JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commission 00085753	on Filers)	2 Total pages f	ïled: 35
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER		Christine				USE ONLY
NAME		CHIISUIE			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	. 07/15/2023	
		Vasquez Horti	ick	00111/		
		vasquez nora				
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	206 E. Locust St.					
ADDRESS					Receipt #	Amount
	Can Antonia TV 70212					
Change of Address	San Antonio, TX 78212				Date Processed	•
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR F	IRST			MI	
TREASURER		Minnie				
NAME	10115.	viirine				
	NICKNAME L	AST			SUFFIX	
	A	Abrego-Sanch	ez			
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PLEASE)	APT /	SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	3711 River Falls		, , , ,		01	
ADDRESS						
(Residence or Business)						
. ,	San Antonio, TX 78259					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	EXTENSION			
TREASURER PHONE	(210) 862-1084					
FIIONE						
8 REPORT						
TYPE	January 15	30th day before	election R	unoff		ampaign treasurer
					appointment (off	ficeholder only)
	X July 15	8th day before		ceeded modified	Final Report (Att	tach C/OH-FR)
			Ie	porting inflic		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2023	TH	IROUGH	06/30/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimany		Other	
			rimary			
		∏G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	<u> </u>	1	12 OFFICE SOUGHT	(if known)	
	District Judge District 225 B	evar	[
		C/U				
		601	O PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us		Versi	ion V3.5.1.a18ea2ca

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 35

I

13 C / OH NAME	Vasquez Hortick, Chi	istine (The Honorable)	14 Filer ID	(Ethics Commission Filers)
	.		00085753	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or politica These expenditures may have been mad officeholders are required to report this	de without the candidate's or offic	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		I. IZED POLITICAL CONTRIBUTIONS(OT ES OF LOANS, OR CONTRIBUTIONS N		\$ 0.00
			0510400	\$ 43,900.30
EXPENDITURE TOTALS	· ·	PLEDGES, LOANS, OR GUARANTEES ZED POLITICAL EXPENDITURES	OF LOANS)	\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 9,440.33
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	\$ 40,951.44
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING L TING PERIOD	OANS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
			der penalty of perjury, that the ac includes all information required on Code.	
		The I	Honorable Christine Vasquez	Hortick
		S	ignature of Candidate or Officeho	lder
AFFIX NC)TARY STAMP / SEAL AB	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of	office.	
Signature of offi	icer administering oath	Printed name of officer administering	ng oath Title of office	er administering oath
Forms provided by Te	exas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				5 61 55
18 FILER NAM Vasquez I	/E Hortick, Christine (The Honorable)	19 Filer ID 00085753	(Ethics (Commission Filers)
	E SUBTOTALS SCHEDULE	L	SU	BTOTAL AMOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	43,900.30
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	9,440.33
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	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
			•	
1				

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 1/20 Rpt: 4/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/02/2023	Aguirre, Alex (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78256		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Self		N/A	
12 If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/03/2023	Ard, Tom		\$1,000.00
	Contributor address; City; State; Zip Code		•
	San Antonio, TX 78258		
Contributor's I	I Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	employer/law firm	Law firm of contributor's sp	pouse (if any)
Gene Tosca		N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/08/2023	Armstrong, Ron		\$1,000.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
Contributor's I	Principal Occupation	Contributor's Job Title	
Attorney		Civil Litigator	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
The Armstrong Firm, PLLC N/A			
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 2/20 Rpt: 5/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Ho	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/01/2023	Bage, Scott		\$1,000.00
	6 Contributor address; City; State; Zip Code		1
	Alamo Heights, TX 78209		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		President	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Scott M. Bag	je, P.C.	N/A	
12 If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/02/2023	Barkhurst & Hinojosa, P.C.		\$200.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78230		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (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 (\$)
03/08/2023	Bineham, William		\$500.00
	Contributor address; City; State; Zip Code		1
	Helotes, TX 78023		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Managing Partner	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
Bineham & C	Gillen, PLLC	N/A	
If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 3/20 Rpt: 6/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Hor	tick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
02/02/2023	Brown, Olga		\$150.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78209		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
Self		N/A	
12 If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/25/2023	Brzozowski, Bart (Mr.)		\$250.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78216	Γ	
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Self Employe	mployer/law firm	Law firm of contributor's sp Thompson Coe	oouse (if any)
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$
Date 01/25/2023	Full name of contributor out-of-state PAC (ID#: Brzozowski, Robin)	Amount of Contribution (\$) \$250.00
01/20/2020	Contributor address; City; State; Zip Code		
	New Braunfels, TX 78132		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Partner	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Thompson C	oe		
If contributor is	s a child, law firm of parent(s) (if any)		
Forme provided	hy Texas Ethics Commission www.ethic		Version V3 5 1 a18ea2ca

