

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

APR 19 4:56 PM

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS (MR)	FIRST	MI
	NICKNAME	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 02 / 14 / 19 THROUGH 03 / 25 / 19		
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
		EPISD School Trustee D#6	

GO TO PAGE 2

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Fareed Freddy Klayel Avilas

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1480. ⁰⁰
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 2250. ⁰⁰
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 760. ⁰⁰
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

APR 4 '13 4:15PM

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Fareed Freddy Klayel Ovalos

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

☐ SPECIFIC

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

\$

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 1480.⁰⁰

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 760.⁰⁰

CONTRIBUTION
BALANCE

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

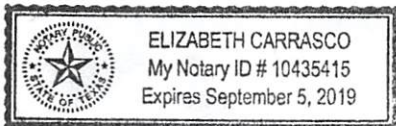
\$ 3,200.⁰⁰

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 2,250.⁰⁰

18 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]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Fareed Issa Klayel, this the 4th
day of April, 20 19, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Elizabeth Carrasco
Printed name of officer administering oath

Notary
Title of officer administering oath

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME Fareed Freddy Klavet Avalos

3 Filer ID (Ethics Commission Filers)

4 Date
March 145 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Osama F. Azzam

7 Amount of contribution (\$)

\$200.⁰⁰

6 Contributor address; City; State; Zip Code

5670 Conchetti Dr. El Paso TX 79912

8 Principal occupation / Job title (See Instructions)

Self-Employed

9 Employer (See Instructions)

Date
March 14Full name of contributor ☐ out-of-state PAC (ID#: _____)

Tom Higgins

Amount of contribution (\$)

\$25.⁰⁰

Contributor address; City; State; Zip Code

240 Desert Pass 303, El Paso TX 79912

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date
March 14Full name of contributor ☐ out-of-state PAC (ID#: _____)

Juana Teixeira

Amount of contribution (\$)

\$50.⁰⁰

Contributor address; City; State; Zip Code

848 Via Descanso Ln. El Paso TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
March 14Full name of contributor ☐ out-of-state PAC (ID#: _____)

Ericka Salcido

Amount of contribution (\$)

\$500.⁰⁰

Contributor address; City; State; Zip Code

4012 Tierra Morena EPTX 79938

Principal occupation / Job title (See Instructions)

Manager

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Foreed Freddy Klaxel Avalas

3 Filer ID (Ethics Commission Filers)

4 Date

March 14

5 Full name of contributor

Juan Uribe

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

1333 Belvidere

City; State; Zip Code

EPTX 79912

8 Principal occupation / Job title (See Instructions)

Self Employed

9 Employer (See Instructions)

Date

Feb. 25

Full name of contributor

Adrian Porras

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.00

Contributor address;

7250 Brogan Dr. Suite A El Paso, TX 79915

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Self Employed

Employer (See Instructions)

Date

Feb 25

Full name of contributor

Kimberly Kot

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$45.00

Contributor address;

404 Glen Ivy Marietta, GA 30062

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Consultant

Employer (See Instructions)

Date

March 3

Full name of contributor

Payton Parker

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$20.00

Contributor address;

5937 E. University Blvd. 230, Dallas TX 75206

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Clerg

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Fareed Freddy Klayel Avalas

3 Filer ID (Ethics Commission Filers)

4 Date

Mar. 16

5 Full name of contributor

Eric Smith

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 50.00

6 Contributor address;

City; State; Zip Code

609 Espina Duke Pl. EPTX 79912

8 Principal occupation / Job title (See Instructions)

Self-Employed

9 Employer (See Instructions)

Date

Mar. 13

Full name of contributor

Kimberly Joshi

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 50.00

Contributor address;

City; State; Zip Code

1224 Calle Lago EPTX 79912

Principal occupation / Job title (See Instructions)

Self-Employed

Employer (See Instructions)

Date

Mar 23

Full name of contributor

Brenda Garcia-Ledesma

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 50.00

Contributor address;

City; State; Zip Code

6175 Franklin Dove EPTX 79912

Principal occupation / Job title (See Instructions)

Nurse

Employer (See Instructions)

Date

Mar 3

Full name of contributor

Ashley Gordon

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 20.00

Contributor address;

City; State; Zip Code

5118 Meadow Creek Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Self-Employed

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

APR 19 4:15 PM

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Fareed Freddy Klayel Avab		3 Filer ID (Ethics Commission Filers)
4 Date Mar 3	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Amanda Emmet 6 Contributor address; City; State; Zip Code 1646 Gimsberry Apt 4 Dallas, TX 75206	7 Amount of contribution (\$) \$ 20.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date March 4	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jason Semko Contributor address; City; State; Zip Code 724 Crestview Dr. EPTX 79912	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Web Developer		Employer (See Instructions) Hulu
Date Mar 6	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ricardo Soto Contributor address; City; State; Zip Code 7001 Westwind Dr. 105 EPTX 79912	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:**2** FILER NAME

Fareed Freddy Klayel Avalos

3 Filer ID (Ethics Commission Filers)**4** TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

2-21-19

7 Name of lender☐ out-of-state PAC (ID#:

Fareed Freddy Klayel Avalos

9 Loan Amount (\$)\$250.⁰⁰**6** Is lender a financial institution?Y ☒ N**8** Lender address;

City;

State;

Zip Code

6740 Desert Canyon EPTX 79912

10 Interest rate

-0-

11 Maturity date

-0-

12 Principal occupation / Job title (See Instructions)

Self Employed

13 Employer (See Instructions)**14** Description of Collateral☒ none**15** Check if personal funds were deposited into political account (See Instructions)☒**16** GUARANTOR INFORMATION**17** Name of guarantor**19** Amount Guaranteed (\$)**18** Guarantor address;

City;

State;

Zip Code

☐ not applicable**20** Principal Occupation (See Instructions)**21** Employer (See Instructions)

Date of loan

2-22-19

Name of lender

☐ out-of-state PAC (ID#:

Fareed Freddy Klayel Avalos

Loan Amount (\$)

\$2,000

Is lender a financial institution?

Y ☒ N

Lender address;

City;

State;

Zip Code

6740 Desert Canyon EPTX 79912

Interest rate

-0-

Maturity date

-0-

Principal occupation / Job title (See Instructions)

Self Employed

Employer (See Instructions)

Description of Collateral

☒ none

Check if personal funds were deposited into political account (See Instructions)

☐

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address;

City;

State;

Zip Code

☐ not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

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/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental 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.

1 Total pages Schedule F1:	2 FILER NAME Fareed Freddy Klavel Qkhs	3 Filer ID (Ethics Commission Filers)
4 Date 3-3-19	5 Payee name Sun Circle Strategic Group	
6 Amount (\$) \$760.00	7 Payee address; City; State; Zip Code 1401 Montana, Suite H	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date Feb 25	Payee name Pay Pal	
Amount (\$) \$14.45	Payee address; City; State; Zip Code 2211 N. 1st St San Jose CA 95131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED