JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00083458	,	2 Total pages	filed: 37
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Ricardo M.			OFFICE Date Received	USE ONLY
						CALLY FILED
					07/16/2023	
	NICKNAME	LAST Adobbati		SUFFIX	07/10/2023	
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #: CIT	-Y:	ZIP CODE	Date Hand-delivere	d or Date Postmarked
OFFICEHOLDER	P.O. Box 202	,,	- ,			
MAILING ADDRESS	1.01.00.202				Receipt #	Amount
Change of Address	Port Isabel, TX 78578				Date Processed	
					Date Imaged	
					-	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Ms.	Sandra Lopez				
NAME						
	NICKNAME	LAST			SUFFIX	
		Langley				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PC) BOX PLEASE);	AP	T / SUITE #; CITY;	S	TATE; ZIP CODE
ADDRESS	1304 Pepper Tree Circle					
(Residence or Business)						
	Brownsville, TX 78520					
7 CAMPAIGN TREASURER	AREA CODE PHOI	NE NUMBER	EXTENSION			
PHONE	(956) 698-9469					
8 REPORT TYPE				ъ	7 A 5 () (
	January 15	30th day before		Runoff		campaign treasurer officeholder only)
	X July 15	8th day before	election	Exceeded modified	Final Report (A	Attach C/OH-FR)
				reporting limit	-	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2023	TI	HROUGH	06/30/202		
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
			Seneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	District Judge District 404	Cameron				
	1			1		
		~~ -				
		GO	FO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	S	Ver	sion V3.5.1.a18ea2ca

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 37

					2 of 37
13 C / OH NAME	Adobbati, Ricardo M.	(The Honorable)	14 Filer ID 00083458	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou d officeholders are required to report this information	t the candidate's or offi	iceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$	0.00
		ICAL CONTRIBUTIONS	NC)	\$	43,150.00
EXPENDITURE TOTALS	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				174.16
	4. TOTAL POLITICAL EXPENDITURES				17,070.92
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	63,396.10
OUTSTANDING LOAN TOTALS	6.TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD\$25,000.				25,000.00
17 AFFIDAVIT		l swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required		
			able Ricardo M. Ad	obbati	
			of Candidate or Officeh		
AFFIX NO	TARY 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 of office.	, uio uio		
Signature of offic	er administering oath	Printed name of officer administering oath	Title of offic	cer administeri	ng oath
Forms provided by Tex	xas Ethics Commissior	www.ethics.state.tx.us		Version V3	8.5.1.a18ea2ca

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

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18 FILER NA		19 Filer ID	(Ethics Commission Filers)	
	Adobbati, Ricardo M. (The Honorable) 00083458 20 SCHEDULE SUBTOTALS			
NAME OF	SUBTOTAL AMOUNT			
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 43,150.00	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00	
3. X	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$ 0.00	
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$ 25,000.00	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 17,070.92	
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00	
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$ 0.00	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00	
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 CONTRIBUTIO	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

The Instruc	ction Guide explains how to complete this f	The Instruction Guide explains how to complete this form.	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Adobbati, Ric	cardo M. (The Honorable)		00083458
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
06/30/2023	Aguirre Law Group PLLC		\$500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	•
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/07/2023	Canales, Rick (Mr.)		\$1,500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Self Employe	ed		
If contributor is	a child, law firm of parent(s) (if any)	•	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/30/2023	Colvin, Rodrigues, Saenz and Kennamer LLP		\$1,000.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)		
	Town Ethics Commission		

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/16 Rpt: 5/37	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	cardo M. (The Honorable)		00083458
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
06/30/2023	Cornejo, Anthony (Mr.)		\$750.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Self Employe	ed		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Data	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (¢)
Date 06/16/2023)	Amount of Contribution (\$)
00/10/2023	De La Fuente, Oscar (Mr.)		\$2,000.00
	Contributor address; City; State; Zip Code		
	Harlingen, TX 78550		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Self Employe	ed		
If contributor is	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/07/2023	Ed Stapleton Lawyer PLLC		\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
O sustaila standa I		Osustailauteada Jala Titla	
	Principal Occupation	Contributor's Job Title	
		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)		