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 4/20 Rpt: 7/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Hor	tick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/08/2023	Canales, David		\$100.00
ľ	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78259		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
State District	Judge	State District Judge	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	ouse (if any)
State of Texa		N/A	
12 If contributor is	a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/02/2023	Collins, Savid		\$25.00
	San Antonio, TX 78209		
Contributor's D		Contributor's Job Title	
Attorney	rincipal Occupation	Self	
	mployer/law firm	Law firm of contributor's sp	ouse (if any)
N/A		N/A	
	a child, law firm of parent(s) (if any)	N1/A	
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/27/2023	Curl, Paul		\$500.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	mployer/law firm	Law firm of contributor's sp	ouse (if any)
Curl Stahl Geis, PC N/A			
If contributor is	a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 5/20 Rpt: 8/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Ho	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
02/13/2023	Daniels, Nancy (Mrs.)		\$25.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78217		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Retired		Retired	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
N/A		N/A	
12 If contributor	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/08/2023	Duke, Lisa		\$100.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78212		
Contributor's	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
Lisa Duke L	aw PLLC	N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/02/2023	Espinoza Law Firm, PLLC		\$1,000.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78216		
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)		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 6/20 Rpt: 9/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/08/2023	Foster, Stephen		\$200.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78256		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Attorney		Partner	
10 Contributor's	emplover/law firm	11 Law firm of contributor's sp	oouse (if anv)
Foster & Fos		N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
03/02/2023	Full name of contributor out-of-state PAC (ID#: Gonzales, John)	\$500.00
03/02/2023			\$500.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78230		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
self		N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/01/2023	Gonzalez, Charles		\$100.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78212		
Contributor's	Principal Occupation	Contributor's Job Title	
Attorney		Of Counsel	
Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
Ogletree De	akins, P. C.	N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 7/20 Rpt: 10/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Ho	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
01/26/2023	Gonzalez, Henry		\$500.00
	6 Contributor address; City; State; Zip Code		1
	San Antonio, TX 78216		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
Attorney		Shareholder	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
Gonzalez Cl	hiscano Angulo & Kasson, PC	N/A	
12 If contributor i	s a child, law firm of parent(s) (if any)	•	
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/26/2023	Gonzalez, Henry		\$100.00
	Contributor address; City; State; Zip Code		1
	San Antonio, TX 78216		
Contributor's	Principal Occupation	Contributor's Job Title	•
Attorney		Shareholder	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
Gonzalez Cl	hiscano Angulo & Kasson, PC	N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/27/2023	Guerra, R. Javier		\$250.00
	Contributor address; City; State; Zip Code		1
	San Antonio, TX 78209		
Contributor's I	Principal Occupation	Contributor's Job Title	
Attorney		Of Counsel	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
Sheehy, Wa	re, Pappas & Grubbs	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 8/20 Rpt: 11/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Ho	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/01/2023	Guerrero, Monica		\$500.00
	6 Contributor address; City; State; Zip Code		1
	Alamo Heights, TX 78209		
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		N/A	
12 If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/26/2023	Hajek III, Anton (Mr.)		\$100.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78220		
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		N/A	
If contributor is	s a child, law firm of parent(s) (if any)	1	
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/02/2023	Hall, Tom		\$250.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
Contributor's F	I Principal Occupation	Contributor's Job Title	I
Attorney		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sr	pouse (if any)
Self N/A			
If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 9/20 Rpt: 12/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Ho	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
01/26/2023	Herrera, Jorge (Mr.)		\$2,500.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78207		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
Attorney		President	
10 Contributor's e	emplover/law firm	11 Law firm of contributor's sp	oouse (if any)
Herrera Law		N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/02/2023	Higdon, Hardy, Zuflacht, LLP)	\$1,000.00
02,02,2020	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	San Antonio, TX 78230		
Contributor's R	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 (\$)
02/02/2023	Hill, Justin (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78216		
Contributor's I	I Principal Occupation	Contributor's Job Title	
Attorney		Owner	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if anv)
Hill Law Firm		N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 10/20 Rpt: 13/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Vasquez Hortick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/02/2023	Jefferson, Lamont		\$1,000.00
	6 Contributor address; City; State; Zip Code		1
	San Antonio, TX 78205		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	1
Attorney		Managing Member	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Jefferson Ca		N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/25/2023	Johnson, Vincent)	\$100.00
01/20/2020	Contributor address; City; State; Zip Code		+100.000
	Contributor address, City, State, Zip Code		
	Con Antonio TV 70212		
	San Antonio, TX 78212		
	Principal Occupation	Contributor's Job Title	
Law Profess		South Texas Distinguis	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
St. Mary's U	niversity	N/A	
If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/01/2023	Kanyusik, Bill (Mr.)		\$100.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78212		
Contributor's I	Principal Occupation	Contributor's Job Title	
Retired		Retired	
	employer/law firm		
Retired	Contributor's employer/law firm Law firm of contributor's sp Retired Retiired		
	c a abild low firm of parant(c) (if any)		
If contributor is a child, law firm of parent(s) (if any) Retired Retired			
Retired Retired			

