

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 <u>MR</u> FIRST <u>PETER</u> MI <u>R</u> NICKNAME _____ LAST <u>ELIZONDO</u> SUFFIX <u>JR</u>	OFFICE USE ONLY Date Received <u>FILED</u> <u>11:25</u> o'clock <u>A</u> M Date <u>07/10/2026</u> <u>NORMA G. EDISON</u> Elections Administrator, Goliad County Texas By: <u>[Signature]</u> Deputy RECEIVED Receipt # <u>JUL 10 2026</u> Date Processed <u>By: New Email</u> Date Imaged _____										
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX: _____ APT / SUITE #: _____ CITY: <u>GOLIAD, TX</u> STATE: _____ ZIP CODE: _____ Change of Address: _____	5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE: _____ PHONE NUMBER: _____ EXTENSION: _____										
6 CAMPAIGN TREASURER NAME MS / MRS / MR <u>MRS</u> FIRST <u>MICHELLE</u> MI _____ NICKNAME _____ LAST <u>DVAL</u> SUFFIX _____	7 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE): _____ APT / SUITE #: _____ CITY: _____ STATE: _____ ZIP CODE: _____ (Residence or Business) <u>GOLIAD, TX 77963</u>										
8 CAMPAIGN TREASURER PHONE AREA CODE: _____ PHONE NUMBER: _____ EXTENSION: _____	9 REPORT TYPE ☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only) ☒ July 15 ☐ 8th day before election ☐ Extended Modified Reporting Limit ☒ Final Report (Attach C/OH - FR)										
10 PERIOD COVERED Month Day Year <u>12 / 01 / 2025</u> THROUGH <u>07 / 15 / 2026</u>	11 ELECTION ELECTION DATE: Month Day Year <u>12 / 01 / 2025</u> ELECTION TYPE: ☒ Primary ☐ Runoff ☐ Other Description ☐ General ☐ Special										
12 OFFICE OFFICE HELD (if any): <u>COUNTY TREASURER</u>	13 OFFICE SOUGHT (if known) <u>COUNTY TREASURER</u>										
14 NOTICE FROM POLITICAL COMMITTEE(S) 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. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;">☐ GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;">☐ SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			COMMITTEE TYPE	COMMITTEE NAME	☐ GENERAL	COMMITTEE ADDRESS	☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
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	COMMITTEE CAMPAIGN TREASURER ADDRESS										

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

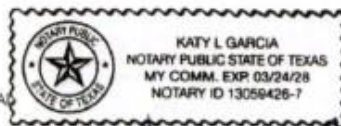
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0.00
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



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Katy L. Garcia this the 10th day of July, 2026, to certify which, witness my hand and seal of office.

Katy L. Garcia Katy L. Garcia
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Peter R. ELIZONDO JR, and my date of birth is 08/18/1973
My address is [REDACTED], GOLIAD TX 77963 USA
(street) (city) (state) (zip code) (country)
Executed in GOLIAD County, State of TX, on the 15th day of JULY, 2026
(month) (year)

Signature of Candidate/Officeholder (Declarant)

**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" --

1 C/OH NAME PETER R ELIZONDO JR	2 Filer ID (Ethics Commission Filers)
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3 SIGNATURE

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.



Signature of Candidate/Officeholder

4 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.

☐ 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.

☐ 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.

Signature of Candidate

5 OFFICEHOLDER

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

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.

RECEIVED

JUL 10 2026



Signature of Officeholder