FORM CEC COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The CEC Instruction Guide explains how to complete this form. 48 00015946 3 COMMITTEE NAME **OFFICE USE ONLY** Nueces County Democratic Executive Committee (CEC) Date Received **ELECTRONICALLY FILED** 07/17/2023 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 6102 Ayers Ste. 107 Date Hand-delivered or Date Postmarked Change of Address Corpus Christi, TX 78415 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Stephanie NAME NICKNAME LAST **SUFFIX** Guerrero Saenz STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6022 Sweet Gum STREET **ADDRESS** (Residence or Business) Corpus Christi, TX 78415 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 6022 Sweet Gum MAILING **ADDRESS** Corpus Christi, TX 78415 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (361) 249-3041 PHONE REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2023 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Nueces County Democ	ratic Executive Com	mittee (CEC)	0001594	6
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ZED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	1,887.00
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	39,517.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	22,109.63
OUTSTANDING LOAN TOTALS		AL AMOUNT OF ALL OUTSTANDING LOANS AS OF T IE REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u>'</u>			
		I swear, or affirm, under penalty of petrue and correct and includes all inforrunder Title 15, Election Code.		
		Mrs. Stephanie	Guerrero S	aenz
		Signature of Car		
AFFIX NOTARY	STAMP / SEAL ABOV			
Sworn to and subscribed	before me, by the said	, th	nis the	day
of	_, 20, to certi	fy which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of off	ficer administering oath

SUBTOTALS - CEC

FORM CEC COVER SHEET PG 3 3 of 48

				3 01 48					
17 COMMITTEE	NAME	18 Filer ID	(Ethics Con	nmission Filers)					
Nueces Cou	unty Democratic Executive Committee (CEC)	00015946							
	9 SCHEDULE SUBTOTALS NAME OF SCHEDULE								
1. X S	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS								
2. X S	\$	0.00							
3. X	\$	0.00							
4. X S	\$	0.00							
5. X S	\$	0.00							
6. X	\$	0.00							
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$						
8. X S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00					
9. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	24,886.44					
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$						

2 FIL Nu 4 Da 03 8 Pri Da Pri Un	LER NAME LIECES COUI LIE LIE LIE LIE LIE LIE LIE LIE LIE LI	ction Guide explains how to complete this form ty Democratic Executive Committee (CEC) 5 Full name of contributor	orm.	 1 Total pages Schedule A1: Sch: 1/27 Rpt: 4/48 3 Filer ID (Ethics Commission 00015946 7 Amount of Contribution (\$) 	n Filers) \$600.00
Nu 4 Da 03 8 Pri Da Pri Un Da	ueces Cour ate 8/01/2023 incipal occur	5 Full name of contributor out-of-state PAC (ID#:_Abel Herrero Campaign 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78403 Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		00015946 7 Amount of Contribution (\$)	
4 Da 03 8 Pri Da 03	tte 8/01/2023 incipal occu	5 Full name of contributor out-of-state PAC (ID#:_Abel Herrero Campaign 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78403 Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		7 Amount of Contribution (\$)	\$600.00
Da 03 Pri Ur	nte	pation / Job title (See Instructions) Full name of contributor ut-of-state PAC (ID#:_	9 Employer (See Instructions)		
Da 03 Pri Ur	nte	Full name of contributor	9 Employer (See Instructions))	
Pri Un		— ••••••• =) [
Un Da				Amount of Contribution (\$)	\$300.00
Un Da	incinal occu	Kingsville , TX 78363 pation / Job title (See Instructions)	Employer (See Instructions)	.	
	nemployed		Unemployed)	
	ate 8/19/2023	Full name of contributor out-of-state PAC (ID#: Anderson, Marshall Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$150.00
		Corpus Christi, TX 78403			
	incipal occu nemployed	pation / Job title (See Instructions)	Employer (See Instructions) Unemployed		
Da 03	ate 8/25/2023	Full name of contributor out-of-state PAC (ID#:_Ayala, Adrian Contributor address; City; State; Zip Code Corpus Christi, TX 78413		Amount of Contribution (\$)	\$25.00
	incipal occu ectrician	pation / Job title (See Instructions)	Employer (See Instructions) Scott Electric		
Da 03	ate 8/10/2023	Full name of contributor out-of-state PAC (ID#:_ Banales, Manuel & Margaret Contributor address; City; State; Zip Code Corpus Christi, TX 78410		Amount of Contribution (\$)	\$225.00
Pri Re	incipal occu	pation / Job title (See Instructions)	Employer (See Instructions) None)	

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/27 Rpt: 5/48	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)			00015946	
4	Date 03/25/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$75.00
Ω	Principal occu	Corpus Christi, TX 78415 pation / Job title (See Instructions)	9 Employer (See Instructions	e)		
0	Insurance A		Self Employed	3)		
	Date 03/25/2023	Full name of contributor out-of-state PAC (ID#:_ Barrientos, Gonzalo J. Contributor address; City; State; Zip Code Corpus Christi, TX 78411)		Amount of Contribution (\$)	\$145.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney		Hilliard Martinez Gonzal		LLP	
	Date 03/06/2023	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$300.00
		Corpus Christi, TX 78418-7178				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Wood Boykin & Wolter F			
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_ Benavides, Joe (The Honorable) Contributor address; City; State; Zip Code Corpus Christi, TX 78404)		Amount of Contribution (\$)	\$300.00
		pation / Job title (See Instructions) nty JP Pct.1/Place 1	Employer (See Instructions State of Texas	s)		
	Date 03/24/2023	Full name of contributor out-of-state PAC (ID#:_ Benavidez, Gina (The Honorable) Contributor address; City; State; Zip Code Corpus Christi, TX 78413			Amount of Contribution (\$)	\$400.00
	Principal occu Judge	pation / Job title (See Instructions)	Employer (See Instructions 13th Court of Appeals	s)		

