CORRECTION/AMENDMENT AFFIDAVIT FORM JCOR-C/OH FOR CANDIDATE/OFFICEHOLDER Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00062099 18 Date Received CANDIDATE / MS / MRS / MR **FIRST** ΜI **ELECTRONICALLY FILED OFFICEHOLDER** The Honorable Jesus 07/24/2023 NAME NICKNAME LAST **SUFFIX** Jesse Contreras Date Hand-delivered or Date Postmarked **ORIGINAL** Runoff January 15 Other (specify) REPORT TYPE X July 15 Receipt # Exceeded modified reporting limit Amount 15th day after campaign treasurer 30th day before election appointment (officeholder only) Date Processed 8th day before election Final Report (Attach C/OH-FR) ORIGINAL PERIOD Month Month Day Day Year Year Date Imaged **COVERED THROUGH** 01/01/2023 06/30/2023 **EXPLANATION OF CORRECTION** Report not timely filed due to inaccurate password for login information. **AFFIDAVIT** I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. The Honorable Jesus Contreras Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ___, this the __ _____, 20_____, to certify which, witness my hand and seal of office.

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Printed name of officer administering oath

Signature of officer administering oath

Title of officer administering oath

FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00062099 18 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Jesus NAME Date Received **ELECTRONICALLY FILED** 07/24/2023 NICKNAME LAST **SUFFIX** Jesse Contreras CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 5400 South Jackson Rd MAILING Amount Receipt # **ADDRESS** Change of Address Edinburg, TX 78539 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Clarissa NAME NICKNAME LAST **SUFFIX** De La Cruz Flores STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 5400 South Jackson Rd. **ADDRESS** (Residence or Business) Edinburg, TX 78539 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 502-5777 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 476th

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Version V3.5.1.a18ea2ca

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

3 of 18

13 C / OH NAME	Contreras, Jesus (Th	e Honorable)	14 Filer ID 00062099	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expen These expenditures may have been made without officeholders are required to report this information	ut the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAM	≣	
		COMMITTEE CAMPAIGN TREASURER ADDI	RESS	
16 CONTRIBUTION		ZED POLITICAL CONTRIBUTIONS(OTHER T		
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE E	LECTRONICALLY)	\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LO	ANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 71,998.42
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	E LAST DAY OF THE	\$ 88,001.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	AS OF THE LAST DAY	\$ 160,000.00
17 AFFIDAVIT		l swear, or affirm, under per true and correct and include under Title 15, Election Cod	s all information required t	
			norable Jesus Contrer	
		Signature	of Candidate or Officeho	iaer
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		rtify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			4 of 18									
18 FILER NA Contrera	AME as, Jesus (The Honorable)	19 Filer ID 00062099	(Ethics Commission Filers)									
l	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE											
1.	1. SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)											
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$									
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$									
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$ 160,000.00									
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$									
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. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 71,998.42									
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 I TO FILER	RETURNED	\$									

