**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

<table>
<thead>
<tr>
<th>3 CANDIDATE / OFFICEHOLDER NAME</th>
<th>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mo / MRS / MR</td>
<td>Address / PO BOX: APT / SUITE #: CITY; STATE; ZIP CODE</td>
</tr>
<tr>
<td>Pauline</td>
<td>2340 Douglas Ave. Dallas, Texas 75219</td>
</tr>
<tr>
<td>Medrano</td>
<td>Change of Address</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5 CANDIDATE / OFFICE-HOLDER PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>AREA CODE PHONE NUMBER</td>
</tr>
<tr>
<td>(214) 923-2781</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>6 CAMPAIGN TREASURER NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>MS / MRS / MR FIRST MI</td>
</tr>
<tr>
<td>Anna</td>
</tr>
<tr>
<td>NICKNAME LAST SUFFIX</td>
</tr>
<tr>
<td>Niall</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7 CAMPAIGN TREASURER ADDRESS (Residence or Business)</th>
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<tbody>
<tr>
<td>STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY; STATE; ZIP CODE</td>
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<tr>
<td>4819 Silver Ave. Dallas, Texas 75223</td>
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</table>

<table>
<thead>
<tr>
<th>8 CAMPAIGN TREASURER PHONE</th>
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<tbody>
<tr>
<td>AREA CODE PHONE NUMBER</td>
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<tr>
<td>(214) 823-5576</td>
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<table>
<thead>
<tr>
<th>9 REPORT TYPE</th>
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<tbody>
<tr>
<td>x January 15</td>
</tr>
<tr>
<td>30th day before election</td>
</tr>
<tr>
<td>Runoff</td>
</tr>
<tr>
<td>15th day after campaign treasurer appointment (Officeholder Only)</td>
</tr>
<tr>
<td>July 15</td>
</tr>
<tr>
<td>8th day before election</td>
</tr>
<tr>
<td>Exceeded $500 limit</td>
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<tr>
<td>Final Report (Attach C/OH - FR)</td>
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<table>
<thead>
<tr>
<th>10 PERIOD COVERED</th>
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<tbody>
<tr>
<td>Month Day Year</td>
</tr>
<tr>
<td>7 / 1 / 2017</td>
</tr>
<tr>
<td>Through</td>
</tr>
<tr>
<td>Month Day Year</td>
</tr>
<tr>
<td>12 / 31 / 2017</td>
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</table>

<table>
<thead>
<tr>
<th>11 ELECTION</th>
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<tbody>
<tr>
<td>ELECTION DATE</td>
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<tr>
<td>Month Day Year</td>
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<tr>
<td>03 / 06 / 2018</td>
</tr>
<tr>
<td>ELECTION TYPE</td>
</tr>
<tr>
<td>x Primary</td>
</tr>
<tr>
<td>Runoff</td>
</tr>
<tr>
<td>Other Description</td>
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<tr>
<td>General</td>
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<tr>
<td>Special</td>
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<table>
<thead>
<tr>
<th>12 OFFICE</th>
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</thead>
<tbody>
<tr>
<td>OFFICE HELD (if any)</td>
</tr>
<tr>
<td>Dallas County Treasurer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>13 OFFICE SOUGHT (if known)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dallas County Treasurer</td>
</tr>
</tbody>
</table>

**GO TO PAGE 2**
**Candidate / Officeholder Campaign Finance Report**

### C/OH Name
Pauline Medrano

### Notice from Political Committee(s)
- **Committee Type**: [ ] General, [ ] Specific
- **Committee Name**:
- **Committee Address**:
- **Committee Campaign Treasurer Name**:
- **Committee Campaign Treasurer Address**:

### Contribution Totals
1. **Total Political Contributions of $50 or Less (Other Than Pledges, Loans, or Guarantees of Loans), Unless Itemized**: $ 0
2. **Total Political Contributions (Other Than Pledges, Loans, or Guarantees of Loans)**: $ 100.00
3. **Total Political Expenditures of $100 or Less, Unless Itemized**: $ 0
4. **Total Political Expenditures**: $ 0
5. **Total Political Contributions Maintained as of the Last Day of Reporting Period**: $ 1,375.45
6. **Total Principal Amount of All Outstanding Loans as of the Last Day of the Reporting Period**: $ 0

### Affidavit

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.