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/20 Rpt: 14/35	
2 FILER NAME Vasquez Ho	rtick, Christine (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085753
4 Date 01/31/2023	 5 Full name of contributor out-of-state PAC (ID#: Klein , Sandra 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$100.00
	San Antonio, TX 78248		
8 Contributor's F Retired	Principal Occupation	 9 Contributor's Job Title Retired 	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	nouse (if any)
N/A		N/A	
12 If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/26/2023	Langley & Banack, Inc.		\$500.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78212		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's 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)		
Date 03/08/2023			Amount of Contribution (\$) \$1,000.00
San Antonio, TX 78212			
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor		Law firm of contributor's sp	ouse (if any)
If contributor is a child, law firm of parent(s) (if any)			
	by Tayas Ethics Commission	s state ty us	Varsian \/2 5 1 a186a2ca

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/20 Rpt: 15/35	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Ho	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
02/02/2023	Law Office of Shawn C. Brown, P.C		\$250.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
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 (\$)
02/07/2023	Leibowitz, David (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
Contributor's Principal Occupation Contributor's Job Title		Contributor's Job Title	
Attorney		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Self		N/A	
If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/02/2023	Lubel, Lance		\$2,500.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78212		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Managing Partner	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
Lubel Voyles LLP N/A			
If contributor is a child, law firm of parent(s) (if any)			
N/A		N/A	

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/20 Rpt: 16/35	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ortick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/22/2023	Maloney, Janice		\$2,500.00
	6 Contributor address; City; State; Zip Code		1
	San Antonio, TX 78229		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	1
Attorney		Attorney	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
	of Janice Maloney	N/A	
	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/09/2023	Maloney Jr., Pat		\$100.30
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
Contributor's	Principal Occupation	Contributor's Job Title	1
Attorney		Attorney	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
Law Offices	of Pat Maloney	N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/02/2023	Marck, Eugene		\$100.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78209		
Contributor's	Principal Occupation	Contributor's Job Title	
Retired		Retired	
	emplover/law firm	Law firm of contributor's sp	nouse (if any)
N/A			
	is a child law firm of parent(s) (if any)		
If contributor is a child, law firm of parent(s) (if any) N/A N/A			

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/20 Rpt: 17/35	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Ho	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/05/2023	Martinez, Diane		\$250.00
	6 Contributor address; City; State; Zip Code		1
	San Antonio, TX 78212		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Law Office o	f Diane Martinez	N/A	
12 If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/06/2023	McCall, Harold		\$2,500.00
	Contributor address; City; State; Zip Code		
	Helotes, TX 78023		
Contributor's	Principal Occupation	Contributor's Job Title	
Attorney		Partner	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
Wayne Wrig	ht, LLP	N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/28/2023	Nava, Alex		\$500.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78230		
Contributor's	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Ang PLLC		N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A N/A			

