APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed:

OFFICE USE ONLY

Filer ID #

Date Received

RECEIVED
VAL VERDE COUNTY CLERK
TERESA ZOTHER CHANDY
NOV 14 2025 AM11:41

Date Hand-delivered or Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

2 CANDIDATE NAME

MS / MRS / MR | FIRST | MI
Gustavo

NICKNAME | LAST | SUFFIX
Flores

3 CANDIDATE MAILING ADDRESS

ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; | ZIP CODE
TX

4 CANDIDATE PHONE

AREA CODE | PHONE NUMBER | EXTENSION
(830) 765-6168

5 OFFICE HELD (if any)
Co. Commissioner Pct. 4

6 OFFICE SOUGHT (if known)
Co. Commissioner Pct. 4

7 CAMPAIGN TREASURER NAME

MS/MRS/MR | FIRST | MI | NICKNAME | LAST | SUFFIX
Gustavo Flores

8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

STREET ADDRESS; | APT / SUITE #; | CITY; | STATE; | ZIP CODE

9 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION
(830) 765-6168

10 CANDIDATE SIGNATURE

I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.

I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.

I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.

Signature of Candidate

11-14-25
Date Signed

GO TO PAGE 2

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:

OFFICE USE ONLY

Date Received
FILED
UVALDE COUNTY CLERK
TERESA ESTHER CHAPOY
JAN 16 2026 PM12:29

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Gustavo | MI

NICKNAME | LAST: Flores | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 78840

☐ Change of Address

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (830) PHONE NUMBER: 765-6168 EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Gustavo | MI

NICKNAME | LAST: Flores | 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: (830) PHONE NUMBER: 765-6168 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
- ☐ Exceeded Modified Reporting Limit
- ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year: 01 / 15 / 2026 THROUGH Month Day Year: 07 / 15 / 2026

11 ELECTION

ELECTION DATE: Month / Day / Year

ELECTION TYPE:
- ☒ Primary
- ☐ Runoff
- ☐ Other Description
- ☐ General
- ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

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.

COMMITTEE TYPE
- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

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)	$ —
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ —
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 2,716.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 2,716.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ —
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ —

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

SYLVIA GONZALEZ
Notary ID #125239008
My Commission Expires
April 12, 2028

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Gustavo Flores this the 15th day of January, 20 26, to certify which, witness my hand and seal of office.

Sylvia Gonzalez — Signature of officer administering oath
Sylvia Gonzalez — Printed name of officer administering oath
Notary Public — 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 _____ (month), 20_____ (year).

_____
Signature of Candidate/Officeholder (Declarant)

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: 5 Pages

OFFICE USE ONLY

Date Received

RECEIVED
VERDE COUNTY CLERK
ESTHER CHANDOY
FEB 27 2026 AM11:10

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Gustavo | MI

NICKNAME | LAST: Flores | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

Del Rio, TX 78840

☐ Change of Address

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(830) 765-6168

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Gustavo | MI

NICKNAME | LAST: Flores | SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

Rio TX 78840

8 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(830) 765-6168

9 REPORT TYPE

☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)

☐ July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 1 / 15 / 2026 THROUGH 07 / 15 / 2026

11 ELECTION

ELECTION DATE: Month / Day / Year: 03 / 03 / 2026

ELECTION TYPE: ☒ Primary ☐ Runoff ☐ Other Description ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

14 NOTICE FROM POLITICAL COMMITTEE(S)

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☐ Additional Pages

COMMITTEE TYPE: ☐ GENERAL ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

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)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 5,325.84
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 5,325.84
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

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.

X _____

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

SYLVIA GONZALEZ
Notary ID #125239008
My Commission Expires
April 12, 2028

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Gustavo Flores this the 26 day of February 20 26, to certify which, witness my hand and seal of office.