Signature of Candidate or Officeholder: 

Affix Notary Stamp / Seal Above:

Sworn to and subscribed before me, by the said Pauline Medrano, this the 5th day of January, 2018, to certify which, witness my hand and seal of office.

Signature of officer administering oath: Callie Bartlett
Printed name of officer administering oath: Callie Bartlett
Title of officer administering oath: Chief Cadre

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9/8/2015
<table>
<thead>
<tr>
<th>Schedule</th>
<th>Description</th>
<th>Subtotal Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS</td>
<td>$100.00</td>
</tr>
<tr>
<td>2.</td>
<td>SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>3.</td>
<td>SCHEDULE B: PLEDGED CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>4.</td>
<td>SCHEDULE E: LOANS</td>
<td>$0.00</td>
</tr>
<tr>
<td>5.</td>
<td>SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>6.</td>
<td>SCHEDULE F2: UNPAID INCURRED OBLIGATIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>7.</td>
<td>SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS</td>
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</tr>
<tr>
<td>8.</td>
<td>SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD</td>
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</tr>
<tr>
<td>9.</td>
<td>SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS</td>
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</tr>
<tr>
<td>10.</td>
<td>SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/Oh</td>
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</tr>
<tr>
<td>11.</td>
<td>SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>12.</td>
<td>SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER</td>
<td>$0.00</td>
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</tbody>
</table>
### MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

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<tr>
<th><strong>FILER NAME</strong></th>
<th>2</th>
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</thead>
<tbody>
<tr>
<td>Pauline Medrano</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Date</strong></th>
<th><strong>Full name of contributor</strong></th>
<th><strong>Amount of contribution ($)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>9/30/2017</td>
<td>Jim Jorden Campaign</td>
<td>$100.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Contributor address;</strong></th>
<th><strong>City; State; Zip Code</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>P.O. Box 132737</td>
<td>DLS, TX 75313</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Principal occupation / Job title (See Instructions)</strong></th>
<th><strong>Employer (See Instructions)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Judge (Civil Dist)</td>
<td>Dallas County</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Date</strong></th>
<th><strong>Full name of contributor</strong></th>
<th><strong>Amount of contribution ($)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

---

**Forms provided by Texas Ethics Commission**

www.ethics.state.tx.us

Revised 9/8/2015
# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form.

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<th>2 FILER NAME</th>
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<tr>
<td>Pauline Medrano</td>
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</table>

<table>
<thead>
<tr>
<th>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5 Date</th>
<th>6 Full name of contributor</th>
<th>7 Contributor address; City: State; Zip Code</th>
<th>8 Amount of Contribution</th>
<th>9 In-kind contribution description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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</table>

Check if travel outside of Texas. Complete Schedule T.

<table>
<thead>
<tr>
<th>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</th>
<th>11 Employer (FOR NON-JUDICIAL) (See Instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>12 Contributor's principal occupation (FOR JUDICIAL)</th>
</tr>
</thead>
<tbody>
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<td></td>
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</table>

<table>
<thead>
<tr>
<th>13 Contributor's job title (FOR JUDICIAL) (See Instructions)</th>
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<tbody>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>14 Contributor's employer/law firm (FOR JUDICIAL)</th>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</th>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</th>
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</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Full name of contributor</th>
<th>out-of-state PAC (ID: )</th>
<th>Contributor address; City: State; Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Check if travel outside of Texas. Complete Schedule T.

<table>
<thead>
<tr>
<th>Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</th>
<th>Employer (FOR NON-JUDICIAL) (See Instructions)</th>
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<tbody>
<tr>
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</table>

<table>
<thead>
<tr>
<th>Contributor's principal occupation (FOR JUDICIAL)</th>
</tr>
</thead>
<tbody>
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<td></td>
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</table>

<table>
<thead>
<tr>
<th>Contributor's job title (FOR JUDICIAL) (See Instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Contributor's employer/law firm (FOR JUDICIAL)</th>
</tr>
</thead>
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<td></td>
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<thead>
<tr>
<th>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</th>
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<thead>
<tr>
<th>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</th>
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<tbody>
<tr>
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.
## PLEDGED CONTRIBUTIONS

### SCHEDULE B

<table>
<thead>
<tr>
<th>The Instruction Guide explains how to complete this form.</th>
<th>1 Total pages Schedule B:</th>
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<table>
<thead>
<tr>
<th>2 FILER NAME</th>
<th>Paudine Medrano</th>
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<table>
<thead>
<tr>
<th>4 TOTAL OF UNITEMIZED PLEDGES</th>
<th>$</th>
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</table>

<table>
<thead>
<tr>
<th>5 Date</th>
<th>6 Full name of pledgor</th>
<th>☐ out-of-state PAC (ID: ______)</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>7 Pledgor address;</td>
<td>City; State; Zip Code</td>
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</table>

<table>
<thead>
<tr>
<th>8 Amount of Pledge $</th>
<th>9 In-kind contribution description</th>
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</table>

☐ Check if travel outside of Texas. Complete Schedule T.