МО	NET	ARY POLITICAL COI	NTRIBUTIONS		SCHEDUL	E A1
The I	Instruc	etion Guide explains how to	complete this form.	1	Total pages Schedule A1: Sch: 3/27 Rpt: 6/48	
2 FILER Nuece		nty Democratic Executive Commit	ttee (CEC)	3	Filer ID (Ethics Commission 00015946	n Filers)
4 Date 03/25/	5/2023	<u> </u>	out-of-state PAC (ID#:) ble)	7	Amount of Contribution (\$)	\$60.00
		Corpus Christi, TX 78413				
8 Princip Justic		pation / Job title (See Instructions)	9 Employer (See Instruction State of Texas	ons)		
Date 03/25/	5/2023	Full name of contributor Grant	out-of-state PAC (ID#:) Zip Code		Amount of Contribution (\$)	\$96.00
Datasia		Corpus Christi, TX 78418	Frankrije (Carlo Instructi			
Couns		pation / Job title (See Instructions)	Employer (See Instruction Gregory Portland ISD			
Date 03/16/	5/2023	Full name of contributor			Amount of Contribution (\$)	\$500.00
		Corpus Christi, TX 78401	<u> </u>			
Princip	oal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
Date 04/06/	5/2023	Full name of contributor Grant	out-of-state PAC (ID#:) Zip Code		Amount of Contribution (\$)	\$30.00
		Corpus Christi, TX 78417				
		pation / Job title (See Instructions) SS Owner	Employer (See Instruction Self-employed	ons)		
Date 02/23/	3/2023	Campos, Sylvia Contributor address; City; State; 2	out-of-state PAC (ID#:) Zip Code		Amount of Contribution (\$)	\$75.00
	nal occup cil Mem	pation / Job title (See Instructions)	Employer (See Instruction City of Corpus Christi			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE /	41
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/27 Rpt: 7/48	
2	FILER NAME Nueces Cou	inty Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission File 00015946	ers)
4	Date 03/25/2023	5 Full name of contributor		7	Amount of Contribution (\$)	150.00
_	Deinsinal	Corpus Christi, TX 78405	lo Familiana (Octobrationalismo	_		
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions Self	5)		
	Date 03/12/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,0	00.00
	Principal occu	Corpus Christi, TX 78412 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Real Estate	Broker	Self Employed			
	Date 03/25/2023	Full name of contributor out-of-state PAC (ID#:_ Clower, George Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78463				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions None	5)		
	Date 04/25/2023	Full name of contributor out-of-state PAC (ID#:_ Clower, George Contributor address; City; State; Zip Code Corpus Christi, TX 78463			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions None	<u> </u>		
	Date 05/25/2023	Full name of contributor out-of-state PAC (ID#:_ Clower, George Contributor address; City; State; Zip Code Corpus Christi, TX 78463			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions None	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/27 Rpt: 8/48	
2	FILER NAME Nueces Cou	nty Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission 00015946	n Filers)
4	Date 06/25/2023	 5 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78463				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions None)		
	Date 02/28/2023	Full name of contributor out-of-state PAC (ID#:_ Coastal Bend Texas Democratic Women Contributor address; City; State; Zip Code Corpus Christi, TX 78468)		Amount of Contribution (\$)	\$600.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/23/2023	Full name of contributor out-of-state PAC (ID#:_ Contreras Garza, Dori (The Honorable) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$333.00
		Corpus Christi, TX 78411				
	Principal occu Judge	pation / Job title (See Instructions)	Employer (See Instructions 13th Court of Appeals)		
	Date 03/26/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu Not employe	Corpus Christi , TX 78414 pation / Job title (See Instructions)	Employer (See Instructions)		
_	Date 03/06/2023	Full name of contributor out-of-state PAC (ID#:_ Duron, Carmen Contributor address; City; State; Zip Code Corpus Christi, TX 78405			Amount of Contribution (\$)	\$75.00
	Principal occu Nurse	pation / Job title (See Instructions)	Employer (See Instructions Retired)		

	MONET	Ά	RY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	cti	on Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/27 Rpt: 9/48	
2	FILER NAME		/ Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission 00015946	n Filers)
4	Date	_	Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	03/25/2023		Eastwood, Sandra	·		(,,	\$275.00
		6	Contributor address; City; State; Zip Code		1		
			Corpus Christi, TX 78411				
8	Principal occu Attorney	pa	tion / Job title (See Instructions)	Employer (See Instructions Self Employed	5)		
	Date	Γ	Full name of contributor uut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	03/25/2023		Estrada, Laura				\$25.00
			Contributor address; City; State; Zip Code				
			Corpus Christi , TX 78412				
		ıpa	tion / Job title (See Instructions)	Employer (See Instructions	s)		
	Teacher			Miller H.S.			
	Date		Full name of contributor uut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	03/25/2023	ļ	Flores, Rene				\$25.00
			Contributor address; City; State; Zip Code Corpus Christi, TX 78416				
	Principal occu	l ıpa	tion / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	attorney			self			
	Date	Γ	Full name of contributor uut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	04/25/2023		Flores, Rene				\$25.00
			Contributor address; City; State; Zip Code				
			Corpus Christi, TX 78416				
	Principal occu	ıpa [.]	tion / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	attorney			self			
	Date		Full name of contributor ut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	05/25/2023		Flores, Rene				\$25.00
			Contributor address; City; State; Zip Code				
			Corpus Christi, TX 78416				
		ıpa	tion / Job title (See Instructions)	Employer (See Instructions	s)		
	attorney			self			

	MONEI	ARY POLITICAL CONTRIBUTION	N	5		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete this f	orn	m.	1	Total pages Schedule A1: Sch: 7/27 Rpt: 10/48	
2	FILER NAME				3	Filer ID (Ethics Commission	r Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)				00015946	
4	Date 06/25/2023	 Full name of contributor out-of-state PAC (ID#:_ Flores, Rene Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78416					
8	Principal occu attorney	pation / Job title (See Instructions)	9	Employer (See Instructions self	i)		
	Date 03/16/2023	Full name of contributor				Amount of Contribution (\$)	\$500.00
		Corpus Christi, TX 78401					
	Principal occu judge	pation / Job title (See Instructions)		Employer (See Instructions county court	i)		
	Date 03/25/2023	Full name of contributor				Amount of Contribution (\$)	\$88.00
		Corpus Christi, TX 78412					
	Principal occu Student	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/20/2023	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Anna Elisabet Contributor address; City; State; Zip Code Corpus Christi, TX 78411				Amount of Contribution (\$)	\$150.00
	Principal occu Judge	oation / Job title (See Instructions)		Employer (See Instructions Nueces County)		
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_Gracia, Jennifer Contributor address; City; State; Zip Code Corpus Christi, TX 78415)		Amount of Contribution (\$)	\$75.00
	Principal occu Home Health	pation / Job title (See Instructions) Provider		Employer (See Instructions Bee First Home Health I		vider	
			•				

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 8/27 Rpt: 11/48	
2	FILER NAME Nueces Cou	nty Democratic Executive Committee (CEC)			3	Filer ID (Ethics Commission 00015946	Filers)
4	Date 03/09/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$75.00
8	Dringinal occu	Corpus Christi, TX 78466 pation / Job title (See Instructions)	a	Employer (See Instructions			
0	lawyer	pation / Job title (See Instituctions)	9	Self	·)		
	Date 01/02/2023	Full name of contributor out-of-state PAC (ID#:_ Guerrero Saenz, Stephanie Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78415					
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Corpus Christi iSD	s)		
	Date 02/02/2023	Full name of contributor out-of-state PAC (ID#:_ Guerrero Saenz, Stephanie Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78415					
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Corpus Christi iSD	s)		
	Date 03/02/2023	Full name of contributor out-of-state PAC (ID#:_ Guerrero Saenz, Stephanie Contributor address; City; State; Zip Code Corpus Christi, TX 78415				Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Corpus Christi iSD	<u>. </u>		
	Date 04/02/2023	Full name of contributor out-of-state PAC (ID#:_ Guerrero Saenz, Stephanie Contributor address; City; State; Zip Code Corpus Christi, TX 78415)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Corpus Christi iSD	5)		

	MONEI	ARY POLITICAL CONTRIBUTION	ON	15		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 9/27 Rpt: 12/48
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)				00015946
4	Date 05/02/2023	 Full name of contributor)	7	Amount of Contribution (\$) \$25.00
•	Dringing occur	Corpus Christi, TX 78415	10	Employer (See Instructional		
8	Teacher	pation / Job title (See Instructions)	9	Employer (See Instructions Corpus Christi iSD	5)	
	Date 06/04/2023	Full name of contributor out-of-state PAC (ID# Guerrero Saenz, Stephanie Contributor address; City; State; Zip Code	<u> </u>)		Amount of Contribution (\$) \$25.00
		Corpus Christi, TX 78415				
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Corpus Christi iSD	()	
	Date 06/18/2023	Full name of contributor	<u> </u>)		Amount of Contribution (\$) \$100.00
		Corpus Christi, TX 78404				
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions McGKbben, Martinez, H		vis and Wood
	Date 05/30/2023	Full name of contributor out-of-state PAC (ID# Hernandez , Jacob Contributor address; City; State; Zip Code San Antonio, TX 78254	:			Amount of Contribution (\$) \$7.00
		oation / Job title (See Instructions) ommunications Specialist		Employer (See Instructions The Great Northwest Co		munity Improvement Association
	Date 06/15/2023	Full name of contributor out-of-state PAC (ID# Hernandez, Lisa Contributor address; City; State; Zip Code Corpus Christi, TX 78407	:)		Amount of Contribution (\$) \$10.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u>	

MONE	TARY POLITICAL CONTRIBUT	ΓIONS	SCHEDULE	A1
The Instru	uction Guide explains how to complete th	is form.	1 Total pages Schedule A1: Sch: 10/27 Rpt: 13/48	
2 FILER NAMI	E ounty Democratic Executive Committee (CEC)		3 Filer ID (Ethics Commission Fi 00015946	lers)
4 Date 01/30/2023	5 Full name of contributor out-of-state PAC (7 Amount of Contribution (\$)	\$20.00
	Corpus Christi, TX 78407			
8 Principal occ Teacher	cupation / Job title (See Instructions)	9 Employer (See Instructions) Retired)	
Date 02/15/2023	Contributor address; City; State; Zip Code	D#:)	Amount of Contribution (\$)	\$10.00
Principal occ	Corpus Christi, TX 78407 cupation / Job title (See Instructions)	Employer (See Instructions)	
Teacher		Retired		
Date 03/15/2023	Full name of contributor out-of-state PAC (Hernandez, Lisa Contributor address; City; State; Zip Code	ID#:)	Amount of Contribution (\$)	\$10.00
	Corpus Christi, TX 78407			
Principal occ Teacher	cupation / Job title (See Instructions)	Employer (See Instructions Retired		
Date 04/15/2023	Contributor address; City; State; Zip Code	ID#:)	Amount of Contribution (\$)	\$10.00
Principal occ	Corpus Christi, TX 78407 cupation / Job title (See Instructions)	Employer (See Instructions)	
Teacher		Retired		
Date 05/15/2023	Full name of contributor out-of-state PAC (Hernandez, Lisa Contributor address; City; State; Zip Code Corpus Christi, TX 78407	ID#:)	Amount of Contribution (\$)	\$10.00
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	

	MONEI	MONETARY POLITICAL CONTRIBUTIONS				E A1
	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Sch Sch: 11/27 Rp		
2	FILER NAME			3 Filer ID (Ethic	s Commissio	n Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)		00015946		
4	Date 06/15/2023	 Full name of contributor out-of-state PAC (ID#:_ Hernandez, Lisa Contributor address; City; State; Zip Code 		7 Amount of Cont	ribution (\$)	\$10.00
		Corpus Christi, TX 78407				
8	Principal occu Teacher	pation / Job title (See Instructions)	9 Employer (See Instructions Retired)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Cont	ribution (\$)	
	02/09/2023	Hinojosa, Juan (Sen.)				\$1,500.00
		Contributor address; City; State; Zip Code				
		Edinburg, TX 78539				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	State Senator		State of Texas			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Cont	ribution (\$)	
	01/07/2023	Huerta, Carlos				\$12.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78412				
		pation / Job title (See Instructions)	Employer (See Instructions			
	Educator		Texas A&M University C	Corpus Christi		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Cont	ribution (\$)	
	02/07/2023	Huerta, Carlos Contributor address; City; State; Zip Code				\$12.00
		Corpus Christi, TX 78412				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Educator		Texas A&M University C	Corpus Christi		
	Date	Full name of contributor ut-of-state PAC (ID#:_)	Amount of Cont	ribution (\$)	
	03/07/2023	Huerta, Carlos				\$12.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78412				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Educator		Texas A&M University C	Corpus Christi		

	MONEI	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 12/27 Rpt: 15/48
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)		00015946
4	Date 04/07/2023	 Full name of contributor out-of-state PAC (ID#: Huerta, Carlos Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$12.00
•	Dringing Local	Corpus Christi, TX 78412	Employer (See Instruction)	
O	Educator	pation / Job title (See Instructions)	9 Employer (See Instructions Texas A&M University (
			1 -	
	Date 05/07/2023	Full name of contributor out-of-state PAC (ID#: Huerta, Carlos Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$12.00
		Corpus Christi, TX 78412		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
	Educator		Texas A&M University (Corpus Christi
	Date 06/07/2023	Full name of contributor out-of-state PAC (ID#: Huerta, Carlos Contributor address; City; State; Zip Code	:)	Amount of Contribution (\$) \$12.00
		Corpus Christi, TX 78412		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	Educator	,	Texas A&M University (
	Date 05/09/2023	Full name of contributor out-of-state PAC (ID#: Jimenez, Fred Contributor address; City; State; Zip Code Corpus Christi, TX 78410		Amount of Contribution (\$) \$65.00
	Principal occu lawyer	pation / Job title (See Instructions)	Employer (See Instructions self employed	5)
	Date 03/21/2023	Full name of contributor out-of-state PAC (ID#: Jimenez, Laura Contributor address; City; State; Zip Code Corpus Christi, TX 78410)	Amount of Contribution (\$) \$150.00
	Principal occu lawyer	pation / Job title (See Instructions)	Employer (See Instructions self employed	5)

	MONEI	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/27 Rpt: 16/48			
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)		
	Nueces Cou	nty Democratic Executive Committee (CEC)			00015946			
4	Date 03/25/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00		
g	Principal occu	Corpus Christi, TX 78413 pation / Job title (See Instructions)	9 Employer (See Instructions					
0	Teacher	Janon / Job title (See Instructions)	Retired	')				
	Date 03/21/2023	Full name of contributor out-of-state PAC (ID#:_ Klein, James (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00		
	D: : 1	Corpus Christi, TX 78411	-	_				
	Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions Del Mar College	5)				
	Date	Full name of contributor	Del Mai College		Amount of Contribution (f)			
	01/31/2023	Full name of contributor out-of-state PAC (ID#:_ Klein, Teresa (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
		Corpus Christi, TX 78411						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>				
	Professor	,	Del Mar College	,				
	Date 02/28/2023	Full name of contributor out-of-state PAC (ID#:_Klein, Teresa (Dr.) Contributor address; City; State; Zip Code Corpus Christi, TX 78411			Amount of Contribution (\$)	\$50.00		
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Del Mar College	<u> </u>				
	Date 03/31/2023	Full name of contributor out-of-state PAC (ID#:_Klein, Teresa (Dr.) Contributor address; City; State; Zip Code Corpus Christi, TX 78411			Amount of Contribution (\$)	\$50.00		
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Del Mar College	()				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/27 Rpt: 17/48		
2	FILER NAME Nueces Cou	nty Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission 00015946	on Filers)	
4	Date 04/30/2023	 5 Full name of contributor		7	Amount of Contribution (\$)	\$50.00	
		Corpus Christi, TX 78411					
8	Principal occu Professor	pation / Job title (See Instructions)	9 Employer (See Instructions Del Mar College	i)			
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID#:_ Klein, Teresa (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
	Deire die alle acces	Corpus Christi, TX 78411	Familia de Caralina de Cara				
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Del Mar College	5)			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Klein, Teresa (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		Corpus Christi, TX 78411					
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Del Mar College)			
	Date 03/16/2023	Full name of contributor out-of-state PAC (ID#:_ Koivula, Carolyn Contributor address; City; State; Zip Code Corpus Christi, TX 78411			Amount of Contribution (\$)	\$75.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Date 02/11/2023	Full name of contributor out-of-state PAC (ID#:_ LaMantia, Morgan (Sen.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions L&F Distributers	<u> </u>			

	MONEI	IONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this for	n.	1 Total pages Schedule A1: Sch: 15/27 Rpt: 18/48		
2	FILER NAME				3 Filer ID (Ethics Commission	Filers)	
	Nueces Cou	nty Democratic Executive Com	nmittee (CEC)		00015946		
4	Date 01/17/2023	5 Full name of contributor Larkin, Patrick (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	\$150.00	
_	Dianiant	Corpus Christi, TX 78404	lo	Fundamental Control of Control			
8		pation / Job title (See Instructions)	9	Employer (See Instructions			
	Professor			Texas A&M University-C	Lorpus Christi		
	Date 02/17/2023	Full name of contributor Larkin, Patrick (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	Amount of Contribution (\$)	\$150.00	
		Corpus Christi, TX 78404					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions			
	Professor			Texas A&M University-C	Corpus Christi		
	Date 03/17/2023	Full name of contributor Larkin, Patrick (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code		Amount of Contribution (\$)	\$150.00	
		Corpus Christi, TX 78404					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	· · · · · · · · · · · · · · · · · · ·		
	Professor			Texas A&M University-C	Corpus Christi		
	Date 04/17/2023	Full name of contributor Larkin, Patrick (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$150.00	
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions Texas A&M University-C			
	Date 05/17/2023	Full name of contributor Larkin, Patrick (Mr.) Contributor address; City; Sta Corpus Christi, TX 78404	out-of-state PAC (ID#: ate; Zip Code)	Amount of Contribution (\$)	\$150.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	· ·)		
	Professor			Texas A&M University-C	Corpus Christi		
			<u>, </u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 16/27 Rpt: 19/48
2	FILER NAME Nueces Cou	nty Democratic Executive Committee (CEC)		3 Filer ID (Ethics Commission Filers) 00015946
4	Date 06/17/2023	5 Full name of contributor		7 Amount of Contribution (\$) \$150.00
		Corpus Christi, TX 78404		
8	Principal occu Professor	pation / Job title (See Instructions)	9 Employer (See Instructions) Texas A&M University-C	
	Date 02/21/2023	Full name of contributor out-of-state PAC (ID#:_ Law Offices of Douglas Allison Contributor address; City; State; Zip Code Corpus Christi, TX 78401		Amount of Contribution (\$) \$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
	Date 02/24/2023	Full name of contributor out-of-state PAC (ID#:_ Law Offices of Sandra Eastwood Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1,000.00
	Principal occu	Corpus Christi, TX 78411 pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 03/05/2023	Full name of contributor out-of-state PAC (ID#:_ Lindsay, Toni Contributor address; City; State; Zip Code Corpus Christi, TX 78413		Amount of Contribution (\$) \$150.00
	Principal occu None	pation / Job title (See Instructions)	Employer (See Instructions) Unemployed	
	Date 03/17/2023	Full name of contributor out-of-state PAC (ID#:_ Lopez Leon, Celina Contributor address; City; State; Zip Code Corpus Christi, TX 78415		Amount of Contribution (\$) \$150.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions) Self	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 17/27 Rpt: 20/48		
2	FILER NAME Nueces Cou	nty Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission 00015946	n Filers)	
4	Date 03/25/2023	 Full name of contributor out-of-state PAC (ID# Marez, Gina (Mrs.) Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$130.00	
_	Deire die alle access	Corpus Christi, TX 78404	In Francisco (Octobrativa et al.	$\overline{\Gamma}$			
8	Dental Hyge	pation / Job title (See Instructions) nist	9 Employer (See Instructions Dr. Tim Geffert	5)			
	Date 03/31/2023	Full name of contributor out-of-state PAC (ID# Marez, John (Commissioner) Contributor address; City; State; Zip Code Corpus Christi, TX 78404	:)		Amount of Contribution (\$)	\$300.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)			
	Commissioner		County	_			
	Date 03/05/2023	Full name of contributor out-of-state PAC (ID# Melve, Peter Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$600.00	
		Corpus Christi, TX 78412					
		pation / Job title (See Instructions) rner/Landlord	Employer (See Instructions Self	5)			
	Date 03/21/2023	Full name of contributor out-of-state PAC (ID# Montoya, Cinia Contributor address; City; State; Zip Code Corpus Christi, TX 78413	:)		Amount of Contribution (\$)	\$75.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Insurance re	presentative	Wellmed				
	Date 03/08/2023	Full name of contributor out-of-state PAC (ID# Morgan Street Seafood Contributor address; City; State; Zip Code Corpus Christi, TX 78405	:)		Amount of Contribution (\$)	\$150.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	uction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 18/27 Rpt: 21/48		
2	FILER NAME Nueces Cou	inty Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission 00015946	n Filers)	
4	Date 04/04/2023	5 Full name of contributor out-of-state PAC (ID#:_ Nora Longoria Campaign 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$333.00	
_		McAllen, TX 78504					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_ Nueces County Tejano Democrats Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$600.00	
	Principal occu	Robstown, TX 78380 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Timolpai occa	pation 7 oob title (occ instructions)	Employer (See Management	,			
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_ Oropez, Armando (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00	
		Mineral Wells, TX 76067					
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions none)			
	Date 03/06/2023	Full name of contributor out-of-state PAC (ID#:_ Ortiz, Gabriel Contributor address; City; State; Zip Code Corpus Christi, TX 78413			Amount of Contribution (\$)	\$10.00	
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Fastenal)			
	Date 01/06/2023	Full name of contributor out-of-state PAC (ID#:_ O'Rear, Mary Contributor address; City; State; Zip Code Corpus Christi, TX 78415			Amount of Contribution (\$)	\$10.00	
	Principal occu None	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 19/27 Rpt: 22/48	
2	FILER NAME Nueces Cou	nty Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission 00015946	Filers)
4	Date 02/06/2023	 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
_	Deignaignal	Corpus Christi, TX 78415) Francis (Coo Instructions			
8	None	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 03/06/2023	Full name of contributor out-of-state PAC (ID#:O'Rear, Mary Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Deinainal assu	Corpus Christi, TX 78415	Frankrija (Coo kostrustia po			
	None	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/04/2023	Full name of contributor out-of-state PAC (ID#: O'Rear, Mary Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Corpus Christi, TX 78415				
	Principal occu None	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/05/2023	Full name of contributor out-of-state PAC (ID#: O'Rear, Mary Contributor address; City; State; Zip Code Corpus Christi, TX 78415)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/06/2023	Full name of contributor out-of-state PAC (ID#: O'Rear, Mary Contributor address; City; State; Zip Code Corpus Christi, TX 78415			Amount of Contribution (\$)	\$10.00
	Principal occu None	pation / Job title (See Instructions)	Employer (See Instructions)		
		1				

	MONEI	ARY POLITICAL C	CONTRIBUTIO	NS	SCHEDULE A	L
	The Instru	ction Guide explains how	to complete this fo	rm.	1 Total pages Schedule A1: Sch: 20/27 Rpt: 23/48	
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Nueces Cou	nty Democratic Executive Cor			00015946	
4	Date 01/26/2023	5 Full name of contributor Palacios, Abdel6 Contributor address; City; St	out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$25	5.00
		Robstown, TX 78380				
8		pation / Job title (See Instructions)	9 Employer (See Instructions		
	Sea Product	s Development		Sea Products Developm	ment	
	Date 02/26/2023	Full name of contributor Palacios, Abdel Contributor address; City; St	out-of-state PAC (ID#: atte; Zip Code)	Amount of Contribution (\$)	5.00
		Robstown, TX 78380				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	Sea Products Development			Sea Products Developm	ment	
	Date 03/26/2023	Full name of contributor Palacios, Abdel Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code		Amount of Contribution (\$)	5.00
		Robstown, TX 78380				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Sea Product	s Development		Sea Products Developm	ment	
	Date 04/26/2023	Full name of contributor Palacios, Abdel Contributor address; City; St Robstown, TX 78380	out-of-state PAC (ID#:		Amount of Contribution (\$)	5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Sea Product	s Development		Sea Products Developm	ment	
	Date 05/26/2023	Full name of contributor Palacios, Abdel Contributor address; City; St Robstown, TX 78380	out-of-state PAC (ID#:)	Amount of Contribution (\$)	5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Sea Product	s Development		Sea Products Developm	ment	

	MONEI	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to comp	lete this for	n.	1	Total pages Schedule A1: Sch: 21/27 Rpt: 24/48		
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)	
	Nueces Cou	nty Democratic Executive Committee (CE	EC)			00015946		
4	Date 03/25/2023	Perez, Leticia	ate PAC (ID#: e)	7	Amount of Contribution (\$)	\$78.00	
		Corpus Christi, TX 78413						
8	Principal occu Vice Preside	pation / Job title (See Instructions) nt	9	Employer (See Instructions First Community Bank)			
	Date 06/07/2023	Rogers, Craig Contributor address; City; State; Zip Cod	ate PAC (ID#:)		Amount of Contribution (\$)	\$25.00	
	Principal occu	Corpus Christi, TX 78418 pation / Job title (See Instructions)		Employer (See Instructions)			
	Attorney			Self				
	Date 03/17/2023	Full name of contributor out-of-state Rogers, Craig Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$600.00	
		Corpus Christi, TX 78418						
		pation / Job title (See Instructions)		Employer (See Instructions)			
	Attorney			Self				
	Date 03/23/2023	Full name of contributor out-of-star Rose, Amanda Contributor address; City; State; Zip Cod Corpus Christi, TX 78404	ate PAC (ID#:)		Amount of Contribution (\$)	\$75.00	
	•	pation / Job title (See Instructions)		Employer (See Instructions	-			
	Program Cod	ordinator		Texas A&M Corpus Chr	isti			
	Date 01/02/2023	Full name of contributor out-of-star Rose, Amanda (Mrs.) Contributor address; City; State; Zip Cod Corpus Christi, TX 78404	ate PAC (ID#:)		Amount of Contribution (\$)	\$25.00	
		pation / Job title (See Instructions)		Employer (See Instructions				
	Program Cod	ordinator		Texas A&M Corpus Chr	isti			

	MONEI	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 22/27 Rpt: 25/48		
2	FILER NAME				3	•	on Filers)	
	Nueces Cou	nty Democratic Executive Co	mmittee (CEC)			00015946		
4	Date 03/25/2023			7	Amount of Contribution (\$)	\$10.00		
		Corpus Christi, TX 78404						
8	Principal occu	pation / Job title (See Instructions	(3)	9 Employer (See Instructions	5)			
	Program Cod	ordinator		Texas A&M Corpus Chr	isti			
	Date 04/24/2023	Full name of contributor Rose, Amanda (Mrs.) Contributor address; City; S)		Amount of Contribution (\$)	\$25.00	
		Corpus Christi, TX 78404						
	Principal occupation / Job title (See Instructions)		3)	Employer (See Instructions				
	Program Coordinator Texas		Texas A&M Corpus Chr	isti				
	Date 05/25/2023	Full name of contributor Rose, Amanda (Mrs.) Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00	
		Corpus Christi, TX 78404						
	Principal occu	pation / Job title (See Instructions	6)	Employer (See Instructions	5)			
	Program Cod	ordinator		Texas A&M Corpus Chr	isti			
					Amount of Contribution (\$)	\$10.00		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)			
	Program Cod	ordinator		Texas A&M Corpus Chr	isti			
	Date 03/18/2023	Full name of contributor Salais, Gabriel Contributor address; City; S Corpus Christi, TX 78408)		Amount of Contribution (\$)	\$1,500.00	
	Principal occu Attorney	pation / Job title (See Instructions	s)	Employer (See Instructions Self	5)			

The Instruction Guide explains how to complete this form. 2 FILER NAME Nueces County Democratic Executive Committee (CEC) 4 Date 03/10/2023 5 Full name of contributor out-of-state PAC (ID#: 7 An Santos M.D., Juan 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418 8 Principal occupation / Job title (See Instructions) Nurologist Date 03/25/2023 Santos M.D., Juan Contributor out-of-state PAC (ID#: An Santos M.D., Juan Contributor address; City; State; Zip Code Corpus Christi, TX 78418 Principal occupation / Job title (See Instructions) Self Employer (See Instructions) Self	otal pages Schedule A1: ch: 23/27 Rpt: 26/48
Nueces County Democratic Executive Committee (CEC) 4 Date	IB (EII) 2
4 Date 03/10/2023 5 Full name of contributor	er ID (Ethics Commission Filers)
O3/10/2023 Santos M.D., Juan 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418 8 Principal occupation / Job title (See Instructions) Nurologist Self Date O3/25/2023 Santos M.D., Juan Contributor address; City; State; Zip Code Corpus Christi, TX 78418 Principal occupation / Job title (See Instructions) Physician Employer (See Instructions) Self Date Corpus Christi, TX 78418 Principal occupation / Job title (See Instructions) Physician Self Date Sull name of contributor out-of-state PAC (ID#: An O2/23/2023 Snider, Linda and M. Dean	0015946
Corpus Christi, TX 78418 8 Principal occupation / Job title (See Instructions) Nurologist Date 03/25/2023 Santos M.D., Juan Contributor address; City; State; Zip Code Corpus Christi, TX 78418 Principal occupation / Job title (See Instructions) Physician Employer (See Instructions) Employer (See Instructions) Self An O2/23/2023 Snider, Linda and M. Dean	nount of Contribution (\$) \$1,000.00
Nurologist Date Full name of contributor out-of-state PAC (ID#:	
Date Full name of contributor out-of-state PAC (ID#:	
O3/25/2023 Santos M.D., Juan Contributor address; City; State; Zip Code Corpus Christi, TX 78418 Principal occupation / Job title (See Instructions) Physician Self Date Full name of contributor out-of-state PAC (ID#:) Snider, Linda and M. Dean	
O3/25/2023 Santos M.D., Juan Contributor address; City; State; Zip Code Corpus Christi, TX 78418 Principal occupation / Job title (See Instructions) Physician Self Date Full name of contributor out-of-state PAC (ID#:) Snider, Linda and M. Dean	mount of Contribution (\$)
Corpus Christi, TX 78418 Principal occupation / Job title (See Instructions) Physician Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) An O2/23/2023 Snider, Linda and M. Dean	\$300.00
Corpus Christi, TX 78418 Principal occupation / Job title (See Instructions) Physician Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) An O2/23/2023 Snider, Linda and M. Dean	
Principal occupation / Job title (See Instructions) Physician Date Full name of contributor O2/23/2023 Snider, Linda and M. Dean Employer (See Instructions) Self An O2/23/2023	
Principal occupation / Job title (See Instructions) Physician Date Full name of contributor O2/23/2023 Snider, Linda and M. Dean Employer (See Instructions) Self An O2/23/2023	
Physician Self Date Full name of contributor out-of-state PAC (ID#:) An 02/23/2023 Snider, Linda and M. Dean	
Date Full name of contributor out-of-state PAC (ID#:) An 02/23/2023 Snider, Linda and M. Dean	
02/23/2023 Snider, Linda and M. Dean	
	nount of Contribution (\$)
Contributor address; City; State; Zip Code	\$150.00
1	
Corpus Christi, TX 78415	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Volunteer Nueces County Democratic Pa	arty
Date Full name of contributor out-of-state PAC (ID#:) An	mount of Contribution (\$)
03/25/2023 Sooda, Kusumakar	\$150.00
Contributor address; City; State; Zip Code	
Corpus Christi, TX 78413	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
MD True Care Medical Associates	;
	mount of Contribution (\$)
03/06/2023 Spann, Bob J and Dorothy	\$300.00
Contributor address; City; State; Zip Code	
0 0 . i . i . T. v 70 40 4	
Corpus Christi, TX 78404	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Retired None	

	MONEI	ARY POLITICAL (CONTRIBUTIO	INS		SCHEDUL	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/27 Rpt: 27/48	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Nueces Cou	nty Democratic Executive Co	mmittee (CEC)			00015946	
4	Date 03/04/2023	5 Full name of contributor Stith, Katina6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$150.00
		Corpus Christi, TX 78411					
8	Principal occup	pation / Job title (See Instructions	5)	9 Employer (See Instructions PKK	5)		
	Restaurant C			PNN	_		
	Date 01/15/2023	Full name of contributor Stockman, Christen Contributor address; City; S	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$3.00
		Corpus Christi, TX 78413					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Domestic En	gineer		Self			
	Date 02/14/2023	Full name of contributor Stockman, Christen Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code			Amount of Contribution (\$)	\$3.00
		Corpus Christi, TX 78413					
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	<u> </u>		
	Domestic En	,	,	Self	,		
	Date 03/14/2023	Full name of contributor Stockman, Christen Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$3.00
		Corpus Christi, TX 78413					
	Principal occu Domestic En	pation / Job title (See Instructions gineer	5)	Employer (See Instructions Self	5)		
	Date 04/14/2023	Full name of contributor Stockman, Christen Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$3.00
		Corpus Christi, TX 78413					
	Principal occu Domestic En	pation / Job title (See Instruction: gineer	5)	Employer (See Instructions Self	s) 		

	MONEI	ARY POLITICAL CONTRIBU	HON	15		SCHEDU	LE A1
	The Instruc	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 25/27 Rpt: 28/48	
2	FILER NAME				3	Filer ID (Ethics Commissi	ion Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)				00015946	
4	Date 05/14/2023	 Full name of contributor uut-of-state PAC Stockman, Christen Contributor address; City; State; Zip Code 	(ID#:		7	Amount of Contribution (\$)	\$3.00
		Corpus Christi, TX 78413					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Domestic En	gineer		Self			
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	06/14/2023	Stockman, Christen					\$3.00
		Contributor address; City; State; Zip Code			1		
		Corpus Christi, TX 78413			<u> </u>		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Domestic En			Self	_		
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	#10 F00 00
	03/15/2023	Thomas J Henry Law Firm					\$13,500.00
		Contributor address; City; State; Zip Code					
		San Antonio, TX 78269					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date	Full name of contributor out-of-state PAC	(ID#:)	Π	Amount of Contribution (\$)	
	06/29/2023	Tristan, Anthony					\$100.00
		Contributor address; City; State; Zip Code			l		
		Port Aransas, TX 78373					
		pation / Job title (See Instructions)		Employer (See Instructions			
	Tax Consulta	ınt		Tristan Financial Consu	ltin	g LLC	
	Date	Full name of contributor uut-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	04/24/2023	Valdez Sr., Carlos H.					\$50.00
		Contributor address; City; State; Zip Code					
		Carpus Christi, TV 70415					
	Dringing!	Corpus Christi, TX 78415		Employor (Coo Instruction	<u>''</u>		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	i\CulCu			rvenien			

	MONEI	ARY POLITICAL (CONTRIBUTION	15		SCHEDULI	A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 26/27 Rpt: 29/48	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Nueces Cou	nty Democratic Executive Co	mmittee (CEC)			00015946	
4	Date 03/20/2023	 Full name of contributor Wechsler, Sheron Contributor address; City; S 	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$75.00
0	Dringing con	Cedar Park, TX 78613	s) [0	Employer (See Instructional			
8	Teacher	pation / Job title (See Instructions	9	Employer (See Instructions St. Thomas More	5)		
	Date 03/25/2023	Full name of contributor Westergen, Kathy Contributor address; City; S)		Amount of Contribution (\$)	\$5.00
	D	Corpus Christi, TX 78416			Ĺ		
	Academic Ac	pation / Job title (See Instructions	5)	Employer (See Instructions Del Mar College	5)		
					_		
	Date 04/25/2023	Full name of contributor Westergen, Kathy Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		Corpus Christi, TX 78416					
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	<u> </u>		
	Academic Ac	,	,	Del Mar College	,		
	Date 05/25/2023	Full name of contributor Westergen, Kathy Contributor address; City; S Corpus Christi, TX 78416)		Amount of Contribution (\$)	\$5.00
	Principal occu Academic Ac	pation / Job title (See Instructions dvisor	5)	Employer (See Instructions Del Mar College	5)		
	Date 06/25/2023	Full name of contributor Westergen, Kathy Contributor address; City; S Corpus Christi, TX 78416)		Amount of Contribution (\$)	\$5.00
	Principal occu Academic Ac	pation / Job title (See Instructions dvisor	(3)	Employer (See Instructions Del Mar College	5)		
			·				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 27/27 Rpt: 30/48	
2	FILER NAME Nueces Cou	nty Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission F 00015946	ilers)
4	Date 02/23/2023	 Full name of contributor out-of-state PAC (ID#:_ Westergren, Mike (Mr.) Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$1	1,000.00
_		Corpus Christi, TX 78404				
8	Principal occu attorney	pation / Job title (See Instructions)	9 Employer (See Instructions self	5)		
	Date 03/25/2023	Full name of contributor out-of-state PAC (ID#:_ Westergren, Mike (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Dringinal occu	Corpus Christi, TX 78404 pation / Job title (See Instructions)	Employer (See Instructions	_		
	attorney	pation / Job title (See Instructions)	self	·)		
	Date 02/21/2023	Full name of contributor out-of-state PAC (ID#:_ Wigington Rumley Dunn & Blair, LLP Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1	L,000.00
		Corpus Christi, TX 78401				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/17/2023	Full name of contributor out-of-state PAC (ID#:_Young, Larry (Mr.) Contributor address; City; State; Zip Code Corpus Christi, TX 78404			Amount of Contribution (\$)	\$300.00
	Principal occu President an	ripation / Job title (See Instructions) and CEO	Employer (See Instructions Classic Hotshots and Co		ier Agency	

PLE	OGED CONTRIBU	TIONS			SCHEDULE B
Т	he Instruction Guide exp	plains how to comp	olete this form.		es Schedule B: Rpt: 31/48
2 FILER N	AME			3 Filer ID	(Ethics Commission Filers)
Nueces	County Democratic Executiv	e Committee (CEC)		00015946	6
4 TOTAL	OF UNITEMIZED PLEDO	GES		\$	0.00
5 Date	6 Full name of pledgor	out-of-state PAC (II	D#:	8 Amount of	9 In-kind description
				pledge (\$)	(If applicable)
	7 Pledgor Address;	City; State; Zip Co	de		
					avel outside of Texas. Complete Schedule T
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See In	ructions)	

L	LOANS					SCHEDUL	ΕE
1	he Instruction	on Guide explains how	to complete this f	orm.	1	ges Schedule E: 1 Rpt: 32/48	
	ILER NAME Jueces County	Democratic Executive Cor	nmittee (CEC)		3 Filer ID 000159	(Ethics Commission F	ilers)
4 T	OTAL OF UN	IITEMIZED LOANS			•	\$	0.00
5 D	Pate of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amount (\$)	
fi	s lender a nancial nstitution?	8 Lender address; (City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 P	rincipal occupation	on / Job title (See Instructions)	13 Employer (See Instructions	5)		
14 [Description of Coll None	ateral		15 Check if personal funds we	ere deposited	d into political account (See Instructions)	
	GUARANTOR NFORMATION	17 Name of guarantor				19 Amount Guarantee	d (\$)
	not applicable	18 Guarantor address; (City; State;	Zip Code			
20 F	Principal occupation	on		21 Employer (See Instructions	s)		

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 1/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 02/03/2023	5 Payee name AT&T
Amount (\$) 65.51	7 Payee Address; City; State; Zip PO BOX 5001 Carol Stream , IL 60197
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Phone
Date 02/27/2023	Payee name AT&T
Amount (\$) 65.52	Payee Address; City; State; Zip PO BOX 5001 Carol Stream , IL 60197
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense Phone (See instructions regarding type of information required.)
Date 04/07/2023	Payee name AT&T
Amount (\$) 64.80	Payee Address; City; State; Zip PO BOX 5001
PURPOSE OF EXPENDITURE	Carol Stream , IL 60197 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Phone (See instructions regarding type of information required. Phone
Date 04/24/2023	Payee name AT&T
Amount (\$) 66.00	Payee Address; City; State; Zip PO BOX 5001 Carol Stream , IL 60197
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Phone (See instructions regarding type of information required.

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 2/16 Rpt:	FILER NAME Nueces County Democratic Executive Committe	ee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 05/25/2023	5 Payee name AT&T	
Amount (\$) 64.63	7 Payee Address; City; State; Zip PO BOX 5001 Carol Stream , IL 60197	
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required.) Phones
Date 06/30/2023	Payee name ActBlue	
Amount (\$) 5.93	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Contribution processing
Date 06/25/2023	Payee name ActBlue	
Amount (\$) 2.58	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Contribution processing
Date 06/18/2023	Payee name ActBlue	
Amount (\$) 6.45	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144	
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required.) Contribution processing

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 3/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 06/11/2023	5 Payee name ActBlue
Amount (\$) 1.87	7 Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Contribution processing
Date 05/28/2023	Payee name ActBlue
Amount (\$) 3.57	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Contribution processing
Date 05/21/2023	Payee name ActBlue
Amount (\$) 6.33	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Contribution processing
Date 05/05/2023	Payee name ActBlue
Amount (\$) 0.12	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Contribution processing

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 4/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 05/07/2023	5 Payee name ActBlue
Amount (\$) 1.87	7 Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Contribution processing
Date	Payee name
04/30/2023	ActBlue
Amount (\$) 5.55	Payee Address; City; State; Zip 366 Summer Street
PURPOSE OF EXPENDITURE	Sommerville, MA 02144 (a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required: Contribution processing
Date	Payee name
04/23/2023	ActBlue
Amount (\$) 5.93	Payee Address; City; State; Zip 366 Summer Street
	Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Contribution processing
Date 04/16/2023	Payee name ActBlue
Amount (\$) 0.52	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Contribution processing

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 5/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filer 00015946
Date 04/09/2023	5 Payee name ActBlue
Amount (\$) 0.88	7 Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required Contribution processing
Date 04/02/2023	Payee name ActBlue
Amount (\$) 0.99	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required Contribution processing
Date 03/31/2023	Payee name ActBlue
Amount (\$) 13.83	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required Contribution processing
Date 03/26/2023	Payee name ActBlue
Amount (\$) 123.03	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required Contribution processing

		The Instruction Guide explains how to	complete this	form.
Total pa Sch: 6/	ĭ I	FILER NAME Nueces County Democratic Executive Commit	tee (CEC)	3 Filer ID (Ethics Commission Filers) 00015946
Date 03/19/2		5 Payee name ActBlue		
Amount	97.33	7 Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144		
C	POSE DF DITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description Contribution p	(See instructions regarding type of information required.) Drocessing
Date 03/12/2	2023	Payee name ActBlue		
Amount	(\$) 83.25	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144		
C	POSE OF DITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description Contribution p	(See instructions regarding type of information required.) Orocessing
Date 03/05/2	2023	Payee name ActBlue		
Amount	(\$) 38.53	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144		
C	POSE DF DITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description Contribution p	(See instructions regarding type of information required.) Drocessing
Date 02/26/2	2023	Payee name ActBlue		
Amount	3.96	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144		
C	POSE OF DITURE		(b) Description Contribution p	(See instructions regarding type of information required.)

		The Instruction Guide explains how to	complete this	Torm.
	pages Schedule I: 7/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Commit		3 Filer ID (Ethics Commission Filers) 00015946
Date 02/19	9/2023	5 Payee name ActBlue		
Amou	6.45	7 Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144		
	IRPOSE OF ENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (S Contribution p	See instructions regarding type of information required.) rocessing
Date 02/12	2/2023	Payee name ActBlue		
Amou	unt (\$) 40.38	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144		
	IRPOSE OF ENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (5) Contribution p	See instructions regarding type of information required.) rocessing
Date 02/05	5/2023	Payee name ActBlue		
Amou	ant (\$) 3.76	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144		
	IRPOSE OF ENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (S) Contribution p	See instructions regarding type of information required.)
Date 01/29	9/2023	Payee name ActBlue		
Amou	ont (\$) 0.99	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144		
	IRPOSE OF ENDITURE		(b) Description (S	See instructions regarding type of information required.) rocessing

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 8/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 01/22/2023	5 Payee name ActBlue
Amount (\$) 5.93	7 Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required Contribution processing
Date 01/15/2023	Payee name ActBlue
Amount (\$) 0.52	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required Contribution processing
Date 01/08/2023	Payee name ActBlue
Amount (\$) 2.86	Payee Address; City; State; Zip 366 Summer Street Sommerville, MA 02144
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required Contribution processing
Date 01/24/2023	Payee name Constant Contact
Amount (\$) 69.30	Payee Address; City; State; Zip Reservoir Place 1601 Trapelo Road Waltham, MA 02451
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required Email

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 9/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 02/24/2023	5 Payee name Constant Contact
Amount (\$) 69.30	7 Payee Address; City; State; Zip Reservoir Place 1601 Trapelo Road Waltham, MA 02451
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense (b) Description (See instructions regarding type of information required.) Website
Date 03/24/2023	Payee name Constant Contact
Amount (\$) 69.30	Payee Address; City; State; Zip Reservoir Place 1601 Trapelo Road Waltham, MA 02451
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense (b) Description Email
Date 04/24/2023	Payee name Constant Contact
Amount (\$) 69.30	Payee Address; City; State; Zip Reservoir Place 1601 Trapelo Road Waltham, MA 02451
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense (b) Description Email
Date 05/24/2023	Payee name Constant Contact
Amount (\$) 69.30	Payee Address; City; State; Zip Reservoir Place 1601 Trapelo Road Waltham, MA 02451
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense (b) Description (See instructions regarding type of information required. Email

The Instruction Guide explains how to complete this form.		
Total pages Schedule I: Sch: 10/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Commit	ee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 06/26/2023	5 Payee name Constant Contact	
Amount (\$) 69.30	7 Payee Address; City; State; Zip Reservoir Place 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Email
Date 03/30/2023	Payee name Corpus Christi Liquor Catering	
Amount (\$) 996.34	Payee Address; City; State; Zip 1506 Oaks Harbor Dr. Corpus Chrisit, TX 78418	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Bar Services
Date 02/10/2023	Payee name Friends of the Corpus Christi Museum of Scien	ce and History
Amount (\$) 2,110.80	Payee Address; City; State; Zip 1900 N. Chaparral St. Corpus Christi, TX 78401	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Venue Rental
Date 03/25/2023	Payee name Friends of the Corpus Christi Museum of Scien	ce and History
Amount (\$) Payee Address; City; State; Zip 1900 N. Chaparral St. Corpus Christi, TX 78401		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Venue Rental

	The Instruction Guide explains how to complete this form.
Total pages Sch Sch: 11/16 Rp	
Date 01/17/2023	5 Payee name GoDaddy.com
Amount (\$) 19.	7 Payee Address; City; State; Zip 2155 E. GoDaddy Way Tempe, AZ 85284
PURPOSE OF EXPENDITURI	(a) Category (See instructions for examples of acceptable categories) Advertising Expense (b) Description (See instructions regarding type of information required Website
Date 03/24/2023	Payee name Gulf Coast Printing
Amount (\$) 182.	Payee Address; City; State; Zip PO BOX 9312 Corpus Christi, TX 78469
PURPOSE OF EXPENDITURI	(a) Category (See instructions for examples of acceptable categories) Printing Expense (b) Description (See instructions regarding type of information required Event Program
Date 02/13/2023	Payee name Jacks Dinner Bell Inc.
Amount (\$) 1,349.	Payee Address; City; State; Zip 2001 Suntide Rd. Corpus Christi, TX 78409
PURPOSE OF EXPENDITURI	(a) Category (See instructions for examples of acceptable categories) Event Expense (b) Description (See instructions regarding type of information required Food
Date 03/25/2023	Payee name Jacks Dinner Bell Inc.
Amount (\$) 6,831.	Payee Address; City; State; Zip 2001 Suntide Rd. Corpus Christi, TX 78409
PURPOSE OF EXPENDITURI	(a) Category (See instructions for examples of acceptable categories) Event Expense (b) Description (See instructions regarding type of information required Food

		The Instruction Guide explains how to complete this form.
	pages Schedule I: 12/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 03/23	3/2023	5 Payee name Milestones
Amou	unt (\$) 284.16	7 Payee Address; City; State; Zip 1526 S. Staples Corpus Christi, TX 78404
	JRPOSE OF ENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense (b) Description Awards
Date 03/17	7/2023	Payee name Perez, Michael (Mr.)
Amou	unt (\$) 175.00	Payee Address; City; State; Zip 3629 S. Saxet Corpus Christi, TX 78408
	JRPOSE OF ENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense (b) Description (See instructions regarding type of information required.) Entertainment
Date 03/29	9/2023	Payee name Perez, Michael (Mr.)
Amou	unt (\$) 50.00	Payee Address; City; State; Zip 3629 S. Saxet
	JRPOSE OF ENDITURE	Corpus Christi, TX 78408 (a) Category (See instructions for examples of acceptable categories) Event Expense (b) Description (See instructions regarding type of information required.) Entertainment
Date 01/1!	5/2023	Payee name Reliant Energy
Amou	unt (\$) 25.94	Payee Address; City; State; Zip PO Box 650475 Dallas, TX 75265-0475
	JRPOSE OF ENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.)

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 13/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 02/19/2023	5 Payee name Reliant Energy
Amount (\$) 19.64	7 Payee Address; City; State; Zip PO Box 650475 Dallas, TX 75265-0475
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Electric (See instructions regarding type of information required.)
Date 03/12/2023	Payee name Reliant Energy
Amount (\$) 32.03	Payee Address; City; State; Zip PO Box 650475 Dallas, TX 75265-0475
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Electric
Date 04/10/2023	Payee name Reliant Energy
Amount (\$) 50.10	Payee Address; City; State; Zip PO Box 650475 Dallas, TX 75265-0475
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Electric (See instructions regarding type of information required.)
Date 05/25/2023	Payee name Reliant Energy
Amount (\$) 42.85	Payee Address; City; State; Zip PO Box 650475 Dallas, TX 75265-0475
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Electric

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 14/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers 00015946
Date 06/06/2023	5 Payee name Reliant Energy
Amount (\$) 49.45	7 Payee Address; City; State; Zip PO Box 650475 Dallas, TX 75265-0475
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Electric
Date 03/25/2023	Payee name Sepulveda, Henry (Officer)
Amount (\$) 200.00	Payee Address; City; State; Zip 1900 N Chaparral St. Corpus Christi, TX 78401
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense (b) Description (See instructions regarding type of information required. Museum Security Service
Date 01/01/2023	Payee name Stellar Point
Amount (\$) 1,000.00	Payee Address; City; State; Zip 6102 Ayers Suite 106 Corpus Christi, TX 78415
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required. Rent Payment
Date 02/02/2023	Payee name Stellar Point
Amount (\$) 1,000.00	Payee Address; City; State; Zip 6102 Ayers Suite 106 Corpus Christi, TX 78415
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense Office Rent (b) Description (See instructions regarding type of information required.

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 15/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
Date 04/01/2023	5 Payee name Stellar Point
Amount (\$) 1,000.00	7 Payee Address; City; State; Zip 6102 Ayers Suite 106 Corpus Christi, TX 78415
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Office Rental
Date 05/01/2023	Payee name Stellar Point
Amount (\$) 1,000.00	Payee Address; City; State; Zip 6102 Ayers Suite 106 Corpus Christi, TX 78415
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Office Rental
Date 06/01/2023	Payee name Stellar Point
Amount (\$) 1,000.00	Payee Address; City; State; Zip 6102 Ayers Suite 106 Corpus Christi, TX 78415
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Office Rental
Date 03/02/2023	Payee name Stellar Point
Amount (\$) 1,000.00	Payee Address; City; State; Zip 6102 Ayers Suite 106 Corpus Christi, TX 78415
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required. Office Rental

The Instruction Guide explains how to complete this form.		
L	Total pages Schedule I: Sch: 16/16 Rpt:	2 FILER NAME Nueces County Democratic Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00015946
1	Date 01/04/2023	5 Payee name Texas Workforce Commission UI Taxes
5	Amount (\$) 83.61	7 Payee Address; City; State; Zip 101 E. 15TH ST. Austin, TX 78778
3	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor (b) Description (See instructions regarding type of information required.) Unemployment
	Date 01/04/2023	Payee name Texas Workforce Commission UI Taxes
	Amount (\$) 189.30	Payee Address; City; State; Zip 101 E. 15TH ST. Austin, TX 78778
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor (b) Description (See instructions regarding type of information required.) Unemployment
	Date 05/10/2023	Payee name USPS
	Amount (\$) 63.00	Payee Address; City; State; Zip 802 N. Tancahua St. Corpus Christi, TX 78401
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description Stamps (See instructions regarding type of information required.)