Sylvia Gonzalez — Sylvia Gonzalez — Notary Public

Signature of officer administering oath | Printed name of officer administering oath | 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)

SKYLINE
EMBROIDERY LLC

043642

2044 Bedell Ave. • (830)774-4220 • Del Rio, Tx.

CUSTOMER'S ORDER NO.	DATE
	1-31-26

NAME Gustavo Flores Campaign

ADDRESS

CITY, STATE, ZIP

SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MDSE. RETD.	PAID OUT

	QUAN.	DESCRIPTION	PRICE	AMOUNT
1	35	Signs 4X8 sign	6.5	227.50
2	20	Yard Signs	15	300
3				
4				
5				
6				
7				
8				
9				
10				
11				052.00
12			TAX	21.43
				2982.43

SKYLINE EMBROIDERY
PAID
#9,282.43

RECEIVED BY

A-4705
T-46528

KEEP THIS SLIP FOR REFERENCE

01-11

INVOICE

3D Signs
7986 1st St
Somerset, TX 78069-4471

porosco3dsigns@gmail.com
+1 (210) 535-6987

Bill to
Gustavo flores

Invoice details
Invoice no.: 709
Terms: Due on receipt
Invoice date: 01/28/2026
Due date: 01/28/2026

#	Product or service	Description	Qty	Rate	Amount
1.	**4x8 coro prints**		40	$33.00	$1,320.00
2.	**4x4 coro**		20	$20.00	$400.00
3.	**18x24 yard signs**		40	$6.00	$240.00
4.	**Mailer**	Print	1	$334.95	$334.95
5.	**Setup fee**		1	$50.00	$50.00

Subtotal	$2,344.95
Sales tax	$193.46
Total	**$2,538.41**

Ways to pay

BANK

Note to customer

Thank you for your business.

View and pay

INTUIT quickbooks

Manage payment

You paid $1269.20

to **3D Signs** on 02/04/2026

Payment details

Invoice no.	709
Invoice amount	$2538.41
Total amount	**$1269.20**
Status	Paid
Payment method	Business checking ******7119
Authorization ID	119Y8KIU6X6G

Please don't reply to this email, if you need any help regarding this message, please contact the business directly.

Thank you,

3D Signs

2105356987

porosco3dsigns@gmail.com

7986 1st St, Somerset, TX, 78069-4471, USA

intuit quickbooks.

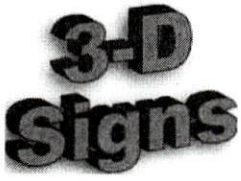
Payment receipt

You paid $1,269.21

to 3D Signs on 1/28/2026

Invoice no.	709
Invoice amount	$2,538.41
Total	**$1,269.21**
Outstanding balance	$1,269.20
Status	Partially paid
Payment method	Bank
Authorization ID	159Y6D9UYY1I

Thank you



3D Signs

2105356987

porosco3dsigns@gmail.com
7986 1st St, Somerset, TX 78069-4471

No additional transfer fees or taxes apply.

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: 11 Pages

OFFICE USE ONLY

Date Received

RECEIVED
[illegible] COUNTY CLERK
[illegible] ESTHER CHAVEZ
FEB 2[illegible] 2026 AM11:12

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: | FIRST: Gustavo | MI:

NICKNAME: | LAST: Flores | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX: [illegible] | APT / SUITE #: | CITY: [illegible] | STATE: | ZIP CODE: [illegible]

☐ Change of Address

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (830) | PHONE NUMBER: 765-6168 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: | FIRST: Gustavo | MI:

NICKNAME: | LAST: Flores | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): | APT / SUITE #: | CITY: | STATE: TX | ZIP CODE: 78840

8 CAMPAIGN TREASURER PHONE

AREA CODE: (830) | PHONE NUMBER: 765-6168 | 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 ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year: 01 / 15 / 2026 THROUGH Month Day Year: 07 / 15 / 2026

11 ELECTION

ELECTION DATE — Month / Day / Year: / /

ELECTION TYPE: ☒ Primary ☐ Runoff ☐ Other Description ☐ General ☐ Special

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OFFICE HELD (if any):

13 OFFICE SOUGHT (if known)

14 NOTICE FROM POLITICAL COMMITTEE(S)

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COMMITTEE TYPE: ☐ GENERAL ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

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)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 3,422.72
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 3,422.72
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

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

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SYLVIA GONZALEZ
Notary ID #125239008
My Commission Expires
April 12, 2028

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Gustavo Flores this the 26 day of February 20 26, to certify which, witness my hand and seal of office.

