CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers):

2 Total pages filed:

OFFICE USE ONLY

Date Received

Date Filed 10/27/14

Date Hand-delivered or Postmarked

Rebecca Huerta
City Secretary

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: FIRST: Lucy; MI: NICKNAME: LAST: Rubio; SUFFIX:
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 1713 Citation Dr. Corpus Christi, Texas 78417
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (361) PHONE NUMBER: 774-0465 EXTENSION:
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: FIRST: Wayne; MI: NICKNAME: LAST: Lundquist; SUFFIX:
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 700 Everhart Rd., Suite 11 Corpus Christi, Texas 78414
8 CAMPAIGN TREASURER PHONE	AREA CODE: (361) PHONE NUMBER: 854-4448 EXTENSION:

9 REPORT TYPE

- ☐ January 15
- ☐ July 15
- ☐ 30th day before election
- ☒ 8th day before election
- ☐ Runoff
- ☐ Exceeded $500 limit
- ☐ 15th day after campaign treasurer appointment (officeholder only)
- ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 10 / 07 / 2014 THROUGH Month / Day / Year: 10 / 27 / 2014

11 ELECTION

ELECTION DATE Month / Day / Year: 11 / 04 / 2014

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE

OFFICE HELD (if any): CCISD Board Trustee, Dist. 2

13 OFFICE SOUGHT (if known): Corpus Christi City Council, Dist. 3

GO TO PAGE 2

INDEXED

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME	15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLICIAL 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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ Itemized
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 6,265.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ Itemized
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 3,540.26
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 14,116.21
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ Ø

18 AFFIDAVIT

MARY ANN PENA
Notary Public
STATE OF TEXAS
My Comm. Exp. 01-28-2018

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.

Lucy Rubio
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lucy Rubio, this the 27th day of October, 20 14, to certify which, witness my hand and seal of office.

Maryann Peña	Mary Ann Peña	Notary Public
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 10

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/09/14	Adriana Ortiz 102 Airport Rd. Corpus Christi, Texas 78405	800.00	

9 Principal occupation / Job title (See Instructions): 10 Employer (See Instructions):

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/09/14	David Torres 433 S. Tancahua St. Corpus Christi, Texas 78401	100.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/09/14	Brian Rosas 1033 Sorrell St. Corpus Christi, Texas 78404	40.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/10/14	Johnny Garcia 3917 Ayers St. Corpus Christi, Texas 78415	200.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Joe & Sara Trevino P.O. Box 851 Portland, Texas 78374	40.00	

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#_____) / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/13/14	Juan & Melissa Zapata 4629 Coventry Corpus Christi, Texas 78411	40.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Arnold & Debbie Zuniga 5901 Sabinal St. Corpus Christi, Texas 78417	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Eddie & Estella Gonzalez 6246 Strasbourg Dr. Corpus Christi, Texas 78414	80.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Joe Garza 327 S. 23rd. St. Ringsville, Texas 78363	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Yolanda & Sergio Casanova 453 Sheridan Dr. Corpus Christi, Texas 78412	100.00	

(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____) / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/13/14	Rick Martinez 5613 King Acres Dr. Corpus Christi, Texas	100.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Richard & Prissy Ramirez 8026 Etienne Corpus Christi, Texas 78414	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Henry & Maci Salinas 4425 Shaw St. Corpus Christi, Texas	80.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Val & Diana Sepulveda 4558 Silver Hollow Corpus Christi, Texas 78413	160.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Rosalinda Gonzales 3821 Prescott St. Corpus Christi, Texas 78416	20.00	

(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC ID#) / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/13/14	Gregg Reyes 24 Hedwig Circle Houston, Texas 77024	1,000.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Aracely Hinojosa 6225 Saratoga Blvd. Apt. 813 Corpus Christi, Texas 78414	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Adela Martin 3701 Rushing Blvd. Corpus Christi, Texas 78410	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/14	Eduard J. Parra 402 Peoples St. Suite 4B Corpus Christi, Texas	250.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/14/14	Moses & Elva Estrada 4805 FM 1889 Robstown, Texas 78380	40.00	$50.00 (Two bracelets) (for door prizes)

(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/15/14	Dennis W. Peterson 2925 Briarpark Dr. Fourth Floor Houston, Texas 77042	500.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/14	Rachel Cawales 1374 Sandpiper Dr. Corpus Christi, Texas 78412	80.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/14	Amador & Rosie Duran 3145 Crestwater Dr. Corpus Christi, Texas 78415	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/14	Nacho & Mary Alice Garcia 6109 Mahony Circle Corpus Christi, Texas 78413	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/14	Cynthia Villarreal 3642 San Blas Corpus Christi, Texas 78415	60.00	$100.00 (Door Prizes) (Jewelry)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/16/14	Richard & Rosie Ortiz 217 Dover Corpus Christi, Texas 78408	120.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/14	Olga & D. L. Bell 409 Miramar Place Corpus Christi, Texas 78411	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/14	Mando & Gloria Cortez 5705 Lynn Crest Corpus Christi, Texas 78413	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/14	Jesse & Jamie Rodela 7033 Winter Park Place Corpus Christi, Texas 78413	40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/14	Leonard & Mary Gonzales 4713 Willowick Dr. Corpus Christi, Texas 78413	80.00	

(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC ID#) / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/17/14	Manuel & Rose Mary Gonzalez 423 Clifford Corpus Christi, Texas 78404	40.00	$362.00 Brisket and Sausage for Event (If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Hector & Pat Rubio 818 Pyramid Dr. Corpus Christi, Texas 78412	100.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Elvira Falcon P.O. Box 71861 Corpus Christi, Texas 78467	25.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Jesse Gonzales 1745 Dawn Breeze Dr. Corpus Christi, Texas 78412	20.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Lupita Gonzalez 3130 Buddy Lawerence Corpus Christi, Texas 78408	20.00	(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Files)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/18/14	Rose Mary Gonzalez 3130 Buddy Lawrence Dr. Corpus Christi, Texas 78408		$ 50.00 (X-mas wreath door prize) (If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Filibeeto & Sylvia Garcia 4614 Greensboro Corpus Christi, Texas 78413	50.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Minga Flores 3617 Violet Corpus Christi, Texas 78410	160.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Eric Cantu 7425 Lugano Corpus Christi, Texas 78413	500.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Tony Elizondo 4533 Leon St. Corpus Christi, Texas 78416	50.00	(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC ID#) / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/18/14	Rick Martinez 5613 King Acres Corpus Christi, Texas 78414	60.00	

(If travel outside of Texas complete Schedule T)

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Horacio & Mary Alice Rubio 4664 FM 1889 Robstown, Texas 78380	40.00	

(If travel outside of Texas complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Larry & Annabelle Elizondo 7230 Yaupon Dr. Corpus Christi, Texas 78414	200.00	

(If travel outside of Texas complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/18/14	Theresa Williams 5942 Crooked Creek Dr. Corpus Christi, Texas 78414	100.00	

(If travel outside of Texas complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/14	Corpus Christi Police Officers Assoc. 3122 Leopard St. Corpus Christi, Texas 78408	250.00	

(If travel outside of Texas complete Schedule T)

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/24/14	R. Bryan Dulley, D.D.S. 6 Contributor address City State Zip Code 6421 Saratoga, Blvd. 101 Corpus Christi, Texas 78414	300.00	(If travel outside of Texas complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas complete Schedule T)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas complete Schedule T)

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 foradditional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
8	Lucy Rubio	

4 Date	5 Payee name
10/07/14	Chick-Fil-A

6 Amount ($)	7 Payee address; City; State; Zip Code
13.12	4741 S. Padre Island Dr. Corpus Christi, Texas 78411

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas complete Schedule T)
	Food	☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	Lucy Rubio	City Council, Dist. 3	CCISD Trustee, Dist. 2

Date	Payee name
10/07/14	Small Planet Delicatessen & Bakery

Amount ($)	Payee address; City; State; Zip Code
7.55	5625 Saratoga Blvd. Corpus Christi, Texas 78414

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas complete Schedule T)
	Food	☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	Lucy Rubio	City Council, Dist. 3	CCISD Trustee, Dist. 2

Date	Payee name
10/11/14	Hobby Lobby

Amount ($)	Payee address; City; State; Zip Code
82.94	5425 S. Padre Island Dr. Ste. 1 Corpus Christi, Texas 78411

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas complete Schedule T)
	Event	☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	Lucy Rubio	City Council, Dist. 3	CCISD Trustee, Dist. 2

Date	Payee name
10/13/14	American Legion

Amount ($)	Payee address; City; State; Zip Code
750.00	5323 Kostoryz Corpus Christi, Texas 78415

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas complete Schedule T)
	Event	☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	Lucy Rubio	City Council, Dist. 3	CCISD Trustee, Dist. 2

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date: 10/14/14

5 Payee name: The Home Depot

6 Amount ($): 6.29

7 Payee address: City: State: Zip Code
4038 South Port Ave.
Corpus Cheisti, Texas 78415

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Event

(b) Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/14/14

Payee name: Hobby Lobby

Amount ($): 10.81

Payee address: City: State: Zip Code
5425 S. Padre Island Dr., Ste. 1
Corpus Cheisti, Texas 78411

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/14/14

Payee name: The Home Depot

Amount ($): 4.07

Payee address: City: State: Zip Code
5041 S. Padre Island Drive
Corpus Cheisti, Texas 78411

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/16/14

Payee name: Sam's Club

Amount ($): 289.27

Payee address: City: State: Zip Code
4833 S. Padre Island Dr.
Corpus Cheisti, Texas 78411

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
	Lucy Rubio	

4 Date: 10/16/14	5 Payee name: Dollar Tree Stores, Inc. Store #3107
6 Amount (S): 7.58	7 Payee address: City: State: Zip Code: 1620 S. Padre Island Dr., Suite 400 Corpus Christi, Texas 78416
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event (b) Description (If travel outside of Texas complete Schedule T): ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Lucy Rubio; Office sought: City Council, Dist. 3; Office held: CCISD Trustee, Dist. 2

Date: 10/16/14	Payee name: Sam's Club
Amount (S): 30.83	Payee address: City: State: Zip Code: 4833 S. Padre Island Dr. Corpus Christi, Texas 78416
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Transportation - Gas Description (If travel outside of Texas complete Schedule T): ☐ Check if Austin, TX officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Lucy Rubio; Office sought: City Council, Dist. 3; Office held: CCISD Trustee, Dist. 2

Date: 10/17/14	Payee name: Party City
Amount (S): 87.82	Payee address: City: State: Zip Code: 5425 South Padre Island Dr. Corpus Christi, Texas 78411
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Description (If travel outside of Texas complete Schedule T): ☐ Check if Austin, TX officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Lucy Rubio; Office sought: City Council, Dist. 3; Office held: CCISD Trustee, Dist. 2

Date: 10/17/14	Payee name: Hobby Lobby
Amount (S): 116.13	Payee address: City: State: Zip Code: 5425 S. Padre Island Dr. Ste. 1 Corpus Christi, Texas 78411
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Description (If travel outside of Texas complete Schedule T): ☐ Check if Austin, TX officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Lucy Rubio; Office sought: City Council, Dist. 3; Office held: CCISD Trustee, Dist. 2

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 10/17/14

5 Payee name: Dollar Tree Stores, Inc. Store #M36

6 Amount ($): 7.58

7 Payee address; City; State; Zip Code: 1340 Airline Rd. Corpus Christi, Texas 78412

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Event

(b) Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/18/14

Payee name: Hobby Lobby

Amount ($): 19.47

Payee address; City; State; Zip Code: 5425 S. Padre Island Dr., Ste. 1 Corpus Christi, Texas 78411

