# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH

				COVER SHEET PG
The C/OH Instruction	Guide explains h	ow to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR NICKNAME CESAR	CESARIO	MI R SUFFIX	OFFICE USE ONLY  Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO B 1832 ADAI		PECOS TX 79772	JUL 1 5 2024
5 CANDIDATE/ OFFICEHOLDER PHONE	(432 )	PHONE NUMBER 448-2414	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MRS NICKNAME	DANYA  LAST  BARRAZA	MI	Receipt # Amount \$  Date Processed  Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS 2118 WYO	(NO PO BOX PLEASE); APT / SI MING ST.	UITE#, CITY; PECOS	STATE; ZIP CODE TX 79772
8 CAMPAIGN TREASURER PHONE 9 REPORT TYPE	( 432 )	PHONE NUMBER 287-4592	EXTENSION	
* REPORT TYPE	January 15	30th day before elec		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month 1	Day Year / 1 / 24	THROUGH 6	Day Year / 30 / 24
11 ELECTION	Month Day	Year Primary	Runoff Other Description  Special	
12 OFFICE	OFFICE HELD (if any	)	13 OFFICE SOUGHT (if known) CONSTABLE PO	CT 4
POLITICAL COMMITTEE(S)  Additional Pages	THIS BOX IS FOR NOT THE CANDIDATE / OFFI CONSENT. CANDIDATE COMMITTEE TYPE  GENERAL  SPECIFIC	CE OF POLITICAL CONTRIBUTIONS AI CEHOLDER. THESE EXPENDITURES IS AND OFFICEHOLDERS ARE REQUIRE COMMITTEE NAME N/A COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREAS  COMMITTEE CAMPAIGN TREAS		DE BY POLITICAL COMMITTEES TO SUPPORT ATE'S OR OFFICEHOLDER'S KNOWLEDGE OR BY RECEIVE NOTICE OF SUCH EXPENDITURES.
		GO TO P	PAGE 2	

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 2

		16 File	ID (Ethic	s Commission Filers)
PLEDGES, LOANS, OR GUA	RANTEES OF LOAMS OF	ER THAN	\$	
2. TOTAL POLITICAL CONT (OTHER THAN PLEDGES, LO	RIBUTIONS DANS, OR GUARANTEES OF	LOANS)	\$	2,911.00
3. TOTAL UNITEMIZED POLITI	CAL EXPENDITURE.		\$	205.00
4. TOTAL POLITICAL EXPEN	IDITURES		\$	
5. TOTAL POLITICAL CONTRIB OF REPORTING PERIOD	UTIONS MAINTAINED AS OF	THE LAST DAY	\$	
6. TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPORT	OF ALL OUTSTANDING LOAN NG PERIOD	IS AS OF THE	\$	-
r, or affirm, under penalty of perjury, d to be reported by πe under Title 15,	that the accompanying repo	rt is true and cor	rect and i	ncludes all information
·		7		
			<del>-</del>	<del></del>
	Signatur	e of Candidate o	r Officeho	older
Pleas	NOTARY PUBL NOTARY PUBL STATE OF TEXT	106 10 13		
re me by <u>Clesario</u> Cl	sar Unas th		day of_	July .
n, witness my hand and seal of office.	Polos		. 1	Voug).
	_ ravouo(		_/\/	Hann
Printed name of of	icer administering oath		Title of offic	er administering oath
	OR			
	and my data of h	wirth ic		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del></del> _	·
(street)	(city)			·
•	on the	(State) (Z	•	(country)
	, on the day of	(month)	, 20 <u> </u>	
	Signature of (	Candidate/Officeh	older (De	clarant)
	PLEDGES, LOANS, OR GUA CONTRIBUTIONS MADE EL  2. TOTAL POLITICAL CONT. (OTHER THAN PLEDGES, LO  3. TOTAL UNITEMIZED POLITICAL  4. TOTAL POLITICAL EXPENSION  5. TOTAL POLITICAL CONTRIB OF REPORTING PERIOD  6. TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPORTION  7, or affirm, under penalty of perjury, d to be reported by me under Title 15,  TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPORTION  TOTAL PRINCIPAL AMOUNT  LAST DAY OF THE REPORTION  TOTAL PRINCIPAL AMOUNT  TOTAL PRINCIPAL AMOUNT  LAST DAY OF THE REPORTION  TOTAL PRINCIPAL AMOUNT  LAST DAY OF THE REPORTION  TOTAL PRINCIPAL AMOUNT  TOTAL PRINCIPAL AMOUNT  TOTAL PRINCIPAL AMOUNT  LAST DAY	PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF OTHER PROPRIES.  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOAN LAST DAY OF THE REPORTING PERIOD  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOAN LAST DAY OF THE REPORTING PERIOD  7. OR Affirm, under penalty of perjury, that the accompanying report of the penalty of	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)  3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  7. or affirm, under penalty of perjury, that the accompanying report is true and cord to be reported by me under Title 15, Election Code.  Pleas  Pleas  Pleas  Printe of Candidate of Candidat	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)  3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.  4. 1 TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  7. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  8. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  8. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  9. SIgnature of Candidate or Officehold of the Principal Control of Candidate or Officehold of the Principal Control of Candidate or Officehold of the Principal Control of Candidate or Officehold of Can

### MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

If the reque	 sted information is not applicable, <b>DO NOT in</b> 	clude this page in the	report.
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME Cesario C	esar Urias		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor • out-of-state PAC #PROJECTREDTX	7 Amount of contribution (\$)	
06/21/2024	6 Contributor address; City; 1108 Lavaca, St #110-610 Austin Te;	2,911.00	
8 Principal occu	nation / Joh title /See Instance	9 Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor cut-of-state PAC (	ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
·	Contributor address; City;	State; Zip Code	
Principal occupa	ition / Job title (See Instructions)	Employer (See Instruction	ons)
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEI	EDED porting requirements.

# #ProjectRedTx

INKIND Notice #ProjectRedTx 1108 Lavaca, St #110-610 Austin Texas, 78701

Has made an In-Kind contribution to the following campaign:

Cesario Urias Campaign PO Box 185 Pecos, TX 79772

In the Amount of:

\$1,250

For:

Printed Materials - Graphics

Date:

6/21/2024

This is for your report expenditures through June 30 $^{\rm th}$  2024 and reported July 15 $^{\rm th}$  2024 on your TEC Report (Form C/OH). The in-kind contribution should appear on schedule A1.

## #ProjectRedTx

INKIND Notice #ProjectRedTx 1108 Lavaca, St #110-610 Austin Texas, 78701

Has made an In-Kind contribution to the following campaign:

Cesario Urias Campaign PO Box 185 Pecos, TX 79772

In the Amount of:

\$1,661

For:

Printed Materials - Signs

Date:

6/21/2024

This is for your report expenditures through June 30<sup>th</sup> 2024 and reported July 15<sup>th</sup> 2024 on your TEC Report (Form C/OH). The in-kind contribution should appear on schedule A1.

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

		EXPENDITURE CAT	regorie:	S FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi Credit Card Payment	By ical Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	Loan Re Office C Polling I Printing Salaries	epayment/Reimbursement Overhead/Rental Expense Expense   Expense   SWeges/Contract Labor	Travel In District Travel Out Of District	pment & Related Expense
1 Total pages Schedule G:	I	• =			3 Filer ID (Ethic	s Commission Filers)
		io "Cesar" Urias			,	a deministration of the same
4 Date 01/15/2024	5 Payee nar Pecos	Enterprise				
6 Amount (\$) 100.00 Relimbursement from political contributions intended	7 Payee add 324 S (	dress; Cedar St.		city; Pecos	State; TX	Zip Code 79772
8 PURPOSE OF EXPENDITURE	(a) Category Advertisi	(See Categories listed at the top of this ng Expense	s schedule)	(b) Description Newspaper ad.		<del></del>
	(c) (	Check if travel outside of Texas. Complete	Schedule T.	Check if Austin,	, TX, officeholder living e	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candida	ate / Officeholder name		Office sought		Office held
Date	Payee nam	ne				
06/21/2024	TahoeE	Зау				
Amount (\$) 105.00 Reimbursement from political contributions intended	Payes add	lress;		City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category Advertisin	(See Categories listed at the top of this ng Expense	schedule)	Description Koozies		
		Chack if travel outside of Texas. Complete S	Schedule T.	Check if Austin,	TX, officeholder living e	expense
Complete ONLY if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held
Date	Payee nam	ie				
Amount (\$)	Payee add	ress;		City;	State;	Zip Code
Reimbursement from political contributions intended						·
PURPOSE OF EXPENDITURE	Category (	See Categories listed at the top of this t	schedule)	Description		
	Ct	neck if travel outside of Texas. Complete So	chedule T.	Check if Austin, T	TX, officeholder living ex	pense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candida	te / Officeholder name		Office sought		Office held
	ATTAC	H ADDITIONAL COPIES O	)F THIS SO	CHEDINE AS MEEDE		

### Copy of payment receipt from PECOS ENTERPRISE

From: Intuit (do\_not\_reply@intuit.com)

To: urias\_hotshot@yahoo.com

Date: Wednesday, July 10, 2024 at 02:06 PM CDT

#### **Dear CESARIO URIAS**

Below is the sales receipt provided to you by PECOS ENTERPRISE

PECOS ENTERPR 324 S. CEDAR ST P	ISE ECOS TX 797723211		Receipt
Transaction Type	Sale	Amount	\$100.0
Cardholder Name Card Type	CESARIO URIAS MasterCard	Credit Card Number	2595
Date & Time Transaction ID	01/15/2024 - 12:28 PST MQ0207873520	Authorization Code	03834S

### Thank you for your order, PECOS ENTERPRISE

#### PEG2@PECOS.NET

No additional transfer fees or taxes apply.

Intuit Payments Inc (IPI) processes payments as an agent of the business. Payment processed by IPI constitutes payment to the business and satisfies your obligation to pay the business, including in connection with any dispute or case, in law or equity. Money movement services are provided by IPI pursuant to IPI's licenses (NMLS #1098819, www.intuit.com/legal/licenses/payment-licenses/). IPI is located at 2700 Coast Avenue, Mountain View, CA 94043, 1-888-536-4801.

