FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00066078 CANDIDATE / MS / MRS / MR **FIRST** ΜI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Monica Zapata NAME Date Received **ELECTRONICALLY FILED** 07/09/2023 NICKNAME LAST **SUFFIX** Notzon CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 3319 Appleby Ct. MAILING Amount Receipt # **ADDRESS** Change of Address Laredo, TX 78045-8965 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST ΜI **TREASURER** Ms. Christine NAME NICKNAME LAST **SUFFIX** Holliday-Cerda STREET ADDRESS (NO PO BOX PLEASE); **CAMPAIGN** APT / SUITE #; STATE; ZIP CODE CITY; **TREASURER** 4519 San Bernardo, 2nd Fl. **ADDRESS** (Residence or Business) Laredo, TX 78041 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 324-8462 **PHONE** 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 Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special

Forms pr	rovided by	Texas Ethics	Commission

11 OFFICE

OFFICE HELD (if any)

District Judge District 111 Webb

12 OFFICE SOUGHT (if known)

District Judge District 111

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 7

13 C / OH NAME	Notzon, Monica Zapa	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political These expenditures may have been mad d officeholders are required to report this	de without the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
—	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURE	R NAME	
		COMMITTEE CAMPAIGN TREASURE	R ADDRESS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OT ES OF LOANS, OR CONTRIBUTIONS I		\$ 0.00
		ICAL CONTRIBUTIONS		\$ 0.00
EXPENDITURE	· ·	PLEDGES, LOANS, OR GUARANTEES IZED POLITICAL EXPENDITURES	OF LOANS)	
TOTALS		\$ 0.00		
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 8,268.67
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	OF THE LAST DAY OF THE	\$ 86,418.43	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	LOANS AS OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT				
			nder penalty of perjury, that the ac includes all information required t ion Code.	
		The	e Honorable Monica Zapata N	ntzon
			signature of Candidate or Officeho	
AFFIX NO	ΓARY STAMP / SEAL AB	OVE		
Sworn to and subso	ribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal o		
Signature of office	er administering oath	Printed name of officer administeri	ng oath Title of office	r administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				JVLK .	3 of 7						
l	18 FILER NAME Notzon, Monica Zapata (The Honorable) 19 Filer ID (Ethics Commission Filers) 00066078										
I		E SUBTOTALS SCHEDULE		SUE	BTOTAL AMOUNT						
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	0.00						
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$							
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$							
4.	X	SCHEDULE E(J): LOANS (JUDICIAL)		\$	0.00						
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	8,268.67						
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$							
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$							
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$							
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$							
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$							
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$							
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$							

	LOANS (J	UDICIAL)				SCHEE	OULE E	(J)
	The Instructio	on Guide explains how to complete this	form.	1 Total pages Schedule E(J): Sch: 1/1 Rpt: 4/7				
2	FILER NAME Notzon, Monica	Zapata (The Honorable)		1	Filer ID	(Ethics Con	nmission Fil	lers)
4	TOTAL OF UN	IITEMIZED LOANS		<u> </u>		\$		0.00
5	Date of loan	7 Name of lender ut-of-state P	AC (ID#:)	9 Loan Am	ount (\$)	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code	••••••		10 Interest I		
						11 Maturity	Date	
12	2 Lender's Principal	Occupation	13 Lender's Job Title					
14	1 Lender's Employer	r/Law Firm	15 Law Firm of lender's spous	se (if	any)			
16	If lender is child, la	aw firm of parent(s) (if any)	_ L					
17	7 Description of Coll	ateral	18 Check if personal funds were deposited into political account (See Instructions)					
19	GUARANTOR INFORMATION	20 Name of guarantor				22 Amount	Guaranteed	d (\$)
23	not applicable not applicable	21 Guarantor address; City; State; pal Occupation	Zip Code 24 Guarantor's Job Title					
25	5 Guarantor's Emplo	worll ow Firm	26 Law Firm of guarantor's sp	201100	(if any)			
	· 		20 Law Filli of guaranioi 5 Sp	Jouse	(II ally)			
27	¹ If guarantor is child	d, law firm of parent(s) (if any)						

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/V	Vages	s/Contract Labor		OTHER (enter a	strict category not listed above	·)
			The Instruction Guid	le explains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAME	Ξ				3	Filer ID	(Ethics Commission	Filers)
	Sch: 1/3 Rpt: 5/7	Notzon, Mo	nica Zapata (The	Honorable)				00066078		
4	Date	5 Payee name								
	04/12/2023	Bethany Ho	ouse							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$2,500.00	817 Hidalgo	Street							
		Laredo, TX	78040							
8	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Expe				Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE					ш.	, TX,	officeholder living	g expense	
						Gala				
9	Complete ONLY if direct		ceholder name	Office sou	ıght			Office he	eld	
	expenditure to benefit C/OI	1								
	Date	Payee name								
	02/06/2023	H E B Groc	eries							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$200.00	2310 E Sau	ınders							
		Laredo, TX	78041							
	DUDDOCE				(6)					
	PURPOSE OF	l	ee Categories listed at the	top of this schedule)	(D)	Description Chapter if traval	outoi	do of Toyon Com	unlota Cahadula T	
	EXPENDITURE	Event Expe	nse					officeholder living	plete Schedule T. expense	
						Valentine's D			, , , , , ,	
							,			
	Complete ONLY if direct	L Candidate/Off	ceholder name	Office sou	ıaht			Office he	eld	
	expenditure to benefit C/O				3					
H	Date	Dayloo nomo								
	04/19/2023	Payee name La Posada								
	Amount (\$)	Payee addre		State; Zip Co	ode					
	\$350.00	1000 Zarag	oza Street							
		Laredo, TX	78040							
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Expe							plete Schedule T.	
	EXI ENDITORE					_		officeholder living		
						Employee Ap	pre	eciation Lun	cneon	
	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office sou	ıght			Office h	eld	
L	CAPERIORALE TO DEFICIT C/OF									

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Food/Beverage Exper Gift/Awards/Memorial Legal Services The Instruction G	s Expense		xpens Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		ve)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	on Filers)
L	Sch: 2/3 Rpt: 6/7		Notzon, Mo	nica Zapata (Tl	he Honorable	e)				00066078		
4	Date	5	Payee name									
	04/28/2023		Laredo Area	a Community F	oundation							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode					
	\$200.00		5200 Univer	rsity Blvd.								
			Killiam Bld F	Room 156								
			Laredo, TX	78045								
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	` `		ns/Donations M		oddic)	``		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE		Candidate/0	Officeholder/Po	litical Comm	ittee		ш		officeholder living	g expense	
								Charitable Co	ontı	ribution		
Ļ						•	<u> </u>					
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	C	office sou	ught			Office he	eld	
	Date		Payee name									
	04/26/2023		Laredo Wor	nen's City Club)							
	Amount (\$)	Γ	Payee addres	ss; City;	State;	Zip Co	ode					
	\$2,500.00		2519 Reyno	olds Street								
			Laredo, TX									
	PURPOSE OF	(a)		ee Categories listed at	the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Event Expe	nse				ш		officeholder living	plete Schedule T. g expense	
								Golf Tournan				
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	office sou	ught			Office he	eld	
	expenditure to benefit C/O	Н										
	Date		Payee name									
	02/06/2023		MVP Party									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					
	\$800.00		604 Shiloh I	Drive								
			Laredo, TX	78041								
	PURPOSE	(a)		ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE	ľ	Event Expe		01 1113 30110)	ļ ´	Check if travel			plete Schedule T.	
	EXPENDITURE		·					_		officeholder living	g expense	
								Valentine's D	ay	Merienda		
	Operation ONE V. C. P.	L_								0	-1-1	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offi	ceholder name	C	office sou	ught			Office he	eid	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/3 Rpt: 7/7	Notzon, Monica Zapata (The Honorable) 00066078
4	Date	5 Payee name
	02/23/2023	Printek Signs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$218.67	204 Shiloh Drive
		Laredo, TX 78045
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Donation for International Women's Day
		Bollation for international women's Bay
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/06/2023	Sam's Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	4810 San Bernardo
	Ψ200.00	1010 Gall Bernardo
		Laredo, TX 78045
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Valentine's Day Merienda
		Valendine 3 Day Welleria
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	01/23/2023	Tagueria Ruiz
		·
	Amount (\$) \$1,300.00	
	Φ1,500.00	2101 Guadalupe
		Laredo, TX 78043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Valentine's Day Merienda
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held