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 3/16 Rpt: 6/37
2 FILER NAME Adobbati, Ric	ardo M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083458
4 Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$500.00
	Brownsville, TX 78520		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's e	nployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/16/2023	Gamez, Erin (Miss)		\$2,500.00
	Contributor address; City; State; Zip Code Brownsville, TX 78520		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e Self Employe	nployer/law firm d	Law firm of contributor's sp	oouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date 06/02/2023	Full name of contributor out-of-state PAC (ID#: Garza, Noe (Mr.) Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$1,000.00
	Brownsville, TX 78520		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Attorney		Attorney	
	nployer/law firm	Law firm of contributor's sp	oouse (if any)
Self Employe			
If contributor is	a child, law firm of parent(s) (if any)		
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The Instruction Guide explains how	to complete this form.	1 Total pages Schedule A(J)1: Sch: 4/16 Rpt: 7/37
2 FILER NAME Adobbati, Ricardo M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083458
4 Date 5 Full name of contributor 06/30/2023 Garza, Reynaldo (Mr.) 6 Contributor address; City; State	out-of-state PAC (ID#:) 7 Amount of Contribution (\$) \$2,000.00
Brownsville, TX 78520		
8 Contributor's Principal Occupation Attorney	9 Contributor's Job Tit Attorney	le
10 Contributor's employer/law firm Self Employed	11 Law firm of contribut	tor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if a	ny)	
Date Full name of contributor 06/30/2023 Gonzalez, Chester (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code) Amount of Contribution (\$) \$500.00
Brownsville, TX 78521		
Contributor's Principal Occupation Attorney	Contributor's Job Tit Attorney	le
Contributor's employer/law firm Self	Law firm of contribut	tor's spouse (if any)
If contributor is a child, law firm of parent(s) (if a	ny)	
Date Full name of contributor 06/07/2023 Graham J.D., Joseph (Mr. Contributor address; City; Sta) Amount of Contribution (\$)
Brownsville, TX 78521		
Contributor's Principal Occupation Attorney	Contributor's Job Tit Attorney	le
Contributor's employer/law firm	Law firm of contribut	tor's spouse (if any)
Self Employed If contributor is a child, law firm of parent(s) (if a	ny)	
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The Instru	tion Guide explains how to complete	this form.	1 Total pages Schedule A(J)1: Sch: 5/16 Rpt: 8/37
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Adobbati, Ri	cardo M. (The Honorable)		00083458
4 Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7 Amount of Contribution (\$)
06/16/2023	Gustavo Elizondo III Attorney at Law P.C		\$500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	bouse (if any)
12 If contributor in	a shild low firm of parant(c) (if any)		
	a child, law firm of parent(s) (if any)		
Dete		A Q //D //	Amount of Constribution (*)
Date 06/30/2023	—	AC (ID#:)	Amount of Contribution (\$) \$500.00
00/30/2023			\$500.00
	Contributor address; City; State; Zip Code		
	Harlingen, TX 78550		
Contributor's	rincipal Occupation	Contributor's Job Title	
Contributor 3 P			
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
06/07/2023	Herrera, Ruben (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's F	rincipal Occupation	Contributor's Job Title	
Attorney	Attorney Attorney		
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Self Employe	d		
If contributor is	a child, law firm of parent(s) (if any)		
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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 6/16 Rpt: 9/37
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Adobbati, Ri	cardo M. (The Honorable)		00083458
4 Date	5 Full name of contributor out-of-state PAC (ID#:))	7 Amount of Contribution (\$)
06/30/2023	Hodge & James LLP		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Harlingen, TX 78553		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/30/2023	Hodge Shergold LLP		\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	nouse (if any)
Contributor 5 C			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/30/2023	J A Sosa Law PLLC		\$600.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520	I	
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
L Forms provided	by Texas Ethics Commission www.ethic	es state ty us	Version V3 5 1 a18ea2ca

The Instru	The Instruction Guide explains how to complete this form.			otal pages Schedule A(J)1 Sch: 7/16 Rpt: 10/37		
2 FILER NAME				3 F	Filer ID (Ethics Commission	on Filers)
Adobbati, Ri	cardo M. (The Honorable)				00083458	,
4 Date	5 Full name of contributor out-o	of-state PAC (ID#:)	7 4	Amount of Contribution (\$)	
06/30/2023	Jones, Galligan, Key and Lozano	LLP				\$1,000.00
	6 Contributor address; City; State; Zip (Code				
	Weslaco, TX 78596					
8 Contributor's F	Principal Occupation	:	9 Contributor's Job Title	•		
10 Contributor's e	employer/law firm		11 Law firm of contributor's sp	pouse	(if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	of-state PAC (ID#:)		Amount of Contribution (\$)	
06/02/2023	Kowalski, Fred (Mr.))	'		\$1,000.00
00,02,2020		Codo				<i>\$1,000.00</i>
	Contributor address; City; State; Zip	Code				
	Browneyille, TV 78520					
	Brownsville, TX 78520					
	Principal Occupation		Contributor's Job Title			
Attorney			Attorney			
	employer/law firm		Law firm of contributor's sp	pouse	(if any)	
Self Employe						
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	of-state PAC (ID#:)	A	Amount of Contribution (\$)	
06/02/2023	Law Office of Aaron W. Rendon F	PLLC				\$1,500.00
	Contributor address; City; State; Zip	Code		"		
	Brownsville, TX 78520					
Contributor's F	Principal Occupation		Contributor's Job Title	-		
Contributor's e	employer/law firm		Law firm of contributor's sp	pouse	(if any)	
If contributor is	s a child, law firm of parent(s) (if any)					

