CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complet	e this form.	1 Filer ID (Ethics Commis 00086429	sion Filers)	2 Total pages	filed: 6
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
	Mrs.	Alena				
NAME					Date Received	
						CALLY FILED
	NICKNAME	LAST		SUFFIX	08/16/2023	
		Gutierrez-Berl	anga			
4 CANDIDATE /	ADDRESS / PO BOX; APT / 3	SUITE #: CIT	Y:	ZIP CODE	Date Hand-delivered	d or Date Postmarked
OFFICEHOLDER	740 Killarney Road	,	- ,			
MAILING ADDRESS					Receipt #	Amount
Change of Address	Floresville, TX 78114				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR F	IRST		MI	_	
TREASURER NAME	Mrs. A	Alena				
	NICKNAME L	 AST		SUFFIX		
		Gutierrez-Berla	anga			
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PI EASE).	ΔΡΊ	/ SUITE #; CITY;		TATE; ZIP CODE
TREASURER	740 Killarney Road	OX FLEASE),		/ SOIL #, CITT,	5	TATE, ZIF CODE
ADDRESS	140 Killalley Koau					
(Residence or Business)						
	Floresville, TX 78114					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	EXTENSION			
TREASURER						
PHONE	(210) 200 7000					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after o	campaign treasurer
					appointment (o	fficeholder only)
	X July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (A	ttach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2023	TH	IROUGH	06/30/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
		∏G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
		GO T	O PAGE 2			
Forms provided by Te	xas Ethics Commission	www.et	hics.state.tx.us	6	Ver	sion V3.5.1.39e6f620

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 6

_	_				2 of 6
13 C / OH NAME	Gutierrez-Berlanga, /	Alena (Mrs.)	14 Filer ID 0008642		Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or p These expenditures may have been d officeholders are required to repo	en made without the candidate	's or officeholder's	knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREA	SURER ADDRESS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTION ES OF LOANS, OR CONTRIBUTI			0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARAN	TEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			THE \$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIE OF THE REPOF	PAL AMOUNT OF ALL OUTSTAND	DING LOANS AS OF THE LAS	ST DAY	0.00
17 AFFIDAVIT	17 AFFIDAVIT				
		true and corre	rm, under penalty of perjury, t ct and includes all information , Election Code.	hat the accompany required to be rep	ving report is orted by me
Mrs. Alena Gutierrez-Berlanga					
Signature of Candidate or Officeholder					
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
of, 20, to certify which, witness my hand and seal of office.					
Signature of offic	cer administering	Printed name of officer admi	nistering Titl	e of officer adminis	stering oath
Forms provided by Te	xas Ethics Commission	www.ethics.state.t	x.us	Versior	n V3.5.1.39e6f620

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 6 18 FILER NAME 19 Filer ID (Ethics Commission Filers) 00086429 Gutierrez-Berlanga, Alena (Mrs.) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 0.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 0.00 \$ X SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 0.00 З. 4. X SCHEDULE E: LOANS \$ 0.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 0.00 \$ X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 0.00 6. \$ 7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS 0.00 \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 0.00 8. \$ X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 500.00 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

PLEDGED CONTRIBUTIONS SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/6 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00086429 Gutierrez-Berlanga, Alena (Mrs.) 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

LOANS		SC	HEDULE E
The Instruction Guide explains how to complete this form.	pages Schedule 1/1 Rpt: 5/6		
2 FILER NAME Gutierrez-Berlanga, Alena (Mrs.)	ID (Ethics Com 36429	mission Filers)	
⁴ TOTAL OF UNITEMIZED LOANS	•	\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:) 9 Loan Am	ount (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest F	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instruction)	s)		
14 Description of Collateral 15 Check if personal funds w None	ere deposi	ited into political a (See Insti	
16 GUARANTOR 17 Name of guarantor INFORMATION		19 Amount C	Guaranteed (\$)
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instruction	s)		

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement verhead/Rental Expense Expense Expense /Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 1/1 Rpt: 6/6	2 FILER NAME Gutierrez-Berlanga, Alena (Mrs.)		3 Filer ID (Ethics Commission Filers) 00086429		
4	Date 02/21/2023	5 Payee name Facebook Meta				
6	Amount (\$) \$500.00 Reimbursement from political contributions	7 Payee address; City; State; Zip Code 1 Hacker Way				
	intended	Menlo Park, CA 94025				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description [[Social media ad	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		