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	on Guide explains how to complete this f	orm.		ges Schedule E(J): 1 Rpt: 5/18
2	FILER NAME Contreras, Jesus	s (The Honorable)		3 Filer ID 000620	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS			\$
5	Date of loan 01/05/2023	7 Name of lender Out-of-state PA	C (ID#:)	9 Loan Amount (\$) \$160,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Edinburg, TX 78539			11 Maturity Date 01/05/2024
12	Lender's Principal	Occupation	13 Lender's Job Title		
1.4	ATTORNEY	wll our Firm	SELF	og (if ogs)	
14	Lender's Employer JESSE CONTRE	ERAS LAW FIRM	15 Law Firm of lender's spous	se (II any)	
16	If lender is child, la	aw firm of parent(s) (if any)			
17	Description of Coll X None	ateral	18 Check if personal funds we	ere deposited	l into political account (See Instructions)
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
	X not applicable	21 Guarantor address; City; State;	Zip Code		
23	Guarantor's Princip	pal Occupation	24 Guarantor's Job Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Service			ages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G:	2 FILER NAME				3	Filer ID (Ethics Commission Filers)	_
	Sch: 1/13 Rpt: 6/18	Contreras, Jesus (Th	e Honorable)				00062099	
4	Date	5 Payee name						
	03/20/2023	Bebo's Angels						
6	Amount (\$)	7 Payee address; Cit	/; State;	Zip Co	de			_
	\$500.00	1413 W. Military Hwy		·				
	Reimbursement from political contributions intended	Pharr, TX 78577						
8	PURPOSE	(a) Category (See Categories	listed at the top of this sched	dule)	(b) Description	CI	heck if travel outside of Texas. Complete Schedule	Τ.
	OF EXPENDITURE	Contributions/Donation Candidate/Officehold		tee	donation	L CI	heck if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder nam	e		Office sought		Office held	
	Date	Payee name						
	06/05/2023	Benavidez, Joshua						
	Amount (\$)	Payee address; Cit	/; State;	Zip Co	de			_
	\$800.00							
	Reimbursement from political contributions							
	intended	Edinburg, TX 78539						_
	PURPOSE OF	Category (See Categories	listed at the top of this sched	dule)	Description	느	heck if travel outside of Texas. Complete Schedule	Γ.
	EXPENDITURE	Advertising Expense				П	heck if Austin, TX, officeholder living expense	
					social media			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder nam	e		Office sought		Office held	
	Date	Payee name						_
	03/29/2023	Benavidez, Joshua						
	Amount (\$)	Payee address; Cit	/; State;	Zip Co	de			-
	\$1,600.00			•				
	Reimbursement from political contributions intended	Edinburg, TX 78539						
_		_			D			_
	PURPOSE OF	Category (See Categories	listed at the top of this sched	dule)	Description	느	heck if travel outside of Texas. Complete Schedule heck if Austin, TX, officeholder living expense	١.
	EXPENDITURE	Advertising Expense			social media	ш	3	
					Journal Moula			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder nam	e		Office sought		Office held	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
_	Tatal manage Oak adula Oa	T_				6 Files ID (Ethics Commission Files)
1		-	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 2/13 Rpt: 7/18		Contreras, Jesus (The Honorable)			00062099
4	Date	5	Payee name			
	06/01/2023		Benchmark Outdoor Media			
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode	
	\$3,200.00		2813 Ted Circle	•		
	Reimbursement from					
	X political contributions		Hadinara TV 70550			
	intended	L	Harlingen, TX 78550			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense		L	Check if Austin, TX, officeholder living expense
					billboards	
9		Cai	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit C/OH					
	Date		Payee name			
	05/01/2023		Benchmark Outdoor Media			
	Amount (\$)	┢	Payee address; City; State;	Zip Co	ode	
	\$3,200.00		2813 Ted Circle	,		
	·		2010 104 011010			
	X Reimbursement from political contributions		11. F TV 70550			
	intended	L	Harlingen, TX 78550			
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense			Check if Austin, TX, officeholder living expense
					billboards	
		Cai	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit C/OH					
	0/011					
	Date		Payee name			
	04/01/2023		Benchmark Outdoor Media			
	Amount (\$)	T	Payee address; City; State;	Zip Co	ode	
	\$3,200.00		2813 Ted Circle	•		
	X political contributions		Harlinger TV 70550			
	intended	╙	Harlingen, TX 78550			
	PURPOSE OF		Category (See Categories listed at the top of this sched	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense		L L	Check if Austin, TX, officeholder living expense
					billboards	
		Cai	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit C/OH					