The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 8/16 Rpt: 11/37
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Adobbati, Ricardo M. (The Honorable)		00083458
4 Date 5 Full name of contributor out-of-state PAC (ID#)	7 Amount of Contribution (\$)
06/16/2023 Law Office of Amber M. Rodriguez PLLC		\$500.00
6 Contributor address; City; State; Zip Code		
Harlingen, TX 78550		
8 Contributor's Principal Occupation	9 Contributor's Job Title	
10 Contributor's employer/law firm	11 Law firm of contributor's sp	oouse (if anv)
40 If a sublimities in a shift have find a factor of a sublimities (for a shift)		
12 If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID#)	Amount of Contribution (\$)
06/30/2023 Law Office of Gilbert Hinojosa and Associates	P.C.	\$500.00
Contributor address; City; State; Zip Code		
Contributor address, City, State, Zip Code		
Brownsville, TX 78520		
Contributor's Principal Occupation	Contributor's Job Title	•
Contributor's employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID#)	Amount of Contribution (\$)
06/30/2023 Law Office of Salvador Garcia PLLC		\$750.00
Contributor address; City; State; Zip Code		
Contributor address, City, State, Zip Code		
Brownsville, TX 78520		
Contributor's Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm	Law firm of contributor's sp	oouse (if anv)
If contributor is a child, law firm of parent(s) (if any)		
Forme provided by Toyoo Ethico Commission		

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 9/16 Rpt: 12/37
2 FILER NAME Adobbati, Ric	cardo M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083458
4 Date 06/16/2023	 5 Full name of contributor out-of-state PAC (ID#: Law Offices of Alejandro Gallaga, PLLC 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$750.00
	Harlingen, TX 78550		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/16/2023	Lawler, Marion (Mr.)		\$1,500.00
	Contributor address; City; State; Zip Code Brownsville, TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	mployer/law firm	Law firm of contributor's sp	ouse (if any)
Lawler and A	ssociates		
If contributor is	s a child, law firm of parent(s) (if any)	I	
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Lucio, Erick (Mr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00
	Rancho Viejo, TX 78575		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Attorney		Attorney	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Hamilton and	Lucio PLLC		
If contributor is	s a child, law firm of parent(s) (if any)		
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 10/16 Rpt: 13/37		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Adobbati, Ri	cardo M. (The Honorable)	00083458		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
06/30/2023	Maria Linda Gonzalez P.C.		\$250.00	
	6 Contributor address; City; State; Zip Code			
	Brownsville, TX 78520	1		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
12 If contributor in	s a child, law firm of parent(s) (if any)			
	s a child, law littl of parent(s) (if any)			
Data			Amount of Contribution (ft)	
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Martinez and Tijerina PLLC)	Amount of Contribution (\$) \$1,250.00	
00/30/2023	-		\$1,250.00	
	Contributor address; City; State; Zip Code			
	Brownsville, TX 78520			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
06/30/2023	Martinez, Gabriela (Miss)		\$500.00	
	Contributor address; City; State; Zip Code			
	Brownsville, TX 78520			
	Principal Occupation	Contributor's Job Title		
Attorney		Attorney		
	employer/law firm	Law firm of contributor's sp	bouse (if any)	
Self Employe				
If contributor is	s a child, law firm of parent(s) (if any)			
Forms provided	by Texas Ethics Commission www.ethic	s state tx us	Version V3 5 1 a18ea2ca	

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 11/16 Rpt: 14/37			
2 FILER NAME Adobbati, Ric	cardo M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083458		
06/30/2023	 5 Full name of contributor out-of-state PAC (ID#: Martinez, Ignacio (Mr.) 6 Contributor address; City; State; Zip Code 	7 Amount of Contribution (\$) \$1,500.00			
	Brownsville, TX 78520				
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title			
Attorney		Attorney			
10 Contributor's e		11 Law firm of contributor's sp	ouse (if any)		
Self Employe					
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	—)	Amount of Contribution (\$)		
06/30/2023	Masso, Carlos (Mr.)		\$1,000.00		
	Contributor address; City; State; Zip Code				
	Brownsville, TX 78520				
	Principal Occupation	Contributor's Job Title			
Attorney		Attorney			
	mployer/law firm	Law firm of contributor's sp	ouse (if any)		
Self Employe	a child, law firm of parent(s) (if any)				
Date 06/16/2023	Full name of contributor out-of-state PAC (ID#:_ Noe Gonzalez Law Group PLLC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00		
	Brownsville, TX 78520				
Contributor's P	Principal Occupation	Contributor's Job Title			
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)	I			
	u Taura Ethica Commission		Varsies V2 F 1 e10ee2ee		

The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 12/16 Rpt: 15/37	
2 FILER NAME Adobbati, Rie	cardo M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083458
4 Date 06/30/2023	 5 Full name of contributor out-of-state PAC (ID#:_ Pronto Bail Bonds 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$500.00
	Brownsville, TX 78520		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Rodriguez Lucio Law Group Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00
Contributor's F	Brownsville, TX 78520 Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>	
Date 06/16/2023	Full name of contributor out-of-state PAC (ID#:_ Roerig, Oliveira and Fisher, LLP Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$2,500.00
	Brownsville, TX 78520		
Contributor's F	rincipal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
	hy Taylog Ethiog Commission		V(orojen V/2 E 1 o10oc2oo