<table>
<thead>
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<th>10 Principal occupation / Job title (See Instructions)</th>
<th>11 Employer (See Instructions)</th>
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Date

<table>
<thead>
<tr>
<th>Full name of pledgor</th>
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<tr>
<td>Pledgor address;</td>
<td>City; State; Zip Code</td>
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Amount of Pledge $ In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

<table>
<thead>
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<th>Employer (See Instructions)</th>
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Date

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<th>☐ out-of-state PAC (ID: ______)</th>
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<tbody>
<tr>
<td>Pledgor address;</td>
<td>City; State; Zip Code</td>
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Amount of Pledge $ In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

<table>
<thead>
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<th>Employer (See Instructions)</th>
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</table>

Date

<table>
<thead>
<tr>
<th>Full name of pledgor</th>
<th>☐ out-of-state PAC (ID: ______)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pledgor address;</td>
<td>City; State; Zip Code</td>
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</table>

Amount of Pledge $ In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

<table>
<thead>
<tr>
<th>Principal occupation / Job title (See Instructions)</th>
<th>Employer (See Instructions)</th>
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Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9/8/2015
<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
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<tbody>
<tr>
<td>2</td>
<td>Filer Name</td>
</tr>
<tr>
<td>4</td>
<td>Total of Unitemized Loans</td>
</tr>
<tr>
<td>5</td>
<td>Date of Loan</td>
</tr>
<tr>
<td>6</td>
<td>Is lender a financial institution?</td>
</tr>
<tr>
<td>7</td>
<td>Name of lender</td>
</tr>
<tr>
<td>8</td>
<td>Lender address; City; State; Zip Code</td>
</tr>
<tr>
<td>9</td>
<td>Loan Amount ($)</td>
</tr>
<tr>
<td>10</td>
<td>Interest rate</td>
</tr>
<tr>
<td>11</td>
<td>Maturity date</td>
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<tr>
<td>12</td>
<td>Principal occupation / Job title (See Instructions)</td>
</tr>
<tr>
<td>13</td>
<td>Employer (See Instructions)</td>
</tr>
<tr>
<td>14</td>
<td>Description of Collateral</td>
</tr>
<tr>
<td>15</td>
<td>Check if personal funds were deposited into political account (See Instructions)</td>
</tr>
<tr>
<td>16</td>
<td>Guarantor Information</td>
</tr>
<tr>
<td>17</td>
<td>Name of guarantor</td>
</tr>
<tr>
<td>18</td>
<td>Guarantor address; City; State; Zip Code</td>
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<tr>
<td>19</td>
<td>Amount Guaranteed ($)</td>
</tr>
<tr>
<td>20</td>
<td>Principal Occupation (See Instructions)</td>
</tr>
<tr>
<td>21</td>
<td>Employer (See Instructions)</td>
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</tbody>
</table>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.
**POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- Advertising Expense
- Accounting/Banking
- Consulting Expense
- Contributions/Donations Made By
- Candidate/Officeholder/Political Committee
- Credit Card Payment
- Event Expense
- Fees
- Food/Snack Expense
- Gift/Award/Memorial Expense
- Legal Services
- Loan Repayment/Reimbursement
- Office Overhead/Travel Expense
- Solicitation/Fundraising Expense
- Transportation Equipment & Related Expense
- Travel in District
- Travel Out of District
- Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<table>
<thead>
<tr>
<th>1. Total pages Schedule F1</th>
<th>2. FILER NAME</th>
<th>3. Filer ID (Ethics Commission Filer)</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Pauline Medrano</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Date</th>
<th>5. Payee name</th>
<th>6. Amount ($)</th>
<th>7. Payee address; City; State; Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. PURPOSE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Category (See Categories listed at the top of this schedule)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. Complete ONLY if direct expenditure to benefit C/O/H</th>
</tr>
</thead>
<tbody>
<tr>
<td>Candidate / Officeholder name</td>
</tr>
<tr>
<td>Date</td>
</tr>
<tr>
<td>------</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

Forms provided by Texas Ethics Commission
www.ethics.state.tx.us
Revised 9/8/2015
## UNPAID INCURRED OBLIGATIONS

### Schedule F2

#### Expenditure Categories for Box 10(a)
- Advertising Expense
- Accounting/Banking
- Consulting Expense
- Contributions/Donations Made By Candidate/Officeholder/Political Committee
- Event Expense
- Fees
- Food/Beverage Expense
- Gift/Awards/Memorials Expense
- Legal Services
- Loan Repayment/Reimbursement
- Office Overhead/Reental Expense
- Polling Expense
- Printing Expense
- Salaries/Wages/Contract Labor
- Solicitation/Fundraising Expense
- Transportation Equipment & Related Expense
- Travel In District
- Travel Out Of District
- Other (Enter a category not listed above)

The Instruction Guide explains how to complete this form.

<table>
<thead>
<tr>
<th>1 Total pages Schedule F2:</th>
<th>2 FILER NAME</th>
<th>3 Filer ID (Ethics Commission Filers)</th>
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<td>Pauline Medrano</td>
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<table>
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<th>4 TOTAL OF UNITIMIZED UNPAID INCURRED OBLIGATIONS</th>
<th>$</th>
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</table>

<table>
<thead>
<tr>
<th>5 Date</th>
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</table>

<table>
<thead>
<tr>
<th>6 Payee name</th>
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</table>

<table>
<thead>
<tr>
<th>7 Amount ($)</th>
<th>8 Payee address; City; State; Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>9 TYPE OF EXPENDITURE</th>
<th>10 PURPOSE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Political</td>
<td>(a) Category (See Categories listed at the top of this schedule)</td>
</tr>
<tr>
<td>Non-Political</td>
<td>(b) Description</td>
</tr>
<tr>
<td></td>
<td>Check if travel outside of Texas. Complete Schedule T.</td>
</tr>
<tr>
<td></td>
<td>Check if Austin, TX, officeholder living expense</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11 Complete ONLY if direct expenditure to benefit C/OH</th>
<th>Candidate / Officeholder name</th>
<th>Office sought</th>
<th>Office held</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Payee name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Amount ($)</th>
<th>Payee address; City; State; Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TYPE OF EXPENDITURE</th>
<th>PURPOSE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(a) Category (See Categories listed at the top of this schedule)</td>
</tr>
<tr>
<td></td>
<td>Description</td>
</tr>
<tr>
<td></td>
<td>Check if travel outside of Texas. Complete Schedule T.</td>
</tr>
<tr>
<td></td>
<td>Check if Austin, TX, officeholder living expense</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Complete ONLY if direct expenditure to benefit C/OH</th>
<th>Candidate / Officeholder name</th>
<th>Office sought</th>
<th>Office held</th>
</tr>
</thead>
</table>

### Attach Additional Copies of This Schedule as Needed

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9/8/2015
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td><strong>FILER NAME</strong></td>
</tr>
<tr>
<td>3</td>
<td><strong>Filer ID</strong> (Ethics Commission Filers)</td>
</tr>
<tr>
<td>4</td>
<td><strong>Date</strong></td>
</tr>
<tr>
<td>5</td>
<td>Name of person from whom investment is purchased</td>
</tr>
<tr>
<td>6</td>
<td>Address of person from whom investment is purchased;</td>
</tr>
<tr>
<td>7</td>
<td>Description of Investment</td>
</tr>
<tr>
<td>8</td>
<td>Amount of investment ($)</td>
</tr>
</tbody>
</table>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**
# EXPENDITURES MADE BY CREDIT CARD

**EXPENDITURE CATEGORIES FOR BOX 10(a)**
- Advertising/Marketing
- Accounting/Banking
- Consulting Expense
- Contributions/Donations Made By Candidate/Officeholder/Political Committee
- Event Expense
- Fees
- Food/Beverage Expense
- Gift/Incentive/Win Guest/Meal Expense
- Legal Services
- Loan Repayment/Reimbursement
- Office Overhead/Rental Expense
- Political Expense
- Printing Expense
- Salaries/Wages/Contract Labor
- Solicitation/Fundraising Expense
- Transportation Equipment & Related Expense
- Travel In District
- Travel Out Of District
- Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<table>
<thead>
<tr>
<th>1 Total pages Schedule F4:</th>
<th>2 FILER NAME</th>
<th>3 Filer ID (Ethics Commission Filers)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pauline Medrano</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5 Date</th>
<th>6 Payee name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>7 Amount ($)</th>
<th>8 Payee address;</th>
<th>City;</th>
<th>State;</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>9 TYPE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Political</td>
</tr>
<tr>
<td>□ Non-Political</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10 PURPOSE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Category (See Categories listed at the top of this schedule)</td>
</tr>
<tr>
<td>(b) Description</td>
</tr>
<tr>
<td>□ Check if travel outside of Texas. Complete Schedule T.</td>
</tr>
<tr>
<td>□ Check if Austin, TX, officeholder living expense</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11 Complete ONLY if direct expenditure to benefit C/OH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Candidate / Officeholder name</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Payee name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Amount ($)</th>
<th>Payee address;</th>
<th>City;</th>
<th>State;</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TYPE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Political</td>
</tr>
<tr>
<td>□ Non-Political</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PURPOSE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category (See Categories listed at the top of this schedule)</td>
</tr>
<tr>
<td>Description</td>
</tr>
<tr>
<td>□ Check if travel outside of Texas. Complete Schedule T.</td>
</tr>
<tr>
<td>□ Check if Austin, TX, officeholder living expense</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Complete ONLY if direct expenditure to benefit C/OH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Candidate / Officeholder name</td>
</tr>
</tbody>
</table>

---

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

---

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Revised 9/6/2015
POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS

EXPENDITURE CATEGORIES FOR BOX 8(a)

<table>
<thead>
<tr>
<th>Advertising Expense</th>
<th>Event Expense</th>
<th>Loan Repayment/Reimbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounting/Banking</td>
<td>Fees</td>
<td>Office Overhead/Rental Expense</td>
</tr>
<tr>
<td>Consulting Expense</td>
<td>Food/Beverage Expense</td>
<td>Polling Expense</td>
</tr>
<tr>
<td>Contributions/Donations Made By</td>
<td>Gifts/Awards/Memorials Expense</td>
<td>Printing Expense</td>
</tr>
<tr>
<td>Candidate/Officeholder/Political Committee</td>
<td>Legal Services</td>
<td>Salaries/Wages/Contract Labor</td>
</tr>
<tr>
<td>Credit Card Payment</td>
<td>Solicitation/Fundraising Expense</td>
<td>Transportation Equipment &amp; Related Expense</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Travel In District</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Travel Out Of District</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other (enter a category not listed above)</td>
</tr>
</tbody>
</table>

The Instruction Guide explains how to complete this form.

<table>
<thead>
<tr>
<th>1 Total: pages Schedule G</th>
<th>2 FILER NAME</th>
<th>3 Filer ID (Ethics Commission Filers)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Pauline Medrano</td>
<td></td>
</tr>
</tbody>
</table>

| 4 Date                      | 5 Payee name   |                                      |
|                            |               |                                      |

<table>
<thead>
<tr>
<th>6 Amount ($)</th>
<th>7 Payee address; City; State; Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8 PURPOSE OF EXPENDITURE</th>
<th>9 Complete ONLY if direct expenditure to benefit C/OH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Candidate / Officeholder name</td>
</tr>
<tr>
<td></td>
<td>Date</td>
</tr>
<tr>
<td></td>
<td>Amount ($)</td>
</tr>
<tr>
<td></td>
<td>Reimbursement from political contributions intended</td>
</tr>
<tr>
<td></td>
<td>Category (See Categories listed at the top of this schedule)</td>
</tr>
<tr>
<td></td>
<td>Description</td>
</tr>
<tr>
<td>Check if travel outside of Texas. Complete Schedule T.</td>
<td></td>
</tr>
<tr>
<td>Check if Austin, TX, officeholder living expense</td>
<td></td>
</tr>
</tbody>
</table>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<table>
<thead>
<tr>
<th>1 Total pages Schedule H:</th>
<th>2 FILER NAME</th>
<th>3 Filer ID (Ethics Commission Filers)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Pauline Medrano</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4 Date</th>
<th>5 Business name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>6 Amount ($)</th>
<th>7 Business address; City; State; Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>8</th>
<th>PURPOSE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Category</td>
<td>(b) Description</td>
</tr>
<tr>
<td></td>
<td>Check if travel outside of Texas. Complete Schedule T.</td>
</tr>
<tr>
<td></td>
<td>Check if Austin, TX, officeholder living expense</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9 Complete ONLY if direct expenditure to benefit C/OH</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Candidate / Officeholder name</th>
<th>Office sought</th>
<th>Office held</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Business name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Amount ($)</th>
<th>Business address; City; State; Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>PURPOSE OF EXPENDITURE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Check if travel outside of Texas. Complete Schedule T.</td>
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</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Business name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Amount ($)</th>
<th>Business address; City; State; Zip Code</th>
</tr>
</thead>
</table>

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<tr>
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<tr>
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<tbody>
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<thead>
<tr>
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</table>

<table>
<thead>
<tr>
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<th>Office sought</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Business name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Amount ($)</th>
<th>Business address; City; State; Zip Code</th>
</tr>
</thead>
</table>

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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Revised 9/8/2015
## Non-Political Expenditures Made from Political Contributions

The Instruction Guide explains how to complete this form.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total pages Schedule</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>FILER NAME</td>
<td>Pauline Medrano</td>
</tr>
<tr>
<td>3</td>
<td>Filer ID (Ethics Commission Filers)</td>
<td></td>
</tr>
</tbody>
</table>

### Date

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Date</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Payee name</td>
<td></td>
</tr>
</tbody>
</table>

### Amount ($)

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Amount ($)</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Payee address; City; State; Zip Code</td>
<td></td>
</tr>
</tbody>
</table>

### Purpose of Expenditure

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>(a) Category (See instructions for examples of acceptable categories.)</td>
<td>(b) Description (See instructions regarding type of information required.)</td>
</tr>
</tbody>
</table>

#### Purpose of Expenditure

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>Payee name</td>
<td></td>
</tr>
<tr>
<td>Amount ($)</td>
<td>Payee address; City; State; Zip Code</td>
<td></td>
</tr>
<tr>
<td>Category (See instructions for examples of acceptable categories.)</td>
<td>Description (See instructions regarding type of information required.)</td>
<td></td>
</tr>
</tbody>
</table>

#### Purpose of Expenditure

<table>
<thead>
<tr>
<th>Date</th>
<th>Payee name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount ($)</td>
<td>Payee address; City; State; Zip Code</td>
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<td>Description (See instructions regarding type of information required.)</td>
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</table>

#### Purpose of Expenditure

<table>
<thead>
<tr>
<th>Date</th>
<th>Payee name</th>
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<tbody>
<tr>
<td>Amount ($)</td>
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<td>Description (See instructions regarding type of information required.)</td>
</tr>
</tbody>
</table>

### Additional Copies

Attach additional copies of this schedule as needed.
<table>
<thead>
<tr>
<th>Date</th>
<th>Name of person from whom amount is received</th>
<th>Amount ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
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<tbody>
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<th>Amount ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

**Schedule T**

The Instruction Guide explains how to complete this form.

<table>
<thead>
<tr>
<th>1 Total pages Schedule T:</th>
<th>1</th>
</tr>
</thead>
</table>

### 2 FILER NAME

Pauline Medrano

### 3 Filer ID (Ethics Commission Filers)

### 4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

### 5 Contribution / Expenditure reported on:

- [ ] Schedule A2
- [ ] Schedule B
- [ ] Schedule B(J)
- [ ] Schedule C2
- [ ] Schedule D
- [ ] Schedule F1
- [ ] Schedule F2
- [ ] Schedule F4
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule COH-UC
- [ ] Schedule B-SS

### 6 Dates of travel

### 7 Name of person(s) traveling

### 8 Departure city or name of departure location

### 9 Destination city or name of destination location

### 10 Means of transportation

### 11 Purpose of travel (including name of conference, seminar, or other event)

---

**Attach additional copies of this schedule as needed**

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Revised 9/6/2015
**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" --

<table>
<thead>
<tr>
<th>1</th>
<th>C/OH NAME</th>
<th>Pauline Medrano</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Filer ID</td>
<td>(Ethics Commission Filers)</td>
</tr>
<tr>
<td>3</td>
<td>SIGNATURE</td>
<td>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.</td>
</tr>
</tbody>
</table>

---

**Signature of Candidate / Officeholder**

---

**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.
- [x] 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.
- [x] 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.

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**Signature of Candidate**

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**OFFICEHOLDER**

-- Complete this section only if you are an officeholder --

- [x] 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.

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**Signature of Officeholder**

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Forms provided by Texas Ethics Commission  www.ethics.state.tx.us  Revised 9/8/2015