Please do not reply to this message as we are unable to respond to questions at this e-mail address.

#### CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 3 CANDIDATE/ MS / MRS / MR MI OFFICE USE ONLY **OFFICEHOLDER** MR **CESARIO** R NAME Date Received NICKNAME LAST SUFFIX RECEIVED CESAR **URIAS** 4 CANDIDATE/ ADDRESS / PO BOX; APT / SUITE #; CITY: STATE ZIP CODE **OFFICEHOLDER** 1832 ADAMS ST. PECOS TX 79772 MAILING **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (432 448-2414 PHONE Receipt # Amount \$ 6 CAMPAIGN MS / MRS / MR FIRST MI **TREASURER MRS** DANYA Date Processed NAME NICKNAME LAST SUFFIX Date Imaged BARRA7A STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: 7 CAMPAIGN CITY; STATE; ZIP CODE TREASURER 2118 WYOMING ST. PECOS TX 79772 **ADDRESS** (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** PHONE (432 287-4592 9 REPORT TYPE 30th day before election January 15 Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 **Exceeded Modified** 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Day Year Year COVERED 1 23 12 31 / 23 THROUGH 11 ELECTION **ELECTION DATE ELECTION TYPE** Primary Runoff Other Month Day Van Description . General Special 11 / 5 24 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) CONSTABLE PCT 4 14 NOTICE FROM 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. CANDIDATE'S AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. **POLITICAL**

Forms provided by Texas Ethics Commiss	ion

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

N/A

COMMITTEE(S)

Additional Pages

**GO TO PAGE 2** 

## **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

#### FORM C/OH COVER SHEET PG 2

		<u> </u>
15 C/OH NAME		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)	\$
	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 750.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
्रास्त्री स्थापक स्थाप विकास	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	T DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$
18 SIGNATURE 1 s	wear, or affirm, under penalty of perjury, that the accompanying report is true	and correct and includes all information
	quired to be reported by me under Title 15, Election Code.	and confect and includes an information
	/ 17	ሻ
		/
	Signature of Car	ndidate or Officeholder
		•
	<b></b>	
	Please complete either option below	•
		•
•	LAURA P PALACIOS	f .
	NOTARY PUBLIC	
	STATE OF TEXAS	i
(1) Affidavit	MY COMM. EXP. 07/06/26	1
	NOTARY ID 13180811-8	
		R .
NOTARY STAMP/SEA	-	
	Corrie Con ( 1)	in to
Swom to and subscribed	before me by USUND USUN VNUO this the	day of Much
20 25 to certify	which, witness my hand and seal of office.	12 day of January
		la la ana
Anu You	au Lanaran	· Motury
dignature of officer administe	ring eath Printed name of officer administering oath	Title of officer ad nistering oath
	OR	
(2) Unsworn Declaration		
(2) Gristiani Decidium	<b>711</b>	
Marana ta		
my name is	, and my date of birth is _	<del></del>
My address is		
	(street) (city) (st	ate) (zip code) (country)
Executed in		20
		, 20 (year)
	Signature of Candida	ate/Officeholder (Declarant)

### SUBTOTALS - C/OH

### FORM C/OH COVER SHEET PG 3

	FILER NAME   20 Filer ID (Ethics Con	mmission Filers)	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1.	SCHEDULEA1: MONETARY POLITICAL CONTRIBUTIONS	\$ 750.00	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	SCHEDULE E: LOANS	\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	SCHEDULE 1: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
12.	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		

### MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

If the reques	sted information is not applicable, <b>DO NOT</b> i	include this page in the	report.		
The	Instruction Guide explains how to complete th	nis form.	1 Total pages Schedule A1: 1		
2 FILER NAME CESARIO		·	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor out-of-state P	7 Amount of contribution (\$)			
12/11/2023	6 Contributor address; City; State; Zip Code 1108 Lavaca St. Austin TX 78701		750.00		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)		
Date	Full name of contributor out-of-state P.	PAC (ID#:)	Amount of contribution (\$)		
	Contributor address; City;	State; Zlp Code			
Principal occup	pation / Job title (See Instructions)	tions)			
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occup	pation / Job title (See Instructions)	tions)			
Date	Full name of contributor out-of-state P/	AC (ID#:)	Amount of contribution (\$)		
l	Contributor address; City;	State; Zip Code			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)					
	ATTACH ADDITIONAL COPIES If contributor is out-of-state PAC, please see Inst				

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 1/1/2024

INKIND Notice #ProjectRedTx 1108 Lavaca, St #110-610 Austin Texas, 78701

Has made an In-Kind contribution to the following campaign:

Cesario Urias Campaign 1832 Adams St Pecos TX 79772

In the Amount of:

\$750

For:

Filing Fee

Date:

12/11/2023

This should be reported on your January 15, 2024, TEC Report (Form C/OH) covering July 1, 2023 through December 31, 2023. The in-kind contribution should appear on schedule A1.