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/20 Rpt: 18/35			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Vasquez Ho	rtick, Christine (The Honorable)		00085753		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)		
03/08/2023	Ortiz, Miguel (Mr.)		\$750.00		
	6 Contributor address; City; State; Zip Code		1		
	San Antonio, TX 78216				
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)		
Ortiz Law Fir	m	N/A			
12 If contributor is	s a child, law firm of parent(s) (if any)				
N/A		N/A			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
03/02/2023	Palaez Law Firm, PLLC		\$500.00		
	Contributor address; City; State; Zip Code				
	San Antonio, TX 78212				
Contributor's F	l Principal Occupation	Contributor's Job Title			
Contributor's employer/law firm Law firm of contributor's s		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 (\$)		
01/25/2023	Poling, Mark		\$250.00		
	Contributor address; City; State; Zip Code				
	San Antonio, TX 78249				
Contributor's F	I Principal Occupation	Contributor's Job Title			
Attorney		Attorney			
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)		
Polling Law, LLC N/A					
_	s a child, law firm of parent(s) (if any)				
N/A N/A					

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/20 Rpt: 19/35	
2 FILER NAME Vasquez Hor	2 FILER NAME Vasquez Hortick, Christine (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085753
· · ·	 5 Full name of contributor out-of-state PAC (ID#: Poncio, Adam (Mr.) 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$500.00
	San Antonio, TX 78229		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	ouse (if any)
Poncio Law (Offices, P.C.	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date 03/08/2023			Amount of Contribution (\$) \$100.00
San Antonio, TX 78201 Contributor's Principal Occupation Contributor's Job Title			
Judge		Judge	
Contributor's e State of Texa	employer/law firm as	Law firm of contributor's sp N/A	ouse (if any)
If contributor is N/A	s a child, law firm of parent(s) (if any)	N/A	
Date 02/02/2023	Full name of contributor out-of-state PAC (ID#:_ Reynaldo Diaz, Jr. PC Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$1,000.00
	San Antonio, TX 78212		
Contributor's Principal Occupation Contributor's Job Title			
Contributor's employer/law firm Law firm of contributor's		ouse (if any)	
If contributor is 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: 17/20 Rpt: 20/35	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ortick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/07/2023	Rodriguez, Fidel		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Rodriguez L		N/A	
	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/02/2023	Rossi, Art	/	\$250.00
01,01,010	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	San Antonio, TX 78209		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
N/A		N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/03/2023	Schweitzer, Sharon)	\$50.00
02/00/2020			
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78247		
Contributor's	Principal Occupation	Contributor's Job Title	
Retired		Retired	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
N/A		N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A N/A			

The Instruction Gui	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/20 Rpt: 21/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Hortick, Chris	tine (The Honorable)		00085753
4 Date 5 Full nar	ne of contributor 🛛 🗌 out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)
	itzer, Sharon		\$50.00
	utor address; City; State; Zip Code		
San Ar	ntonio, TX 78247		
8 Contributor's Principal Oc	cupation	9 Contributor's Job Title	
Retired		Retired	
10 Contributor's employer/lav	v firm	11 Law firm of contributor's sp	oouse (if any)
N/A		N/A	(),
12 If contributor is a child, lav	v firm of parent(s) (if anv)		
N/A		N/A	
Date Full nar	ne of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
03/08/2023 Sciano	, Daniel (Mrs.)	/	\$5,000.00
	utor address; City; State; Zip Code		
San Ar	ntonio, TX 78216		
Contributor's Principal Oc	cupation	Contributor's Job Title	
Attorney		CEO	
Contributor's employer/lav	v firm	Law firm of contributor's sp	oouse (if anv)
Tinsman & Sciano Inc.		N/A	
If contributor is a child, lav	v firm of parent(s) (if any)		
N/A		N/A	
	ne of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
02/02/2023 Taylor,			\$250.00
Contrib	utor address; City; State; Zip Code		
San Ar	ntonio, TX 78216		
Contributor's Principal Oc	cupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		Law firm of contributor's sp	oouse (if any)
Self N/A			
If contributor is a child, lav	v firm of parent(s) (if any)		
N/A N/A			

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 19/20 Rpt: 22/35
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Vasquez Ho	rtick, Christine (The Honorable)		00085753
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/31/2023	Tiller, Misty (Mrs.)		\$100.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78213		
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		N/A	
12 If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/15/2023	Tome Crosley Law Firm, P.C.		\$2,500.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78218		
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 (\$)
03/02/2023	Toscano, Andrew (Mr.)		\$5,000.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78201		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Gene Toscano, Inc. N/A			
If contributor is a child, law firm of parent(s) (if any)			
N/A N/A			

	The Instru	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A(J)1: Sch: 20/20 Rpt: 23/35
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Vasquez Ho	rtick, Christine (The Honorable)		00085753
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of Contribution (\$)
	01/30/2023	Valdez and Trevino		\$500.0
		6 Contributor address; City; State; Zip Code		
		San Antonio, TX 78230		<u> </u>
8	Contributor's F	Principal Occupation	9 Contributor's Job Title	
		employer/law firm	11 Law firm of contributor's sp	pouse (ii any)
12	If contributor is	s a child, 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 Poling Expense Gft/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:		3 Filer ID (Ethics Commission Filers)	
1	Sch: 1/12 Rpt: 24/35	Vasquez Hortick, Christine (The Honorable)	00085753	
4	Date 01/25/2023	Payee name Anedot		
_				
6	Amount (\$) \$35.20	Payee address; City; State; Zip Code 1340 Poydras, #1770		
		New Orleans, LA 70112		
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense 2	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	01/26/2023	Anedot		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$129.20	1340 Poydras, #1770 New Orleans, LA 70112		
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Cessing fees.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	01/31/2023	Anedot		
	Amount (\$) \$8.60	Payee address;City;State;ZipCode1340 Poydras, #1770		
		New Orleans, LA 70112		
	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense Iccessing Fees	
	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/Political Con Credit Card Payment			Fees Offi Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prir mittee Legal Services Sal	Fees Office Overhead/Rental Expense Transportatio Food/Beverage Expense Polling Expense Travel in Dist Gift/Awards/Memorials Expense Printing Expense Travel Out of					
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 2/12 Rpt: 25/35		Vasquez Hortick, Christine (The Honorable	e)			00085753		
4	Date 01/31/2023		Payee name Anedot						
6	Amount (\$) \$8.60 7 Payee address; City; State; Zip Code 1340 Poydras, #1770 New Orleans, LA 70112								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Donation Processing Fees						officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	it		Office held		
	Date		Payee name						
	02/01/2023		Anedot						
	Amount (\$) \$8.60	I	Payee address; City; State; Zi 1340 Poydras, #1770	ip Code	2				
			New Orleans, LA 70112						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule FeeS	•) (1		, TX,	de of Texas. Complete Schedule T. , officeholder living expense SSING FeeS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	ıt		Office held		
	Date		Payee name						
	02/02/2023		Anedot						
	Amount (\$) \$132.80		Payee address; City; State; Zi 1340 Poydras, #1770	ip Code	2				
			New Orleans, LA 70112						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Fees	_{e)} (I		, TX,	de of Texas. Complete Schedule T. officeholder living expense SSING FeeS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	nt		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 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:		3 Filer ID (Ethics Commission Filers)					
-	Sch: 3/12 Rpt: 26/35	Vasquez Hortick, Christine (The Honorable) 3 Filer ID (Emics Commission 00085753						
4	Date 02/03/2023	Payee name Anedot						
6 Amount (\$) 7 Payee address; City; State; Zip Code \$2.30 \$2.30 1340 Poydras, #1770 New Orleans, LA 70112								
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF EXPENDITURE Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation Processing Fees								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	02/05/2023	Anedot						
	Amount (\$) \$10.30	Payee address;City;State;Zip Code1340 Poydras, #1770						
	PURPOSE	New Orleans, LA 70112						
	OF	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense DCESSING FEES					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	02/09/2023	Anedot						
	Amount (\$) \$100.30	Payee address;City;State;Zip Code1340 Poydras, #1770						
		New Orleans, LA 70112						
	PURPOSE OF EXPENDITURE	Check if Austir	outside of Texas. Complete Schedule T. h, TX, officeholder living expense DCESSING FEES					
	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	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense mmittee 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: 4/12 Rpt: 27/35	Vasquez Hortick, Christine (The Honorable)	00085753				
4	Date 02/13/2023	Payee name Anedot					
6 Amount (\$) \$1.30 7 Payee address; City; State; Zip Code 1340 Poydras, #1770 New Orleans, LA 70112							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Donation Processing Fees							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/22/2023	Anedot					
	Amount (\$) \$100.30	Payee address; City; State; Zip Code 1340 Poydras, #1770					
		New Orleans, LA 70112					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense CeSSING FeeS				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/27/2023	Anedot					
	Amount (\$) \$20.30	Payee address;City;State;ZipCode1340 Poydras, #1770					
		New Orleans, LA 70112					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense CeSSing FeeS				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