The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 13/16 Rpt: 16/37		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	cardo M. (The Honorable)	00083458		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
06/16/2023	Royston, Rayzor, Vickery and Williams LLP		\$1,500.00	
	6 Contributor address; City; State; Zip Code			
	Brownsville, TX 78521			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/30/2023	Sanchez, Whittington and Wood, LLC		\$500.00	
	Contributor address, City, State, Zip Code			
	Brownsville, TX 78521			
Contributor's [Contributor's Job Title		
Contributors P	Principal Occupation			
Contributorio d	employer/law firm	Law firm of contributor's sp	pourse (if any)	
Contributors e		Law IIIII of contributor's Sp		
lf oontributor is	a child low firm of parant(a) (if any)			
	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/30/2023	Taylor, Lisa (Ms.)		\$500.00	
	Contributor address; City; State; Zip Code			
	Harlingen, TX 78550			
Contributor's F	Principal Occupation	Contributor's Job Title		
Attorney		Attorney		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
Self Employe	ed			
If contributor is	s a child, law firm of parent(s) (if any)			
Forms provided	by Texas Ethics Commission www.ethic	s state tx us	Version V3 5 1 a18ea2ca	

The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 14/16 Rpt: 17/37			
2 FILER NAME Adobbati, Ri	cardo M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083458		
4 Date 06/30/2023	 5 Full name of contributor out-of-state PAC (ID#: The Barrera Law Firm P.C. 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$500.00		
	Harlingen, TX 78550				
8 Contributor's F	Principal Occupation	9 Contributor's Job Title			
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	ouse (if any)		
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ The Gracia Law Firm P.C. Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$1,000.00		
Contributor's F	Brownsville, TX 78520 Principal Occupation	Contributor's Job Title			
Contributor's e	employer/law firm	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)	I			
Date 06/30/2023	Full name of contributorout-of-state PAC (ID#:_ The Law Firm of Zayas and Zamora P.C. Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$1,500.00		
	Brownsville, TX 78520				
Contributor's F	Principal Occupation	Contributor's Job Title			
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				
	hy Taylog Ethics Commission		V(orging V/2 E 1 e10ee2ee		

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 15/16 Rpt: 18/37		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Adobbati, Ri	cardo M. (The Honorable)		00083458	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
06/30/2023	The Law Office of Ernie J. Hernandez PLLC		\$300.00	
	6 Contributor address; City; State; Zip Code			
	Brownsville, TX 78520			
9 Contributoria (9 Contributor's Job Title		
	Principal Occupation			
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/07/2023	The Michael Gonzalez Law Firm PLLC		\$500.00	
	Contributor address; City; State; Zip Code			
	Brownsville, TX 78520			
Contributoria		Contributor's Job Title		
Contributors	Principal Occupation			
		Attorney		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/30/2023	The Reyna Law Firm P.L.L.C.		\$500.00	
	Contributor address; City; State; Zip Code			
	Brownsville, TX 78520			
Contributor's [Principal Occupation	Contributor's Job Title		
Contributors r				
O sustaila standa	and a second second second	Level from the static state of the state of		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)			
<u> </u>	by Toyoo Ethioo Commission	a atata ty ua	Version V/2 E 1 e10ee0ee	

The Instru	ction Guide explains how to	1 Total pages Schedule A(J)1: Sch: 16/16 Rpt: 19/37	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	cardo M. (The Honorable)	00083458	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
06/16/2023	The Robles Law Firm LLC		\$500.00
	6 Contributor address; City; State;	Zip Code	
	Harlingen, TX 78550		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12 If contributor	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/20/2023	Trejo, Michael (Mr.)	Jui-JI-Sidle PAC (ID#)	\$500.00
00/20/2023		Zia Oada	
	Contributor address; City; State;	Zip Code	
	Brownsville, TX 78520		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
Self Employ	ed		
If contributor	s a child, law firm of parent(s) (if any)		

PLEDGED CONTRIBUTIONS (JUDICIAL)

The Inst	ruction Guide explains how to cor	nplete this form.	1 Total pages So Sch: 1/1 Rpt:		
2 FILER NAME			(Ethics Commission File	ers)	
	lo M. (The Honorable)	00083458			
⁴ TOTAL OF UN	ITEMIZED PLEDGES			\$	0.00
5 Date 6 Full name of pledgorout-of-state PAC (ID#:			8 Amount of pledge (\$)	9 In-kind desc (If applica	ription ble)
	7 Pledgor Address; City; State;			 	
			Check if travel	outside of Texas. Comp	blete Schedule T.
10 Pledgor's principa	loccupation	11 Pledgor's job title			
12 Pledgor's employe	er/law firm	13 Law firm of pledgor's	s spouse (if any)		
14 If pledgor is a chil	d, law firm of parent(s) (if any)	1			

