

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1. Filing (Check one)

2. Total pages filed:

JAN 17 202

of n

- 23

1- -23

7-2

3. CANDIDATE /

MS / MRS / MR

FIRST

M

Date Received

NICKNAME

LAST

SUFFIX

Luebanos

Date Received

this the 17th day of

TYPE

☐ July 15

☐ Exceeded modified reporting
limit

Receipt #

CAND DATE / OFF CEHOLDER
CAMPA GN F NANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Anael R Luebanos

15 Filer ID (Ethics Commission Filers)

20 23, to certify which, witness my hand and seal of office.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Public Meeting/Contact Labor

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

The Instruction Guide explains how to complete this form.

2 FILER NAME
Angel P. Luebanos

4 Date
01/20/2022

5 Payee name
Kelly Hart & Hallman

6 Amount (\$)

7 Payee address:

City,

\$ 2,000.00

201 Main St

Fort Worth, Texas

76102

8

(b) Description

PURPOSE
OF
EXPENDITURE

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

☐ Check if Austin, TX, officeholder living expense.

Payee name

MACE

05/19/2022

Payee address:

www.maceonline.org

\$250.00

Description

PURPOSE
OF
EXPENDITURE

Scholarship Fundraising event

1 Total pages: Schedule F1

3 Filer ID (Ethics Commission Filers)

State:

Zip Code

(a) Category (See Categories listed at the top of this schedule)

EXPENDITURE

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CAND DATE / OFF CEHOLDER CAMPA GN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

1 Filer ID (Ethics Commission Filers) 2 Total pages filed:

Instructions: Read the Instructions Guide explaining how to complete this form.

DECLARATION

OFFICEHOLDER
NAME

Mr.

Anael

Date Received

NICKNAME

LAST

SUFFIX

Luebanos

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

3321 Ryan Ave

Fort Worth

TX

76110

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

Date Postmarked

(682) 597-6261

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Receipt #

Mrs.

Judy

Date Processed

NICKNAME

LAST

SUFFIX

Date Imaged

STREET ADDRESS (NO PO BOX PLEASE):

APT / SUITE #:

CITY:

STATE:

ZIP CODE

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Anael R Luebanos

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

[Redacted area]

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)

\$

3,150.00

EXPENDITURE
TOTALS

3 TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$

4. TOTAL POLITICAL EXPENDITURES

\$

3,738.34

CONTRIBUTION
BALANCE

5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$

56,370.45

OUTSTANDING

23 I, Anael R Luebanos, declare under penalty of perjury that the foregoing is true and correct. I declare under penalty of perjury that the foregoing is true and correct.

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1 ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,150.00
2 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3 SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4 SCHEDULE E: LOANS	\$
☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,738.34
☐ 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 I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

Anael R Luebanos

☐ out-of-state PAC (ID#:		7 Amount of contribution (\$)
12/15/2022	Edwin Hinojosa	\$500.00
	City:	
	Fort Worth, TX 76105	
	9 Employer (See Instructions)	

☐ out-of-state PAC		
12/15/2022	Nellie Villalpando	\$500.00
	City:	
	Fort Worth, TX 76105	
	9 Employer (See Instructions)	

☐ out-of-state PAC (ID#:		
12/21/2022	Fort Worth, TX 76105	\$2,000.00

8 Principal occupation / Job title (See Instructions)	
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Date	Linebarger Goggan Blair & Sampson	Amount of contribution (\$)
	Contributor address;	
	City;	

Employer (See Instructions)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

12/28/2022	Full name of contributor	\$150.00
	Victor Manuel Esparza	
	Contributor address;	
	City;	
	State; Zip Code	
	Fort Worth, TX 76115	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense

1 Total pages Schedule F1 2 FILER NAME 3 Filer ID (Ethics Commission Filers)

Anael R. Luebanos

4 Date
08/06/2022

5 Payee name
Bags in Bulk

6 Amount (\$)

\$250.00

7 Payee address;

City;

State;

Zip Code

(a) Category (See Categories listed at the top of this schedule)

(b) Description

Event Expense

9 Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Taco Cabana

Amount (\$)

\$56.36

Payee address;

www.tacocabana.com

City;

State;

Zip Code

(c) Category (See Categories listed at the top of this schedule)

Food/Beverage Expense

10 Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Elizabeth Beck

B

on
for teachers at various schools.

PURPOSE
OF
EXPENDITURE
\$100.00

City;

State

Zip Code

Category (See Categories listed at the top of this schedule)

Description

Contribution

11 Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Payee address;

www.elizabethbeckfortworth.com

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

4 Date: **09/25/2022** 5 Payee name: **Go Daddy**

6 Amount (\$): **\$ 199.98** 7 Payee address: **www.godaddy.com** City:

8 (b) Description: **Website**

[Redacted]

OF
EXPENDITURE

Check if travel outside of Texas Complete Schedule T

Check if Austin, TX, officeholder living expense

(c) Consulting Expense Food/Beverage Expense Polling Expense Travel In District
Contributions/Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out Of District

Payee name: **MACE**

Payee address: **www.maceonline.org**

11/28/2022

\$250.00

Description

Sponsorship - Golf Tournament

PURPOSE
OF
EXPENDITURE

Check if travel outside of Texas Complete Schedule T

Check if Austin, TX, officeholder living expense

Payee name: **Print Place**

Amount (\$): **\$1,982.00**

11/15/2022

Category (See Categories listed at the top of this schedule)

Description

Credit Card Payment

PURPOSE OF EXPENDITURE: **Printing Expense**

Office sought: **[Redacted]**