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/18/14

Payee name: Domingo Narvarez

Amount ($): 50.00

Payee address; City; State; Zip Code: 4446 Barrera Corpus Christi, Texas 78416

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/18/14

Payee name: Chriselda Cisneros

Amount ($): 70.00

Payee address; City; State; Zip Code: 525 Dixon Corpus Christi, Texas 78415

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 10/18/14

5 Payee name: HEB

6 Amount ($): 66.70

7 Payee address: 5801 Weber Rd. Corpus Christi, Texas 78413

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Event

(b) Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/18/14

Payee name: Sam's Club

Amount ($): 101.36

Payee address: 4833 S. Padre Island Dr. Corpus Christi, Texas 78411

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/18/14

Payee name: Walmart

Amount ($): 2.04

Payee address: 1821 S. Padre Island Dr. Corpus Christi, Texas 78416

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

Date: 10/18/14

Payee name: Millers BarBQ #3

Amount ($): 45.74

Payee address: 6601 Weber Rd. Corpus Christi, Texas 78413

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee, Dist. 2

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 10/18/14

5 Payee name: Raul Gonzalez - Motif Band

6 Amount ($): 650.00

7 Payee address: City: State: Zip Code: 4433 Sutton Lane, Corpus Christi, Texas 78411

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Event

(b) Description (If travel outside of Texas complete Schedule T): ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Lucy Rubio; Office sought: City Council, Dist. 3; Office held: CCISD Trustee, Dist. 2

Date: 10/20/14

Payee name: Hi-Ho Restaurant

Amount ($): 17.32

Payee address: City: State: Zip Code: 3730 Morgan Ave., Corpus Christi, Texas 78405

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food

Description (If travel outside of Texas complete Schedule T): ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Lucy Rubio; Office sought: City Council, Dist. 3; Office held: CCISD Trustee Dist. 2

Date: 10/20/14

Payee name: Sam's Club

Amount ($): 29.85

Payee address: City: State: Zip Code: 4833 S. Padre Island Dr., Corpus Christi, Texas 78416

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Transportation - Gas

Description (If travel outside of Texas complete Schedule T): ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Lucy Rubio; Office sought: City Council, Dist. 3; Office held: CCISD Trustee, Dist. 2

Date: 10/22/14

Payee name: iHeart Media

Amount ($): 996.00

Payee address: City: State: Zip Code: 501 Tupper Lane, Corpus Christi, Texas 78417

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas complete Schedule T): ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Lucy Rubio; Office sought: City Council, Dist. 3; Office held: CCISD Trustee, Dist. 2

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME: Lucy Rubio

3 ACCOUNT # (Ethics Commission Filers)

4 Date: 10/22/14

5 Payee name: Pete's Chicken-N-More

6 Amount (S): 10.46

7 Payee address: 5401 Kostoryz, Corpus Christi, Texas 78415

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Food

(b) Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: CC City Council, Dist. 3

Office held: CCISD Trustee, Dist 2

Date: 10/23/14

Payee name: Acapulco

Amount (S): 26.80

Payee address: 6517 Weber Rd., Corpus Christi, Texas 78413

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee Dist 2

Date: 10/24/14

Payee name: Sam's Club

Amount (S): 24.93

Payee address: 4833 S. Padre Island Dr., Corpus Christi, Texas 78416

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Transportation - Gas

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee Dist. 2

Date: 10/24/14

Payee name: Popeye's Store # 03494

Amount (S): 8.64

Payee address: 5009 Greenwood, Corpus Christi, Texas 78416

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food

Description (If travel outside of Texas complete Schedule T)

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: Lucy Rubio

Office sought: City Council, Dist. 3

Office held: CCISD Trustee Dist. 2

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
	Lucy Rubio	

4 Date	5 Payee name
10/25/14	HEB #4

6 Amount ($)	7 Payee address: City: State: Zip Code
6.96	5313 Saratoga Corpus Christi, Texas 78413

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas complete Schedule T)
	Office Overhead - Supplies	☐ Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	Lucy Rubio	City Council, Dist. 3	CCISD Trustee Dist. 2

Date	Payee name
Amount ($)	Payee address: City: State: Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas complete Schedule T)
		☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
Amount ($)	Payee address: City: State: Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas complete Schedule T)
		☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
Amount ($)	Payee address: City: State: Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas complete Schedule T)
		☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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