	LOANS (J	UDICIAL)			SCHEDUL	Е E(J)	
	The Instructio	on Guide explains how to complete this	1 Total pages Schedule E(J): Sch: 1/1 Rpt: 21/37				
2	FILER NAME Adobbati, Ricard	lo M. (The Honorable)	3 Filer ID 000834	(Ethics Commiss 458	sion Filers)		
4	TOTAL OF UN	IITEMIZED LOANS			\$	25,000.00	
5	Date of loan	7 Name of lender out-of-state P	AC (ID#:)	9 Loan Amount	: (\$)	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate 11 Maturity Date		
					II Maturity Date		
12	2 Lender's Principal	Occupation	13 Lender's Job Title				
14	4 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)					
17	7 Description of Coll	ateral	18 Check if personal funds were deposited into political account (See Instructions)				
19	9 GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guar	anteed (\$)	
	not applicable	21 Guarantor address; City; State;	Zip Code				
23	3 Guarantor's Princi	pal Occupation	24 Guarantor's Job Title				
25	5 Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any))		
27	7 If guarantor is child	d, law firm of parent(s) (if any)					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 1/16 Rpt: 22/37	Adobbati, Ricardo M. (The Honorable)	00083458				
4	Date 06/07/2023	Payee name Amazon					
6	Amount (\$) \$85.15	Payee address; City; State; Zip Code 410 Terry Avenue Seattle, WA 98109 Seattle, WA 98109					
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	04/19/2023	American Headshot					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$270.62	1805 Ruben Torres Suite A9 Brownsville , TX 78526					
	PURPOSE OF EXPENDITURE	A) Category (See Categories listed at the top of this schedule) Advertising Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense mpaign				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	04/25/2023	American Headshot					
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 1805 Ruben Torres Suite A9 Brownsville , TX 78526					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 2/16 Rpt: 23/37		Adobbati, Ricardo M. (The Honorable)			-	00083458
4	Date	5	Payee name				
	04/17/2023		CNBC Smartshop				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$32.48		7800 Airport Blvd				
			Houston, TX 77061				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Travel Out of District	,		outsi	ide of Texas. Complete Schedule T.
	EXPENDITORE						, officeholder living expense
					Charger - La	oto	p
_					1		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	gnt		Office held
	Date		Payee name				
	05/09/2023		CUN International				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$500.00		5 Event Center Blvd				
			Brownsville, TX 78526				
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T. , officeholder living expense
					Deposit - Eve		
					Venezzia Eve		
	Complete ONLY if direct		Candidate/Officeholder name O	office sou	ght		Office held
	expenditure to benefit C/OF	Н			-		
	Date		Payee name				
	06/21/2023		CUN International				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$1,481.00		5 Event Center Blvd				
			Brownsville, TX 78526				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.
					Event locatio		, officeholder living expense
					Venezzia		
-	Complete ONLY if direct	Ļ	Candidate/Officeholder name O	office sou	aht		Office held
	expenditure to benefit C/OF				g		
-							

			EXPENDITURE CATEG	ORIES FO	R BO	OX 8(a)		
Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form.				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 3/16 Rpt: 24/37		Adobbati, Ricardo M. (The Honorab	le)				00083458
4	Date	5	Payee name	-				
	06/01/2023	-	Cameron County Bar Assocation					
6	Amount (\$)	7	-	te; Zip Co	nde			
ľ	\$250.00		P.O. Box 3866	iiie, 2ip et	Juc			
	\$200100							
			Brownsville, TX 78523					
	BUBBOOF	(-)			(4.)			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(D)	Description	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Event Expense					officeholder living expense
						Annual Dinne	er	
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held
	expenditure to benefit C/OF	Н						
⊨	Date		Payee name					
	03/08/2023		Cameron County Young Lawyers As	sociation				
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode			
	\$50.00		974 E. Harrison	,				
			Brownsville, TX 78520					
_	PURPOSE				(h)	Description		
	OF	[^(a)	Category (See Categories listed at the top of this Contributions/Donations Made By	schedule)	(0)	Description	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Con	nmittee				officeholder living expense
						Sponsorship		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	02/16/2023		Casa Antigua					
	Amount (\$)		Payee address; City; Sta	ite; Zip Co	ode			
	\$37.06		2040 Central Blvd					
			Brownsville, TX 78520					
-	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	OF		Food/Beverage Expense	oonouulo)			outsi	de of Texas. Complete Schedule T.
	EXPENDITURE							officeholder living expense
						Meeting - Sta	tf	
					L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
		•						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 4/16 Rpt: 25/37	Adobbati, Ricardo M. (The Honorable)	00083458						
4	Date 06/07/2023	5 Payee name Casa Antigua							
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$68.36 2040 Central Blvd Brownsville, TX 78520								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Campaign Meeting									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	04/19/2023	Casa of Cameron and Willacy Counties							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 1740 Boca Chica Blvd #300							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense N						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/06/2023	Chili's							
	Amount (\$) \$40.69	Payee address; City; State; Zip Code 2750 N Expressway							
		Brownsville, TX 78526							
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lunch - possible campaign committee								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract La	abor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2						3 Filer ID (Ethics Commission Filers)	
1	Sch: 5/16 Rpt: 26/37	00083458							
4	Date 02/03/2023		Payee name Cobbleheads						
6	Amount (\$)			State	Zip Co	٥			
Ū	\$19.18 3154 Central Blvd								
			Brownsville, TX 78520						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Image: Meeting - Campaign Organization Image: Check if Austin, TX, officeholder living expense							, TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	0	Office sou	ht		Office held	
	Date		Payee name						
	06/22/2023		DiSantis, Keith (Mr.)						
	Amount (\$)		Payee address; City;	State;	Zip Co	le			
	\$350.00		2302 N. 21st Harlingen , TX 78550						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Event Expense	this sche	edule)	Check	k if travel o	outside of Texas. Complete Schedule T. TX, officeholder living expense nt	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Office sou	ht		Office held	
	Date		Payee name						
	06/22/2023		Esparza, Sandra (Mrs.)						
	Amount (\$) \$400.00	I	Payee address; City; 315 Catherine Lane	State;	Zip Co	le			
			Brownsville, TX 78520						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Event Expense	this sche	edule)		k if travel o k if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	0	Office sou	ht		Office held	

				EXPE	NDITURE	CATEGOF	RIES FOF	BC	DX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mittee	Gift/Awards≀ _egal Servio	age Expense /Memorials Ex ces		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pens ages			Travel in Distric Travel Out of D	Equij ct)istric	oment & Related Expense
1	Total pages Schedule F1:	2								3	Filer ID	/	Ethics Commission Filers)
L.	Sch: 6/16 Rpt: 27/37		Adobbati, Ricardo M. (The Honorable) 00083458										
4	Date	5 F	Payee name										
	02/17/2023	F	Flying Pig										
6 Amount (\$) \$104.41 Olmito, TX 78575													
8	PURPOSE	(a) (Category _{(Se}	e Categorie	s listed at the t	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		-ood/Bevera						Check if travel	outsi	de of Texas. Cor	mplet	e Schedule T.
	EXPENDITORE										officeholder livir		
									Charro Days	Flo	at Organiza	atio	nal Meeting
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held													
	Date		Payee name										
	06/21/2023		-ayee name Franco, Will	am									
	Amount (\$)		Payee addres	•	ity;	State;	; Zip Co	de					
	\$825.00		2012 Palm E	Blvd									
		E	Brownsvile,	TX 7852	20								
	PURPOSE OF EXPENDITURE						utside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	eholder	name	C	Office sou	ght			Office h	neld	
	Date	F	Payee name										
	06/22/2023		Gamez, Mar	nuel (Mr	.)								
-	Amount (\$)	F	Payee addres	s; Ci	ity;	State:	; Zip Co	de					
	\$500.00		1095 Calle E		•	·	·						
		E	Brownsville,	TX 785	26								
	PURPOSE OF EXPENDITURE		Category _{(Se} Event Exper		s listed at the t	top of this sch	edule)	(b)		, TX,	de of Texas. Cor officeholder livir		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Offic	eholder	name	C	Office sou	ght			Office h	neld	

		EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 7/16 Rpt: 28/37	Adobbati, Ricardo M. (The Honorable) 00083458								
4	Date 06/27/2023	5 Payee name Grotto								
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$171.14 1001 Avenida de las Americas Suite A Houston, TX 77010 Houston, TX 77010									
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Rise 23 Conference (food)									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/05/2023	Hernandez, Luis (Mr.)								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$600.00	110								
		Jose Marti Brownsville, TX 78521								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense /ent							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	02/08/2023	Jason's Deli								
	Amount (\$) \$107.81	Payee address; City; State; Zip Code 4365 S. Exp. 77 Suite 900 Brownsville, TX 78520								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense S Meeting							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

			EXPENDITURE CATEGOR	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 8/16 Rpt: 29/37		Adobbati, Ricardo M. (The Honorable)				00083458			
4	Date	5	Payee name			•				
	03/29/2023	Jason's Deli								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le					
	\$90.81		4365 S. Exp. 77							
			Suite 900							
			Brownsville, TX 78520							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	adula)	(b) Description					
-	OF		Food/Beverage Expense	euule)		outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Austir	n, TX	, officeholder living expense			
					Jury Lunch D	Deli	berations			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	lht		Office held			
	Date		Payee name							
	06/06/2023		Jason's Deli							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
\$90.61 4365 S. Exp. 77										
			Suite 900							
			Brownsville, TX 78520							
	BUBBOCE									
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description Check if travel	outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Credit Card Payment	, officeholder living expense						
					AARPA Mee	ting]			
	Complete ONLY if direct		Candidate/Officeholder name O	office sou	Jht		Office held			
	expenditure to benefit C/OF	4								
	Date		Payee name							
	05/12/2023		Joe's Oyster Bar							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$60.00		207 E. Maxan							
			Port Isabel, TX 78578							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Food/Beverage Expense	,			ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					Campaign M	eet	ing			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office soug	Jht		Office held			
	superioratione to benefit C/OI									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 9/16 Rpt: 30/37	Adobbati, Ricardo M. (The Honorable)	00083458								
4	Date	Payee name									
	06/26/2023	Joey's									
6	Amount (\$) \$285.17	 7 Payee address; City; State; Zip Code 7 5045 Westheimer 									
	φ203.17										
		Suite X-01									
		Houston, TX 77056									
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE		utside of Texas. Complete Schedule T.								
		Rise 23 Confe	TX, officeholder living expense								
			Si elice								
9	Ocomplete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held										
	Date	Payee name									
	06/13/2023	Kumori									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$14.90	3340 Pablo Kisel									
	φ14.50	Suite 101									
		Brownsville, TX 78526									
	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description	utride of Tourse, Complete Schedule T								
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
		Campaign Me									
			5								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	06/01/2023	La Pampa									
	Amount (\$) \$96.06	Payee address; City; State; Zip Code 3230 Pablo Kisel									
	\$90.00										
		Suite F-102									
		Brownsville, TX 78526									
	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description									
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
		Meeting - Can									
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held								
	expenditure to benefit C/OF		-								

				EXPENDIT	URE CATEGO	RIES FOF	BOX 8((a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment				Event Expense Fees Food/Beverage Ex Gift/Awards/Memo Legal Services The Instruction		Office Ove Polling Exp Printing Ex Salaries/W	head/Rent ense pense ages/Contr			Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment &	& Related Expense
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics (Commission Filers)
1	Sch: 10/16 Rpt: 31/37				he Honorable))				00083458	(Ethics (
4	Date	5 F	Payee name					•				
	04/14/2023	L	_otus Cafe									
6	Amount (\$)	7 F	Payee addres	s; City;	State;	; Zip Co	le					
	\$17.94	2	2489 Boca (Chica								
		E	Brownsville,	TX 78521								
8	PURPOSE	(a) (Category _{(Se}	e Categories listed	at the top of this sch	edule)	(b) Des	cription				
	OF EXPENDITURE	F	-ood/Bever	age Expense)					e of Texas. Com		dule T.
										officeholder living Bar Assoc		leetina
							ea		ancy	241710000		looting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	e (Dffice sou	Jht			Office he	eld	
	Date	F	Payee name									
	03/11/2023	1	Maggiano's									
	Amount (\$)	F	Payee addres	s; City;	State	; Zip Co	le					
	\$233.44	1	10910 Dom	ain Drive								
		5	Suite 100									
		4	Austin, TX 7	8758								
	PURPOSE	(a) (Category (Se	e Categories listed	at the ton of this sch	edule)	(b) Des	cription				
	OF EXPENDITURE		Category (See Categories listed at the top of this schedule) (b) Solicitation/Fundraising Expense					Check if travel outside of Texas. Complete Schedule T.				
									TX, d	officeholder living	expense	
							Fun	Idraising				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	e (Dffice sou	Jht			Office he	eld	
	Date	F	^D ayee name									
	03/22/2023	1	Mariscos La	uro Villar								
	Amount (\$)	F	Payee addres	s; City;	State	; Zip Co	le					
	\$29.23	3	354 E. Eliza	beth								
		E	Brownsville,	TX 78520								
	PURPOSE OF	(a) (Category (Se	e Categories listed	at the top of this sch	edule)	(b) Des					
	EXPENDITURE	F	-ood/Bever	age Expense	;					e of Texas. Com officeholder living		dule T.
								ge's Meeti		uncendider inning	expense	
								J - 74	3			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	e (Office sou	Iht			Office he	eld	
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 11/16 Rpt: 32/37	Adobbati, Ricardo M. (The Honorable)	00083458							
4	Date	Payee name								
	03/24/2023	Mariscos Lauro Villar								
6	Amount (\$) 7 Payee address; City; State; Zip Code \$29.22 354 E. Elizabeth 354 E. Elizabeth 354 E. Elizabeth									
		Brownsville, TX 78520								
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Judge's Meeting									
9	9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date	Payee name								
	06/28/2023	Marriot								
	Amount (\$) Payee address; City; State; Zip Code \$1,920.83 1777 Walker Street									
		Houston, TX 77010								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/11/2023	Moody Clinic								
	Amount (\$) \$1,000.00	Payee address;City;State;Zip Code1901 E. 22nd								
		Brownsville, TX 78521								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense nnual Event							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 12/16 Rpt: 33/37										
4	Date	Payee name									
	05/09/2023	Order of the Serape									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$250.00	Dean Porter Park Drive									
		Brownsvile, TX 78520									
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE	Fees Check if travel o	utside of Texas. Complete Schedule T.								
		Membership F	TX, officeholder living expense								
9	9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
	Date	Payee name									
	06/16/2023	Pean, Monica (Ms.)									
	Amount (\$) Payee address; City; State; Zip Code										
	\$4,050.00 1768 Guadalajara Avevnue										
	,	· · · · · · · · · · · · · · · · · · ·									
		Brownsville, TX 78526									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense g								
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	05/18/2023	Rotary of Rancho Viejo									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$75.00	1 Rancho Viejo Drive									
		······································									
		Rancho Viejo, TX 78575									
	PURPOSE OF) Category (See Categories listed at the top of this schedule) (b) Description	utside of Toyon, Complete Schodule T								
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I g event								
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held								
	expenditure to benefit C/OI										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/wards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 F				3	Filer ID (Ethics Commission Filers)			
	Sch: 13/16 Rpt: 34/37		dobbati, Ricardo M. (The Honorable	e)			00083458			
4	Date	5 F	Payee name			-				
	05/22/2023 SPI Management									
6	Amount (\$) 7 Payee address; City; State; Zip Code									
	\$32.53	5	00 Padre Blvd							
		5	South Padre Island , TX 78597							
8	PURPOSE	(a) (Category (See Categories listed at the top of this sc	hedule)	(b) Description					
	OF EXPENDITURE		Credit Card Payment	,		outs	ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					5th Region S	em	linar			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office sou	int		Office held			
⊨	Date									
	05/22/2023		Payee name							
			SPI Management							
	Amount (\$)			e; Zip Co	de					
	\$17.82	5	00 Padre Blvd							
		S	South Padre Island , TX 78597							
	PURPOSE	(a) (Category (See Categories listed at the top of this sc	hedule)	(b) Description					
	OF EXPENDITURE		Credit Card Payment				ide of Texas. Complete Schedule T.			
						Check if Austin, TX, officeholder living expense 5th region seminar expense (food)				
					Surregion se					
_	Complete ONLY if direct	L Ca	ndidate/Officeholder name	Office sou	iht		Office held			
	expenditure to benefit C/OI			011100 000	,					
⊨	Date	F	avee name							
	03/08/2023		Sanchez, Daniela (Miss)							
	Amount (\$)			; Zip Co	le					
	\$50.00		7279 Britany Court	, <u>Lip</u> 00						
	400.00	_								
		│⊢	larlingen, TX 78552							
-	PURPOSE				(b) Description					
	OF		Category (See Categories listed at the top of this sc Contributions/Donations Made By	hedule)	(b) Description Check if travel	outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Candidate/Officeholder/Political Com	nittee			, officeholder living expense			
					Lady Hawks					
	Complete ONLY if direct		ndidate/Officeholder name	Office sou	jht		Office held			
	expenditure to benefit C/OI	Η								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	C P S	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	EILER NAME			-	3	Filer ID (Ethics Commission Filers)	
-	Sch: 14/16 Rpt: 35/37		Adobbati, Ricardo M. (The Honora	able)				00083458	
4	Date	5	Payee name						
	06/17/2023		Staples						
6	Amount (\$)	7	Payee address; City; S	State; 2	Zip Cod	e			
	\$19.00		2436 Pablo Kisel						
			Prowneyille TV 79526						
			Brownsville, TX 78526						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of the	nis schedu	ule)	b) Description			
	EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T.	
						Signage	1, 1 A	, officeholder living expense	
						Signage			
_									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offi	ice soug	ht		Office held	
	Date		Payee name						
	06/21/2023		State Bar of Texas						
_		┣─			7:0 000	-			\neg
	Amount (\$)			state;	Zip Cod	e			
	\$270.00		1414 Colorado Street						
			Austin, TX 78701						
	PURPOSE	(a)	Category (See Categories listed at the top of th	nis schedu	ule) (b) Description			
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.	
	LAFENDITORE							, officeholder living expense	
						Membership	Fe	es/Dues	
	Complete ONLY if direct		Candidate/Officeholder name	Offi	ice soug	ht		Office held	
	expenditure to benefit C/OI	Η							
	Date		Payee name						-
	05/01/2023		Temple Beth El						
	Amount (\$)	-	•	Stato.	Zip Cod	0			\neg
	\$150.00		24 Coveway Street	state, 1		e			
	ΦT20.00		24 Coveway Sileer						
			Brownsville, TX 78521						
	PURPOSE	(a)	Category (See Categories listed at the top of th	nis schedu	ule) (b) Description			
	OF		Contributions/Donations Made By		,	Check if travel	outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Candidate/Officeholder/Political Co	ommitt	tee	Check if Austin	n, TX	, officeholder living expense	
						Donation			
	Complete ONLY if direct		Candidate/Officeholder name	Offi	ice soug	ht		Office held	
	expenditure to benefit C/OI	Н							
-									\neg

			EXPENDI	TURE CATEGOF	RIES FOR	BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment								Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 15/16 Rpt: 36/37		Adobbati, Ricardo M. (The Honorable) 00083458								
4	Date	5	Payee name								
	05/15/2023		Texas Center for the Judiciary								
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le					
	\$35.00		1210 San Antonio Stree	t							
			Austin, TX 78701								
8	PURPOSE	(a)	Category (See Categories liste	d at the top of this sch	edule)	(b) Description					
	OF		Fees		,	Check if travel	outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE							, officeholder living expense			
						CLE - SB6 S	em	inar			
9	Ocmplete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held										
	Date		Payee name								
	01/04/2023		Toddle Inn								
-	Amount (\$)		Payee address; City;	State [.]	Zip Co	le					
	\$47.90		1740								
			Central Blvd								
			Brownsville, TX 78520								
	PURPOSE	(a)	Category (See Categories liste	d at the top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Food/Beverage Expens					ide of Texas. Complete Schedule T.			
						Check if Austin, TX, officeholder living expense					
						Lunch with staff Organizational meeting					
						Organization	an	neeung			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder nam	e C	Office soug	lht	Office held				
⊨	Date		Davaa nama								
	04/07/2023		Payee name Valero Se40755								
	Amount (\$)		Payee address; City;		Zip Coo	le					
	\$6.49		705 S. Commerce Stree	et							
			Harlingen, TX 78550								
	PURPOSE	(a)	Category (See Categories liste	d at the top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.			
							1, TX	, officeholder living expense			
						Supplies					
	Complete ONLY if direct		Candidate/Officeholder nam	e C	Office sou	ht		Office held			
	expenditure to benefit C/OF	Н									