Sylvia Gonzalez — Sylvia Gonzalez - Notary Public

Signature of officer administering oath — Printed name of officer administering oath — 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 _____ (month), 20_____ (year).

_____
Signature of Candidate/Officeholder (Declarant)

SKYLINE EMBROIDERY
2044 N BEDELL AVE STE A
Del Rio TX 78840
830-774-4220

02/13/2026 17:43

Sale

Trans:6 Batch:118
MASTERCARD CHIP
**********0126 **/**

AMOUNT : $ 306.22

TOTAL: $ 306.22

Resp: APPROVAL 477149
Code: 477149
Ref#: 604417841975
App Name: US Debit
AID: A0000000042203
TVR: 8000048000
TSI: 6800

Cardholder acknowledges receipt of goods and obligations set forth by the cardholder's agreement with issuer.

CUSTOMER COPY
Thank You
Powered By ValorPay (V3.0.16)

2044 Bedell Ave.
Del Rio, Texas 78840
Phone (830) 774-4220

3 7203

INVOICE

ICES DUE ON RECEIPT

Texas Flags Campaign

STATE ZIP

RIPTION	AMOUNT
ebe print front & t front @12°	272.00

SKYLINE EMBROIDERY PAID

SUBTOTAL	272.00
SALES TAX	22.44
INVOICE TOTAL	294.44

Thank You!

4

COPIES TO GO
2400 VETERANS BLVD
DEL RIO , TX 78840
830-734-2991

Merchant ID: 270044647
Term ID: 0010

Sale

Application Label: Mastercard Debit
MASTERCARD
XXXXXXXXXXXX0126
AID: A0000000041010
Entry Method: Chip Read
Apprvd: Online Batch#: 000013
02/13/26 09:57:51

Inv#: 00000001 Appr Code: 231047

Total: USD$ 216.50

Mode: Issuer
TVR: 8000008000
IAD: 0110601001220000030000000000
0000000FF
TSI: 6800
ARC: 00
I agree to pay above total amount according to card issuer agreement. (Merchant agreement if credit voucher)

FLORES/GUSTAVO

Customer Copy

THANK YOU!

Copies To Go...

2107 Veterans Blvd. Suite 4
Del Rio, TX 78840
Phone: 830.775.1121
Fax: 830.775.2351
Email: copiestogo@wcsonline.net

RECEIPT

Invoice #: 1

ebruary 13, 2026

ustavo Flores

	Description	Unit Price	Total
500	B&W Copies	$ 0.40	$ 200.00
			$ -
			$ -
			$ -
		$ -	$ -
		$ -	$ -
		$ -	$ -
		$ -	$ -
		$ -	$ -
		$ -	$ -
		Sub Total	$ 200.00
		Tax	$ 16.50
		Total	$ 216.50

Thank you for your business.

REG 02-13-2026 16:55
000079

500

DEPT016	T12	$200.00
TA1		$200.00
TX1		$16.50
TL		$216.50
CREDIT		$216.50

Copies to Go...