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	Expense		xpense Vages/Contract Labor			District t of District enter a category not liste	d above)
1	Total pages Schedule G: Sch: 3/13 Rpt: 8/18	2	FILER NAM Contreras,	E Jesus (The Hon	orable)			3	Filer ID 000620	(Ethics Commis	ssion Filers)
4	Date	5	Payee name	<u> </u>							
	03/01/2023			Outdoor Media							
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	ode				
	\$3,200.00		2813 Ted 0	Circle							
	Reimbursement from political contributions intended		Harlingen,	TX 78550							
8	PURPOSE	(a)	Category (s	See Categories listed at t	he top of this sch	iedule)	(b) Description	Cl	neck if trave	el outside of Texas. Con	nplete Schedule T.
	OF EXPENDITURE		Advertising	Expense				CI	neck if Aust	in, TX, officeholder living	g expense
	EXI ENDITORE						billboards				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Ca	ndidate/Office	holder name			Office sought			Office held	
	Date		Payee name								
	02/01/2023		Benchmark	Outdoor Media							
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	ode				
	\$6,400.00		2813 Ted 0	Circle							
	X Reimbursement from political contributions intended		Harlingen,	TX 78550							
	PURPOSE		Category (S	See Categories listed at t	he top of this sch	iedule)	Description	=		el outside of Texas. Con	
	OF EXPENDITURE		Advertising	Expense			L L	CI	neck if Aust	in, TX, officeholder living	g expense
							billboards				
	Complete ONLY if direct expenditure to benefit C/OH	Ca	ndidate/Office	holder name			Office sought			Office held	
	Date	Г	Payee name								
	06/09/2023		De La Cruz	z, Alyssa							
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	ode				
	\$400.00		5400 S. Ja	ckson Rd.							
	X Reimbursement from political contributions intended		Edinburg, 7	ΓX 78539							
	PURPOSE		Category (S	See Categories listed at t	he top of this sch	iedule)	Description	_		el outside of Texas. Con	
	OF EXPENDITURE		Loan Repa	yment/Reimburs	sement		L	_		in, TX, officeholder livinç	g expense
							event food reimb	ours	ement		
	expenditure to benefit	Ca	ndidate/Office	holder name			Office sought			Office held	
	C/OH										