		EXPENDITURE CATEGORI	ES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F	oan Repayment/Reimbursemen office Overhead/Rental Expense oolling Expense Salaries/Wages/Contract Labor w to complete this form.			
1	Total pages Schedule F1:		•	3 Filer ID (Ethics Commission Filers)		
-	Sch: 5/12 Rpt: 28/35	asquez Hortick, Christine (The Honoral	ole)	00085753		
4	Date 02/28/2023	ayee name nedot				
6	Amount (\$) \$20.30	ayee address; City; State; 340 Poydras, #1770 ew Orleans, LA 70112	Zip Code			
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Donation Processing Fees						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Off	ice sought	Office held		
	Date	ayee name				
	03/01/2023	nedot				
	Amount (\$) \$60.60	ayee address; City; State; 340 Poydras, #1770	Zip Code			
		ew Orleans, LA 70112				
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedu	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Processing Fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Off	ice sought	Office held		
	Date	ayee name				
	03/02/2023	nedot				
	Amount (\$) \$340.90	ayee address; City; State; 340 Poydras, #1770	Zip Code			
		ew Orleans, LA 70112	i			
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedu	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense rocessing Fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Off	ice 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 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:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)					
-	Sch: 6/12 Rpt: 29/35	Vasquez Hortick, Christine (The Honorable)	00085753					
4	Date 03/06/2023	Payee name Anedot						
6	Amount (\$) 7 Payee address; City; State; Zip Code \$100.30 1340 Poydras, #1770 New Orleans, LA 70112							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Donation Processing Fees								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/07/2023	Anedot						
	Amount (\$) \$40.30	Payee address; City; State; Zip Code 1340 Poydras, #1770						
	PURPOSE	New Orleans, LA 70112 a) Category (See Categories listed at the top of this schedule) (b) Description						
	utside of Texas. Complete Schedule T. TX, officeholder living expense cessing Fees							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/08/2023	Anedot						
	Amount (\$) \$371.00	Payee address;City;State;Zip Code1340 Poydras, #1770						
		New Orleans, LA 70112						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense cessing Fees					
	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	Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guid	C F pense F S	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Rela Travel in District Travel Out of District OTHER (enter a category not liste	
1	Total pages Cabadula F1			e explains no			12	Filer ID (Ethics Com	nission Filers)
1	Total pages Schedule F1: Sch: 7/12 Rpt: 30/35		ez Hortick, Christine (T	he Honoral	hle)		3	00085753	nission Fliers)
1	Date		-		SIC)			00000100	
4	03/09/2023	Payee Anedo							
6	Amount (\$) \$4.30	Payee1340 I	address; City; Poydras, #1770	State;	Zip Cod	e			
		New C	Prleans, LA 70112						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Donation Processing Fees									
9	Complete ONLY if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Off	ice soug	ht		Office held	
	Date	Payee	name						
	02/03/2023	Backy	ard on Broadway						
	Amount (\$)	Payee	address; City;	State;	Zip Cod	e			
	\$146.01		Broadway ntonio, TX 78215						
	PURPOSE OF EXPENDITURE	a) Catego	ry (See Categories listed at the t Beverage Expense	op of this schedu	ule) (ide of Texas. Complete Schedule T , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Off	ice soug	ht		Office held	
	Date	Payee	name						
	03/06/2023	Disco	int Mugs						
	Amount (\$) \$425.55	-	address; City; NW 115th Ave	State;	Zip Cod	e			
			FL 33178						
	PURPOSE OF EXPENDITURE		ry (See Categories listed at the t ising Expense	op of this sched	ule) (ide of Texas. Complete Schedule T , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Off	ice soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ttee Legal Ser	erage Expense ds/Memorials Expense vices	Office O Polling E Printing Salaries	verhea Expense Expense /Wages	e /Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense
_		a =	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1: Sch: 8/12 Rpt: 31/35		P FILER NAME 3 Filer ID (Ethics Commit Vasquez Hortick, Christine (The Honorable) 00085753						(Ethics Commission Filers)	
4	Date	5 Pa	ayee name					•		
	02/10/2023	G	uillermo's							
6 Amount (\$) 7 Payee address; City; State; Zip Code \$144.08 618 McCullough										
		Sa	an Antonio, TX 7	8215						
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 Food /Beverage Expense Food for event										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		ndidate/Officeholde	r name	Office so	ught			Office he	łd
	Date	Pa	ayee name							
	01/03/2023	н	EB							
	Amount (\$)	Pa	ayee address;	City; S	State; Zip C	code				
	\$84.14		99 E. Basse an Antonio, TX 7	8209						
	PURPOSE OF EXPENDITURE	(a) Cá	ategory _{(See Catego} bod/Beverage Ex	ies listed at the top of t	nis schedule)	(b)			de of Texas. Comp officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholde	r name	Office so	ught			Office he	ld
	Date	Pa	ayee name							
	04/07/2023		EB							
-	Amount (\$)	Pa	ayee address;	City; S	State; Zip C	ode				
	\$53.04		99 E. Basse							
		Sa	an Antonio, TX 7	8209						
	PURPOSE OF EXPENDITURE		ategory _{(See Catego} o ood/Beverage Ex		nis schedule)	(b)		, TX,	de of Texas. Comp officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholde	r name	Office so	ught			Office he	ld

	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 Imittee Legal Services The Instruction Guide explain	Office Ov Polling Ex Printing E Salaries/V	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_	Tatal same Oshadula Et.		•	5 11000 10 00	Jubi			
1	Total pages Schedule F1: Sch: 9/12 Rpt: 32/35		HLER NAME Vasquez Hortick, Christine (The Hone	orable)			3	Filer ID (Ethics Commission Filers) 00085753
4	Date	5	Payee name				•	
	01/23/2023		Mailchimp					
6	Amount (\$) \$286.04							
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description		
	OF OF EXPENDITURE Advertising Expense						officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	02/23/2023		Mailchimp					
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode			
	\$373.10		512 Means St. Atlanta, TX 30318					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Advertising Expense	chedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense
						website/emai	il ho	osting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	03/23/2023		Mailchimp					
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode			
	\$373.10		512 Means St.					
			Atlanta, GA 30318		-			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Advertising Expense	chedule)	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense ING
	Complete ONLY if direct expenditure to benefit C/O		andidate/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		-	Fees Office Overhead/Rental Expense Transportation Food/Beverage Expense Polling Expense Travel in Dist Gift/Awards/Memorials Expense Printing Expense Travel Out of					
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 10/12 Rpt: 33/35		/asquez Hortick, Christine (The Hono	orable)			00085753		
4	Date 04/24/2023		Payee name Mailchimp						
6	Amount (\$) 7 Payee address; City; State; Zip Code \$373.10 512 Means St. Atlanta, GA 30318								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense web/email hosting							, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught		Office held		
	Date	I	Payee name						
	05/23/2023	1	Mailchimp						
	Amount (\$) \$373.10		Payee address; City; State 512 Means St.	e; Zip Co	ode				
		,	Atlanta, GA 30318						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sc Advertising Expense	hedule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense NG		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught		Office held		
	Date	I	Payee name						
	01/03/2023		Panaderia Jimenez						
	Amount (\$) \$16.92		Payee address; City; State L846 Fredericksburg Rd.	e; Zip Co	ode				
			San Antonio, TX 78201		1				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sc Food/Beverage Expense	hedule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught		Office held		

			EXPENDITURE	CATEGOF	RIES FOR	BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committ Credit Card Payment			ee Legal Services	Fees Office Overhead/Rental Expense Transportation Equipment Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District					
1	Total pages Schedule F1:	2 FIL	ER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 11/12 Rpt: 34/35		squez Hortick, Christine (T	he Honor	able)			00085753	
4	Date 01/03/2023		ree name get						
6	Amount (\$) \$53.48								
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 Cups, plates, utensils, napkins							officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Office sou	ht		Office held	
	Date	Pay	vee name						
	04/03/2023	Tai	get						
	Amount (\$) \$41.52		ree address; City; 22 Fredericksburg Rd	State;	Zip Co	le			
			n Antonio, TX 78201						
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the od/Beverage Expense	top of this sche	edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Office sou	ht		Office held	
	Date	Pay	vee name						
	04/18/2023	Vis	taprint						
	Amount (\$) \$201.65	-	ree address; City;) Hayden Ave.	State;	Zip Coo	le			
		Lex	kington, MA 02421						
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the vertising Expense	top of this sche	edule)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Dffice sou	ht		Office held	

	Advertising Expense Accounting/Banking Consulting Expense	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
	Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 12/12 Rpt: 35/35	Vasquez Hortick, Christine (The Honorable)	00085753
4	Date 03/06/2023	5 Payee name Viva Politics	
6	Amount (\$) \$5,000.00	 Payee address; City; State; Zip Code 1850 Fredericksburg Rd. 	
		San Antonio, TX 78201	
8	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense =ee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held