2107 Veterans Blvd. Suite 4
Del Rio, TX 78840
Phone: 830.775.1121
Fax: 830.775.2351
Email: copiestogo@wcsonline.net

INVOICE

Invoice #: 1

Date of Invoice: **February 13, 2026**
Customer: **Gus Flores**
Address:

Requested By:
Phone Number:
Instructions:

Quantity	Description	Unit Price	Total
500	B&W Copies 8x14	$ 0.40	$ 200.00
			$ -
			$ -
			$ -
		$ -	$ -
		$ -	$ -
		$ -	$ -
		$ -	$ -
		$ -	$ -
		$ -	$ -
		Sub Total	$ 200.00
		Tax	$ 16.50
		Total	$ 216.50
Thank you for your business.			

M Radio Del Rio
) BOX 240
el Rio, TX 78841 USA

6

Gustavo Gus Flores
Advertiser ID: 7154 Amount Paid _____

7154-00005-0006	2/28/2026	1
Invoice	**Date**	**Page**

DETACH AND RETURN WITH PAYMENT

7154-00005-0006 L 2/28/2026 1

Gustavo Gus Flores
6732 Vega Verde Rd
Del Rio, Texas 78840

Purchase Order Number:
Est. Number:
Co-Op:
Description:
Salesperson: ENCINAS, ADRIAN

Date	Day	Length			Qty	Rate	Total
2/28/2026	Sat		KTDR-FM	1500 Political Radio Publicity			$0.00
2/28/2026	Sat		KTDR-FM	Paid $1000 remaining balance 500			$500.00

Pd $500.00 ck# 10006 2/24/26

Bal.

Quantity	**Total**	**$500.00**
Total Due		**$500.00**

INVOICE

Pan American Advertising

TEXAS | COAHUILA

ADVERTISING WITHOUT BORDERS

9

		INVOICE NO.	1726GF
Client	RE-ELECT GUS FLORES VVC COMMISSIONER PCT#4		
Address		Telephone	830-765-6168
City	Del Rio,	State	TX. Zip Code 78840
Advertising Contract	GUS FLORES		
Account Executive	Javier Martinez Jr.	Date	1/7/2026
Start Date	1/15/2026	End Date	
Size			
MEDIA	Newspaper: TEXAS TIMES		
	SOCIAL MEDIA		
	Radio		

Payment of $1,000.00 1/9/26

TEXAS TIMES
JAN 16 TH ISSUE 1/2 PAGE COLOR $250.00
JAN 30 TH ISSUE 1/2 PAGE COLOR $250.00
FEB 13TH ISSUE FULL PAGE COLOR / FULL PAGE WRITE UP ENG $350.00
FEB 27TH ISSUE FULL PAGE COLOR / FULL PAGE WRITE UP SPA $350.00

KWMC
100 .30SEC SPOTS STARTING FEB 1ST - MARCH 3RD $500.00
2 TOWN TALK LIVE INTERVIEWS (FEB-MAR) PROMO
2 FB LIVES EARLY VOITNG DAY/ ELECTION DAY $300.00

Special Instructions	MONTH NET		MONTH NET	
1/2 DOWN PAYMENT REQUIRED TO START	JAN	$1,000.00	JUL	
	FEB		AUG	
PLEASE MAKE CHECKES PAYABLE TO	MAR		SEPT	
PAN AMERICAN ADV	APR		OCT	
	MAY		NOV	
TOTAL MUST BE PAID BY FEB 27TH	JUN		DEC	
Total Cost $2,000.00	Approved by Client		GUS FLORES	

INVOICE

//

REVOLUTIONIZING YOUR BRAND

MARKET ME DIGITAL ADVERTISING DEL RIO

Edward Guerrero
Po Box 104
114 Broadway St, Del Rio Texas 78841

Bill to:

Gustavo "Gus" Flores
Del Rio Texas

Invoice details:

Date: 02/06/2026
Paid on: 02/06/2026
Status: Paid

List of Services	Amount
Tier 2 $750 (paid half of services $400 half services delivered)	$400
(3) graphic or photos per week	//
Creation of *"ReElect Gustavo "Gus" Flores Val Verde County Commissioner PCT 4" facebook page*	//
1 (video)	//

Total:	$400
Paid:	$400
Due:	0