

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Joel	MI L.	OFFICE USE ONLY			
	"NICKNAME" "Leo"	LAST Arroyo	SUFFIX N/A				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; 3927 CR 128,		APT / SUITE #;	CITY; Floresville TX	STATE; TX	ZIP CODE 78114	Date Received: FILED For record in my office 14 day of <u>Jan</u> 20 <u>22</u> at <u>2:48</u> o'clock <u>P</u> M EVA S MARTINEZ County Clerk Wilson County Texas By <u>Eva S Martinez</u> Deputy Date Hand-delivered or Date Postmarked:
	AREA CODE (210)		PHONE NUMBER 633-4639	EXTENSION N/A	Receipt #	Amount \$	
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR Mr.	FIRST Eric	MI N/A				
	"NICKNAME" N/A	LAST Hutchinson	SUFFIX N/A				
6 CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE); 100 S. Jewels Drive,		APT / SUITE #;	CITY; La Vernia	STATE; TX	ZIP CODE 78121	
	AREA CODE (210)		PHONE NUMBER 912-6324	EXTENSION N/A			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	9 REPORT TYPE <input checked="" type="checkbox"/> January 15 <input 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 Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
	10 PERIOD COVERED Month Day Year THROUGH Month Day Year 08 / 24 / 2021 THROUGH 01 / 15 / 2022						
8 CAMPAIGN TREASURER PHONE	ELECTION DATE Month Day Year 03 / 01 / 22		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special				
	12 OFFICE OFFICE HELD (if any) N/A			13 OFFICE SOUGHT (if known) Justice of the Peace Pct. 1			
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME N/A					
		COMMITTEE ADDRESS N/A					
		COMMITTEE CAMPAIGN TREASURER NAME N/A					
		COMMITTEE CAMPAIGN TREASURER ADDRESS N/A					

GO TO PAGE 2

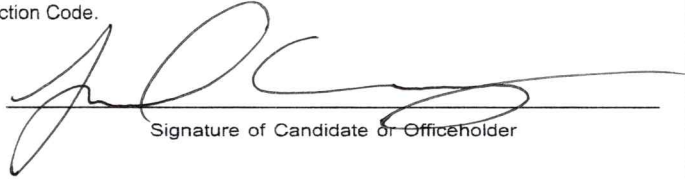
CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Joel Leonardo Arroyo 16 Filer ID (Ethics Commission Filers)

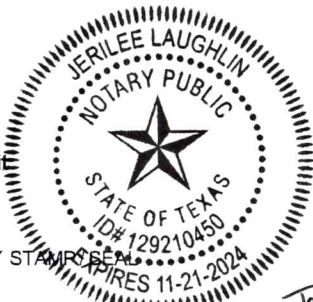
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 875.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 713.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 365.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 SIGNATURE 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

Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by Joel Leonardo Arroyo this the 14 day of January

2022, to certify which, witness my hand and seal of office.


Signature of officer administering oath

Jerilee Laughlin
Printed name of officer administering oath

Clerk
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Joel Leonardo Arroyo</i>	20 Filer ID (Ethics Commission Filers)
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21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>875.00</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>0.00</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>0.00</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>0.00</i>
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>510.00</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>0.00</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0.00</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>0.00</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>203.31</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>0.00</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0.00</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>0.00</i>

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Joel Leonardo Arayo</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/08/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>N/A</i>) <i>Joseph Flores</i>	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; City; State; Zip Code <i>5835 McDevitt Rd, San Antonio, TX, 78227</i>		
8 Principal occupation / Job title (See Instructions) <i>HVAC Technician / self employed</i>		9 Employer (See Instructions) <i>Self</i>
Date <i>10/ /21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>N/A</i>) <i>Rajan Ello</i>	Amount of contribution (\$) <i>200.00</i>
Contributor address; City; State; Zip Code <i>3429 Chacon Tr, Prosper TX 75078</i>		
Principal occupation / Job title (See Instructions) <i>Self employed</i>		Employer (See Instructions) <i>Self</i>
Date <i>10/10/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>N/A</i>) <i>Julian Miguel Arayo</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>114 Daffodil St, Oceanside CA 92058</i>		
Principal occupation / Job title (See Instructions) <i>Active Duty Military</i>		Employer (See Instructions) <i>USMC</i>
Date <i>01/13/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>N/A</i>) <i>Gene Nugent Jr</i>	Amount of contribution (\$) <i>25.00</i>
Contributor address; City; State; Zip Code <i>205 Southwood Oaks, Floresville TX 78114</i>		
Principal occupation / Job title (See Instructions) <i>EMT</i>		Employer (See Instructions) <i>Wilson County ESD #3</i>
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Joel Leonardo Arroyo

3 Filer ID (Ethics Commission Filers)

4 Date

09/07/21

5 Full name of contributor

Diana Alejandro

out-of-state PAC (ID#: N/A)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State;

Zip Code

819 Circle Ave Forest Park IL 60130

8 Principal occupation / Job title (See Instructions)

Social worker

9 Employer (See Instructions)

Self Employed - Diana LLC

Date

09/07/21

Full name of contributor

Renee Arroyo

out-of-state PAC (ID#: N/A)

Amount of contribution (\$)

\$200.00

Contributor address;

City;

State;

Zip Code

11526 Massive Mt Helotes TX 78023

Principal occupation / Job title (See Instructions)

Internet Technician

Employer (See Instructions)

Frost Bank

Date

09/10/21

Full name of contributor

Angelique Amabis Arroyo

out-of-state PAC (ID#: N/A)

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

11526 Massive Mt Helotes TX 78023

Principal occupation / Job title (See Instructions)

Cashier

Employer (See Instructions)

HEB

Date

09/16/21

Full name of contributor

Lennie Arroyo

out-of-state PAC (ID#: N/A)

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

11526 Massive Mt Helotes TX 78023

Principal occupation / Job title (See Instructions)

Retired USMC

Employer (See Instructions)

Retired USMC

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Joel Leonardo Arroyo	3 Filer ID (Ethics Commission Filers)
4 Date 12/29/21	5 Payee name Wilson County News	
6 Amount (\$) 65.00	7 Payee address; 1012 C ST	City; State; Zip Code Floresville TX 78114
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description NEWS PAPER AD
	(c) <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 Joel Leonardo Arroyo	Office sought Wilson County Justice of the Peace Pt. 1
Office held —		
Date 12/08/21	Payee name Ruby Manan	
Amount (\$) 380.00	Payee address; 856 Paddy Rd	City; State; Zip Code Floresville TX 78114
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description File Fee
	<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 Joel Leonardo Arroyo	Office sought Wilson County Justice of the Peace Pt. 1
Office held —		
Date 10/29/21	Payee name Wilson County News	
Amount (\$) 65.00	Payee address; 1012 C ST	City; State; Zip Code Floresville TX 78114
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description NEWS PAPER AD
	<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 Joel Leonardo Arroyo	Office sought Wilson County Justice of the Peace Pt. 1
Office held —		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME Joel Leonardo Arroyo		3 Filer ID (Ethics Commission Filers)		
4 Date 09/11/21	5 Payee name Joel Leonardo Arroyo				
6 Amount (\$) 4.99 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; 3927 CR128		City: Floresville	State: TX	Zip Code 78114
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other		(b) Description Office Supply		
	<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 Joel Leonardo Arroyo		Office sought Wilson County Justice of the Peace Pt.1	Office held —	
Date 08/31/21	Payee name Joel Leonardo Arroyo				
Amount (\$) 159.36 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; 3927 CR128		City: Floresville	State: TX	Zip Code 78114
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Yard Signs		
	<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 Joel Leonardo Arroyo		Office sought Wilson County Justice of the Peace Pt.1	Office held —	
Date 08/31/21	Payee name Joel Leonardo Arroyo				
Amount (\$) 38.96 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; 3927 CR128		City: Floresville	State: TX	Zip Code 78114
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Business Cards		
	<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 Joel Leonardo Arroyo		Office sought Wilson County Justice of the Peace Pt.1	Office held —	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED