443	1 ( WAS	11.99 19.99 )	11.99
		Subtotal	35.97
		Tax	2.97
		Total	38.94

Debit Card - SALE 38.94  
 \*\*\*\*\*3595 - EMV Chip  
 Bank Reference #: 51350289530  
 Terminal ID : 001792309000100  
 Cryptogram : AC4797AE581DFC73  
 AID : A0000000042203  
 APP : Debit  
 CVM : PIN Verified / 420300  
 TVR : 8000048000 / TSI : 6800

Change 0.00  
 I agree to pay the above amount according to my card issuer agreement.

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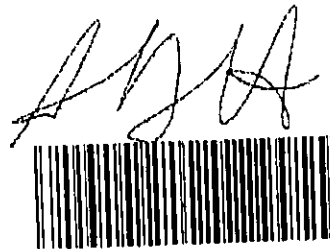
Gibson Home Center  
 810 Walthall  
 Pecos TX 79772  
 432-447-9652

11/15/2023 2:34 PM

BRANCH	1000	INVOICE
CASHIER	DMUNOZ	2311-202773
ACCOUNT	HERRGI	
JOB	0	
NAME	GILBERT D. HERRERA	
6842801	POLE EXTENSION WOOD THRD	
1	EACH @ 5.57EACH	5.57
3201688	OBR0060090 ACME CAGE FRAM	
1	EACH @ 4.85EACH	4.85
6500326	RM 410 PLAST TRAY LINER 9"	
2	EA @ 1.06 EA	2.12
0136291	RC 139 PAINT ROLLER COVER	
1	PKG @ 8.98 PKG	8.98
SUBTOTAL		21.52
SALES TAX PEC 8.25%		1.78
TOTAL		23.30
AMOUNT PAID		23.30
CHANGE DUE		0.00

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PAYMENT METHOD[S] 23.30  
 CHARGE TO ACCOUNT



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11/14/2023 3:31 PM

BRANCH	1000	INVOICE
CASHIER	LISET	2311-202275
ACCOUNT	HERRGI	
JOB	0	
NAME	GILBERT D. HERRERA	
4310553	CAGE ROLLER FRAME 4WIRE 4	
2	EACH @ 2.93EACH	5.86
2916245	BRUSH FLAT POLY ECONOMY 3IN	
1	EA @ 2.74 EA	2.74
2017341	67000 PAINT EXTER SG WHT GAL	
1	EA @ 35.99 EA	35.99
4596102	R271-4" ROLLER COVER 1/2	
1	BALE @ 9.43BALE	9.43
1092287	51185 9X3 STAR DECK TAN	
2	BOX @ 41.99 BOX	83.98
2017341	67000 PAINT EXTER SG WHT GAL	
1	EA @ 35.99 EA	35.99
2X4X8	2X4X8	
50	EACH @ 4.50EACH	225.00
SUBTOTAL		398.99
SALES TAX PEC 8.25%		32.92
TOTAL		431.91
AMOUNT PAID		431.91
CHANGE DUE		0.00

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PAYMENT METHOD[S] 431.91  
 CHARGE TO ACCOUNT



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 PECOS TX 79772  
 ST# 00898 OP# 005432 TR# 08 TR# 04920  
 # ITEMS SOLD 4  
 TC# 7513 1242 5265 2436 216



MS 60L SPOT	084062311432	9.77 X
MS 60L SPOT	084062311432	9.77 X
MS 60L SPOT	084062311432	9.77 X
MS 60L SPOT	084062311432	9.77 X

SUBTOTAL 39.08  
 TAX 1 @ 8.25% 3.22  
 TOTAL 42.30  
 DEBIT TEND 42.30  
 CHANGE DUE 0.00

EFT DEBIT 42.30 TOTAL PURCHASE  
 PAY FROM PRIMARY

Debit \*\*\*\*\* 3595 1 0

REF # 400600758705  
 NETWORK ID 0069 APPR CODE 021862

AID A0000000042203  
 AAC AA4A2EFE9687851A  
 \*NO SIGNATURE REQUIRED  
 TERMINAL # SC011603

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11/18/2023 10:08 AM

BRANCH 1000 INVOICE  
 CASHIER KRISTI 2311-204153

ACCOUNT HERRGI  
 JOB 0  
 NAME GILBERT D. HERRERA

6479125	STAPLE GUN MULTI-PURPOSE	
1	EACH @ 20.16EACH	20.16
4479515	STAPLE, CEIL/TILE F/T50 1.2	
1	PKG @ 4.92 PKG	4.92

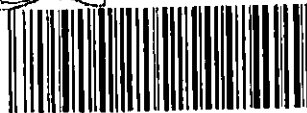
SUBTOTAL 25.08

SALES TAX PEC 8.25% 2.07

TOTAL 27.15  
 AMOUNT PAID 27.15  
 CHANGE DUE 0.00

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PAYMENT METHOD(S)  
 CHARGE TO ACCOUNT 27.15



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11/16/2023 5:20 PM

BRANCH 1000 INVOICE  
 CASHIER KRISTI 2311-203489

ACCOUNT HERRGI  
 JOB 0  
 NAME GILBERT D. HERRERA

4479200	50924/509 STAPLE 9/16" 12	
1	PKG @ 4.54 PKG	4.54

SUBTOTAL 4.54

SALES TAX PEC 8.25% 0.37

TOTAL 4.91  
 AMOUNT PAID 4.91  
 CHANGE DUE 0.00

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PAYMENT METHOD(S)  
 CHARGE TO ACCOUNT 4.91