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E		Tı Tı	ravel in District ravel Out of District THER (enter a category not liste	
	Credit Card Fayinent		The Instruction Guide explains	s how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NA	ME			3 Fi	iler ID (Ethics Commi	ssion Filers)
	Sch: 4/13 Rpt: 9/18	Contreras	s, Jesus (The Honorable)			0	0062099	
4	Date	5 Payee nar	ne					
	05/19/2023		Digital Media					
6	Amount (\$)	7 Payee add	lress; City; State	e; Zip Co	ode			
	\$1,650.00	4909 N. N	McColl Rd.					
	Reimbursement from							
	X political contributions intended	McAllen,	TX 78504					
8	PURPOSE	(a) Category	(See Categories listed at the top of this so	hedule)	(b) Description	=	k if travel outside of Texas. Cor	
	OF EXPENDITURE	Advertisir	ng Expense		L	Chec	k if Austin, TX, officeholder living	g expense
					digital marketing			
9	Complete ONLY if direct expenditure to benefit	Candidate/Offi	ceholder name		Office sought		Office held	
	C/OH							
	Date	Payee nar	mo.					
	02/13/2023	Fast Scre						
_	Amount (\$)	Payee add		e; Zip Co	nde			
	\$1,907.91	316 E. 4t	•	, Zip C(ouc			
		010 L. 40	11 St.					
	Reimbursement from political contributions intended	Woslaco	TX 78596					
					Description F	7 01	de la fatoria de la capacida de Tancas de Capacida de	
	PURPOSE OF	1	(See Categories listed at the top of this so	hedule)	Description	=	ck if travel outside of Texas. Cor ck if Austin, TX, officeholder living	-
	EXPENDITURE	Printing E	expense		campaign attire		, , , , , , , , , , , , , , , , , , , ,	y - p
					campaign attire			
	Complete ONLY if direct	L Candidate/Offi	ceholder name		Office sought		Office held	
	expenditure to benefit				2			
	C/OH							
	Date	Payee nar	ne					
	06/26/2023	Fast Sign	IS					
	Amount (\$)	Payee add	lress; City; State	e; Zip Co	ode			
	\$604.29	3900 N. 2	23rd St.					
	Reimbursement from political contributions							
	x political contributions intended	McAllen,	TX 78501					
	PURPOSE	Category	(See Categories listed at the top of this so	hedule)	Description	=	k if travel outside of Texas. Cor	
	OF EXPENDITURE	Advertisir	ng Expense		[Chec	k if Austin, TX, officeholder living	g expense
					signs			
	Complete ONLY if direct expenditure to benefit	Candidate/Offi	ceholder name		Office sought		Office held	
	C/OH							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Transportation Equipment & Reia Travel in District Travel Out of District OTHER (enter a category not liste	
	Credit Card Payment		The Instruction Guide explains	how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NAME	Ē			3	Filer ID (Ethics Commi	ssion Filers)
	Sch: 5/13 Rpt: 10/18	Contreras,	Jesus (The Honorable)			(00062099	
4	Date	5 Payee name						
	02/17/2023	Flores, Sylv						
6	Amount (\$)	7 Payee addre	ss; City; State;	; Zip Co	ode			
	\$2,600.00	2509 Pase	Encantado St.					
	Reimbursement from							
	X political contributions intended	Mission, TX	(78572		1			
8	PURPOSE OF	' ' ' '	ee Categories listed at the top of this sch	edule)	(b) Description	=	eck if travel outside of Texas. Co	
	EXPENDITURE	Salaries/Wa	ages/Contract Labor		L	Che	eck if Austin, TX, officeholder livin	ig expense
					campaign labor			
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held	
	C/OH							
	Date	Payee name						
	06/28/2023	Garcia, Pet						
_	Amount (\$)	Payee addre		Zip Co	ode			
	\$5,600.00	, ayou addit	oo, ony, onto	, _,p oc				
	Reimbursement from political contributions	Con lucia	TV 70500					
	intended	San Juan, ⁻			r			
	PURPOSE OF	1	ee Categories listed at the top of this sch	edule)	Description	=	eck if travel outside of Texas. Co eck if Austin, TX, officeholder livin	
	EXPENDITURE	Salaries/Wa	ages/Contract Labor		Laampaiaa lelee	LITE	CON II AUSUII, TA, UIIICEIIUIUEI IIVIII	ig exherise
					campaign labor			
_	Operation ONE V. C. P.	0	h - - - - - -		0#:		6‴ 1 1 .	
	Complete ONLY if direct expenditure to benefit	Candidate/Office	noider name		Office sought		Office held	
	C/OH							
H	Date	Payee name						
	06/16/2023	Gonzalez,						
\vdash		·		: Zip Co	ado			
	Amount (\$)	Payee addre	ss; City; State;	, ZIP CC	oue			
	\$4,350.00							
	X Reimbursement from political contributions intended	Mercedes,	TX 78570					
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description	Che	eck if travel outside of Texas. Co	mplete Schedule T.
	OF	1	ages/Contract Labor	,		_	eck if Austin, TX, officeholder livin	
	EXPENDITURE		•		campaign labor			
	Complete ONLY if direct	L Candidate/Office	holder name		Office sought		Office held	
	expenditure to benefit				-			
	C/OH							
1								

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	·		Office Over Polling Ex Printing Ex Salaries/M	kpense /ages/Contract Labor		Transportation Equipment & Related E Travel in District Travel Out of District OTHER (enter a category not listed ab		
	ordan dara r aymon		The Instruction Guid	le explains h	ow to co	mplete this form.			
1	Total pages Schedule G:	2	FILER NAME				3	Filer ID (Ethics Commissio	n Filers)
	Sch: 6/13 Rpt: 11/18		Contreras, Jesus (The Honor	able)				00062099	
4	Date	5	Payee name						
	03/29/2023		Hayes Medrano, Selina						
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de			
	\$1,500.00		612 W Nolana Ave Ste 250						
	Reimbursement from								
	x political contributions intended		McAllen, TX 78504						
8	PURPOSE	(a)	Category (See Categories listed at the	ton of this sche	dule)	(b) Description	☐ Ch	neck if travel outside of Texas. Complet	e Schedule T.
ľ	OF	("	Consulting Expense	top or trilo sorie	uuic)	(a) Bessirption [=	neck if Austin, TX, officeholder living exp	
	EXPENDITURE		Conducting Expense			campaign consu	 ultina	1	
						1 3		,	
9	Complete ONLY if direct	Ca	ndidate/Officeholder name			Office sought		Office held	
	expenditure to benefit C/OH					ŭ			
	C/OH								
	Date		Payee name						
	01/20/2023		Hayes Medrano, Selina						
	Amount (\$)		Payee address; City;	State;	Zip Co	de			
	\$2,500.00		612 W Nolana Ave Ste 250						
	Reimbursement from								
	x political contributions intended		McAllen, TX 78504						
	PURPOSE	H	Category (See Categories listed at the	top of this sche	dule)	Description	Ch	neck if travel outside of Texas. Complet	e Schedule T.
	OF EXPENDITURE		Consulting Expense				Ch	neck if Austin, TX, officeholder living exp	ense
	EXI ENDITORE					campaign consu	ulting	J	
	•	Ca	ndidate/Officeholder name			Office sought		Office held	
	expenditure to benefit C/OH								
		_							
	Date		Payee name						
	02/01/2023	L	Hayes Medrano, Selina						
	Amount (\$)		Payee address; City;	State;	Zip Co	de			
	\$1,500.00		612 W Nolana Ave Ste 250						
	Reimbursement from political contributions								
	x political contributions intended		McAllen, TX 78504						
	PURPOSE		Category (See Categories listed at the	top of this sche	dule)	Description	_	neck if travel outside of Texas. Complet	
	OF EXPENDITURE		Consulting Expense				Ch	neck if Austin, TX, officeholder living exp	ense
						campaign consu	ulting	J	
	Complete ONLY if direct expenditure to benefit	Ca	ndidate/Officeholder name			Office sought		Office held	
	C/OH								
\vdash									

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	•	se	Office Ove Polling Exp Printing Ex Salaries/M	pense /ages/Contract Labor		Transportation Equipment & Related Experiment in District Travel Out of District OTHER (enter a category not listed above		
		_	The Instruction Guide e	xplains h	ow to co	mplete this form.			
1	Total pages Schedule G:	2	FILER NAME				1	Filer ID (Ethics Commission	Filers)
	Sch: 7/13 Rpt: 12/18		Contreras, Jesus (The Honorable	le)				00062099	
4	Date	5	Payee name						
	01/20/2023		Hayes Medrano, Selina						
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de			
	\$1,000.00		612 W Nolana Ave Ste 250						
	Reimbursement from political contributions intended		McAllen, TX 78504						
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sched	lule)	(b) Description	Ch	neck if travel outside of Texas. Complete S	Schedule T.
	OF EXPENDITURE		Consulting Expense				Ch	neck if Austin, TX, officeholder living expen	se
	EXPENDITORE					campaign consu	ılting	J	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	didate/Officeholder name			Office sought		Office held	
	Date		Payee name						
	04/04/2023		M & E Productions						
	Amount (\$)	H	Payee address; City;	State;	Zip Co	de			
	\$300.00		5110 N. Inspiration Rd.						
	Reimbursement from		•						
	X political contributions intended		Mission, TX 78572		ı				
	PURPOSE OF		Category (See Categories listed at the top	of this sched	lule)	Description	_	neck if travel outside of Texas. Complete S	
	EXPENDITURE		Advertising Expense			L		neck if Austin, TX, officeholder living expen	ise
						video production	1		
		L							
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name			Office sought		Office held	
	Date	Г	Dayoo nama						
	06/28/2023		Payee name NRG Ink						
_		┡		01-1	7:- 0-	-1 -			
	Amount (\$)		Payee address; City;	State;	∠ıp Co	ue			
	\$800.00		320 S. Ohio						
	X Reimbursement from political contributions intended		Mercedes, TX 78570						
	PURPOSE		Category (See Categories listed at the top	of this sched	lule)	Description	=	neck if travel outside of Texas. Complete S	
	OF EXPENDITURE		Advertising Expense			L	Ch	neck if Austin, TX, officeholder living expen	se
	- -					campaign attire			
L		L							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name			Office sought		Office held	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

	Candidate/Officeholder/Politica			s/Wages/Contract Labor		OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explains how to	complete this form.		
1	Total pages Schedule G:	2	FILER NAME		3	Filer ID (Ethics Commission Filers)
	Sch: 8/13 Rpt: 13/18		Contreras, Jesus (The Honorable)			00062099
4	Date	5	Payee name		_	
	06/13/2023		NRG Ink			
6	Amount (\$)	7	Payee address; City; State; Zip	Code		
	\$800.00		320 S. Ohio			
	Reimbursement from					
	X political contributions intended		Mercedes, TX 78570			
8	PURPOSE	(2)	Category (See Categories listed at the top of this schedule)	(b) Description	7.0	heck if travel outside of Texas. Complete Schedule T.
ľ	OF	(a)	Advertising Expense	(b) Description	_	check if Austin, TX, officeholder living expense
	EXPENDITURE		Advertising Expense	campaign attire		
9	Complete ONLY if direct	L Car	ndidate/Officeholder name	Office sought		Office held
	expenditure to benefit			3		
	C/OH					
	Date		Payee name			
	06/06/2023		NRG Ink			
	Amount (\$)		Payee address; City; State; Zip	Code		
	\$400.00		320 S. Ohio			
	Reimbursement from					
	X political contributions intended		Mercedes, TX 78570			
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	_	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense	L	_ c	heck if Austin, TX, officeholder living expense
				campaign attire		
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name	Office sought		Office held
	C/OH					
	Date		Payee name			
	04/05/2023		Pamela Oliver Munoz Photography			
-	Amount (\$)	⊢	Payee address; City; State; Zip	Code		
	\$2,165.00		1023 S. TX Blvd	Code		
			1020 O. 17(DIVU			
	X Reimbursement from political contributions intended		Weslaco, TX 78596			
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	С	check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		_ c	heck if Austin, TX, officeholder living expense
				photography		
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name	Office sought		Office held
	C/OH					

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Of Polling E Printing		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explain	s how to c	omplete this form.	
1	Total pages Schedule G:	2 FILER	NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 9/13 Rpt: 14/18	Contre	eras, Jesus (The Honorable)			00062099
4	Date	5 Payee	name			
	02/01/2023	Pame	la Oliver Munoz Photography			
6	Amount (\$)	7 Payee	address; City; State	e; Zip C	ode	
	\$600.00	1023	S. TX Blvd			
	Reimbursement from					
	X political contributions intended	Wesla	co, TX 78596		_	
8	PURPOSE	(a) Catego	Ory (See Categories listed at the top of this so	chedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Adver	tising Expense		L	Check if Austin, TX, officeholder living expense
					photography	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/	Officeholder name		Office sought	Office held
	Date	Payee	name			
	06/24/2023	Party	Life Rentals, LLC			
	Amount (\$)	Payee	address; City; State	e; Zip C	ode	
	\$236.09					
	Reimbursement from					
	X political contributions intended	Missio	on, TX 78572			
	PURPOSE OF	Catego	Ory (See Categories listed at the top of this so	chedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event	Expense		L	Check if Austin, TX, officeholder living expense
					event tent	
	Complete ONLY if direct expenditure to benefit	Candidate/	Officeholder name		Office sought	Office held
	C/OH					
	Date	Payee	name			
	04/20/2023		Boys & Girls Club			
	Amount (\$)		<u> </u>	e; Zip C	ode	
	\$1,250.00	l -	S. Fir St.	5, Zip C	ouc	
		1020	5.111 31.			
	X Reimbursement from political contributions intended	Pharr,	TX 78577			
	PURPOSE	Catego	OFY (See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		butions/Donations Made By			Check if Austin, TX, officeholder living expense
		Candi	date/Officeholder/Political Com	nittee	event donation	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/	Officeholder name		Office sought	Office held

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Ove Food/Beverage Expense Polling Ex / - Gift/Awards/Memorials Expense Printing Ex	ayment/Reimbursement erhead/Rental Expense pense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District 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 G: Sch: 10/13 Rpt: 15/18	FILER NAME Contreras, Jesus (The Honorable)	[5	3 Filer ID (Ethics Commission Filers) 00062099
4	Date 04/27/2023	5 Payee name Ramirez, Guadalupe		
6	Amount (\$) \$10,700.00 Reimbursement from	7 Payee address; City; State; Zip Code		
	X political contributions intended	Mission, TX 78572		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description campaign consulti	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	03/13/2023	Retiz, Lizbeth		
	Amount (\$) Payee address; City; State; Zip Code \$1,380.00			
	X Reimbursement from political contributions intended	Donna, TX 78537		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	02/21/2023	Retiz, Lizbeth		
	Amount (\$) Payee address; City; State; Zip Code \$1,000.00			
	X Reimbursement from political contributions intended	Donna, TX 78537		
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE	Advertising Expense	campaign attire	Grook ii Ausuri, 174, Gilicerioluer iivinig experise
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/13 Rpt: 16/18 Contreras, Jesus (The Honorable) 00062099 Date Payee name 06/26/2023 Sam's Club Payee address; Amount (\$) City; State; Zip Code \$483.57 7601 N. 10th St. Reimbursement from political contributions Х intended McAllen, TX 78504 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** food for event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/26/2023 San Juan Police Dept. Amount (\$) Payee address; City; State; Zip Code \$500.00 2301 N. Raul Longoria Reimbursement from political contributions Χ San Juan, TX 78589 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee event donation Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 03/29/2023 St. Martin de Pores Payee address; State; Zip Code Amount (\$) City; \$500.00 901 N. TX Blvd Reimbursement from Χ political contributions intended Weslaco, TX 78596 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 12/13 Rpt: 17/18 Contreras, Jesus (The Honorable) 00062099 Date Payee name 06/30/2023 V & M Printing Shop Amount (\$) Payee address; State; Zip Code \$1,692.06 512 S. Westgate Dr. Ste E Reimbursement from political contributions Х intended Weslaco, TX 78596 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Printing Expense **EXPENDITURE** campaign material Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/23/2023 V & M Printing Shop Amount (\$) Payee address; City; State; Zip Code \$500.00 512 S. Westgate Dr. Ste E Reimbursement from political contributions Χ Weslaco, TX 78596 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Printing Expense **EXPENDITURE** campaign material Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 06/13/2023 V & M Printing Shop Payee address; City; State; Zip Code Amount (\$) \$1,979.50 512 S. Westgate Dr. Ste E Reimbursement from Χ political contributions intended Weslaco, TX 78596 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense **Printing Expense EXPENDITURE** campaign material Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense 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. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 13/13 Rpt: 18/18 Contreras, Jesus (The Honorable) 00062099 Date Payee name 03/23/2023 V & M Printing Shop 6 Amount (\$) Payee address; State; Zip Code \$1,000.00 512 S. Westgate Dr. Ste E Reimbursement from political contributions intended Х Weslaco, TX 78596 (a) Category (See Categories listed at the top of this schedule) **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense **Printing Expense EXPENDITURE** campaign material Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH