CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form	1 Filer ID (Ethics Commission Filers) 00020956		2 Total pages filed: 35	
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE ONLY	
OFFICEHOLDER NAME	The Honorable Roberto			Date Received	
				ELECTRONICALLY FILED	
	NICKNAME LAST		SUFFIX	01/31/2024	
	Serna		301117		
4 CANDIDATE / OFFICEHOLDER	, ,	CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked	
MAILING	1665 N. Bibb Ave.			Receipt # Amount	
ADDRESS				recoupe in Full out to	
Change of Address	Eagle Pass, TX 78852-6612			Date Processed	
				Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIRST		MI		
TREASURER NAME	Mr. Roberto				
	NICKNAME LAST		SUFFIX		
	Serna				
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEAS	E); APT / SUITE	#; CITY;	STATE; ZIP CO	DE
TREASURER ADDRESS	1665 N. Bibb Ave				
(Residence or Business)	Eagle Pass, TX 78852-6612				
7 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
TREASURER PHONE	(830) 968-5856				
8 REPORT TYPE		afana alaatisa 🔲 Dunaff	_	1 454 46	
'	January 15 X 30th day b	efore election Runoff		15th day after campaign treasurer appointment (officeholder only)	
	July 15 8th day be	fore election Exceeded	modified	Final Report (Attach C/OH-FR)	
		reporting I	imit	•	
9 PERIOD	Month Day Year	Mo	onth Day	Year	
COVERED	01/01/2024	THROUGH	01/25/2024	1	
10 ELECTION	ELECTION DATE		TION TYPE		
	· · · · · · · · · · · · · · · · · · ·	χ Primary Rui	noff	Other	
	03/05/2024 Γ	General Spe	ecial		
11 OFFICE	OFFICE HELD (if any)	12 OFF	ICE SOUGHT	(if known)	
	District Attorney (Multi-county) District			Multi-county) District 293rd	
	1				
		O TO PAGE 2			
	G	O TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 35

13 C / OH NAME	Serna, Roberto (The	Honorable)	14 Filer ID (00020956	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditu These expenditures may have been made without officeholders are required to report this informatio	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 5,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 47,843.86
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 15,578.54
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 23,000.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Hon	orable Roberto Serna	a
		Signature of	Candidate or Officeholo	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of office	eer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM COH **COVER SHEET PG 3**

			;	3 of 35
18 FILER NAME Serna, Roberto (The Honorab	le)	19 Filer ID 00020956	(Ethics Commission F	ilers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		I	SUBTOTAL AMO	DUNT
1. X SCHEDULE A1: MC	NETARY POLITICAL CONTRIBUTIONS		\$	4,700.00
2. X SCHEDULE A2: NC	N-MONETARY (IN-KIND) POLITICAL CONTRI	BUTIONS	\$	300.00
3. SCHEDULE B: PLE	DGED CONTRIBUTIONS		\$	
4. X SCHEDULE E: LOA	NS		\$ 1	3,000.00
5. X SCHEDULE F1: PO	LITICAL EXPENDITURES FROM POLITICAL C	CONTRIBUTIONS	\$ 43	2,880.02
6. SCHEDULE F2: UN	PAID INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: PU	RCHASE OF INVESTMENTS FROM POLITICA	L CONTRIBUTIONS	\$	
8. X SCHEDULE F4: EX	PENDITURES MADE BY CREDIT CARD		\$	4,629.93
9. X SCHEDULE G: POL	ITICAL EXPENDITURES FROM PERSONAL F	UNDS	\$	333.91
10. SCHEDULE H: PAY	MENT FROM POLITICAL CONTRIBUTIONS T	O A BUSINESS OF C/OH	\$	
11. SCHEDULE I: NON-	POLITICAL EXPENDITURES FROM POLITICA	L CONTRIBUTIONS	\$	
12. SCHEDULE K: INTE	REST, CREDITS, GAINS, REFUNDS, AND CO	NTRIBUTIONS RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/35	
2	FILER NAME Serna, Robe	rto (The Honorable)			3	Filer ID (Ethics Commission 00020956	on Filers)
4	Date 01/25/2024	5 Full name of contributorDe Los Santos Law Firm F6 Contributor address; City; Sta)	7	Amount of Contribution (\$)	\$1,000.00
_	Dringing Loon	Eagle Pass, TX 78852	I o	Employer (Coo Instructions			
0	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	»)		
	Date 01/11/2024	Full name of contributor Harper J.D., Jad (Mr.) Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
	Dringing aggr	Eagle Pass, TX 78852 pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Date 01/25/2024	Full name of contributor Heredia, Claudio (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Eagle Pass, TX 78852					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/10/2024	Full name of contributor Mijares , Samuel (Mr.) Contributor address; City; Sta)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/25/2024	Full name of contributor Serna Aguilera, Diana (Mr. Contributor address; City; Sta Dallas, TX 75216-1425				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

MONET	ARY POLITICAL CONTRIB	BUTIONS	SCHEDULE A1
The Instru	ction Guide explains how to complet	e this form.	1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/35
			3 Filer ID (Ethics Commission Filers) 00020956
Date 01/16/2024	<u> </u>		7 Amount of Contribution (\$) \$1,000.0
	Crystal City, TX 78839		
Principal occu		9 Employer (See Instruction	ns)
	The Instru FILER NAME Serna, Robe Date 01/16/2024	The Instruction Guide explains how to complet FILER NAME Serna, Roberto (The Honorable) Date 01/16/2024 5 Full name of contributor out-of-state of Serna J.D., Eduardo d/b/a Texas Stop and Good Contributor address; City; State; Zip Code	Serna, Roberto (The Honorable) Date 01/16/2024 5 Full name of contributor out-of-state PAC (ID#:) Serna J.D., Eduardo d/b/a Texas Stop and Go (Mr.) 6 Contributor address; City; State; Zip Code Crystal City, TX 78839

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/35 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Serna, Roberto (The Honorable) 00020956 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 01/19/2024 Calderon, Rudy (Mr.) \$300.00 Put up campaign signs 7 Contributor address; City; State; Zip Code Crystal City, TX 78839 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) self - employed handyman 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how to c	omplete this f	form. 1 Total pages Schedule E: Sch: 1/1 Rpt: 7/35		
2	FILER NAME Serna, Roberto	(The Honorable)			3 Filer ID 000209	(Ethics Commission Filers) 56
4	TOTAL OF UN	IITEMIZED LOANS				\$
5	Date of loan 01/23/2024	7 Name of lender Serna, Norma (Mrs.)	out-of-state PA	C (ID#:)	9 Loan Amount (\$) \$10,000.00
6	Is lender a financial institution?	8 Lender address; City; Eagle Pass, TX 78852-6612	State;	Zip Code		10 Interest Rate 0 11 Maturity Date 01/16/2030
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instructions	;)	
	Federal Program	ns Director		Eagle Pass Independen	t School Di	strict
14	Description of Coll X None	ateral		15 Check if personal funds we	re deposited	into political account (See Instructions)
16	GUARANTOR INFORMATION X not applicable	17 Name of guarantor 18 Guarantor address; City;	State;	Zip Code		19 Amount Guaranteed (\$)
20	Principal occupation	I On		21 Employer (See Instructions	·)	<u> </u>
	Date of loan	Name of lender	out-of-state PA	C (ID#:)	Loan Amount (\$)
	01/19/2024	Serna J.D., Roberto (Mr.)				\$3,000.00
	Is lender a financial institution?	Lender address; City;	State;	Zip Code		Interest Rate 0 Maturity Date
		Eagle Pass, TX 78852				01/19/2030
		on / Job title (See Instructions)		Employer (See Instructions)	
	District Attorney			State of Texas		
	Description of Coll X None	ateral		Check if personal funds were deposited into political account (See Instructions)		·
	GUARANTOR INFORMATION	Name of guarantor				Amount Guaranteed (\$)
	X not applicable	Guarantor address; City;	State;	Zip Code		
	Principal occupation	on		Employer (See Instructions	·)	

SCHEDULE F1

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/24 Rpt: 8/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/25/2024	Aguilar, Alex (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P.O.Box 54
		Carrizo Springs, TX 78834
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign worker
		campaign works.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/23/2024	Alvarado, Albert (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	405 N 23rd Street
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Democratic candidates event in Dimmit County
		Demogratic dandidates event in Diminic County
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/11/2024	American Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,800.00	P. O. Box 650448
		Dallas, TX 75265-0448
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payment for signs from 3 D signs
		Payment for signs from 3 D signs
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/24 Rpt: 9/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/11/2024	American Express
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$605.00	P. O. Box 650448
		Dallas, TX 75265-0448
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Payment for purchase of Democratic VAN voter information
Ļ	0 1 0 0 1 1 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┡	·	
	Date	Payee name
L	01/15/2024	American Express
	Amount (\$)	Payee address; City; State; Zip Code
l	\$1,099.93	P. O. Box 650448
l		
L		Dallas, TX 75265-0448
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		payment for Facebook ads
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
l	01/25/2024	Barrera, Sylvia (Mrs.)
H	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	PO Box 305
l		
		Carrizo Springs, TX 78834
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign worker
L	0 1: 0:::::::::::::::::::::::::::::::::	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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 Solarios (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 3/24 Rpt: 10/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/12/2024	Calderon, Rudy (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	415 E. ValVerde
		Crystal City, TX 78839
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Expenses Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		For gas and lunch money for putting up signs in
		counties
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Or	1
	Date	Payee name
	01/19/2024	Calderon, Rudy (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	415 E. ValVerde
		Crystal City, TX 78839
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Expenses Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		For gas and food for putting up campaign signs
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- 1
	Date	Payee name
	01/05/2024	Campirano, Sandra (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	619 West Lake
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	· ·	Expense Printing	Expense s/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above	·)
1	Total pages Schedule F1:		-LI-)		3 Filer ID (Ethics Commission	Filers)
	Sch: 4/24 Rpt: 11/35	Serna, Roberto (The Honora	abie)		00020956	
4	Date	Payee name				
Ļ	01/12/2024	Campirano, Sandra (Mrs.)				
6	Amount (\$)	Payee address; City;	State; Zip C	Code		
	\$300.00	619 West Lake				
		Crystal City, TX 78839				
8	PURPOSE	a) Category (See Categories listed at the	e top of this schedule)	(b) Description		
	OF EXPENDITURE	Salaries/Wages/Contract La	bor	ı <u>—</u>	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense	
				campaign w		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office so	pught	Office held	
\vdash	Date	Payee name				
	01/19/2024	Campirano, Sandra (Mrs.)				
	Amount (\$)	Payee address; City;	State; Zip C	Code		
	\$300.00	619 West Lake				
		Crystal City, TX 78839				
	PURPOSE OF	a) Category (See Categories listed at the		(b) Description	ol outside of Toyon Complete Schedule T	
	EXPENDITURE	Salaries/Wages/Contract La	bor	1 -	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense	
				campaign w	vorker	
L						
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office so	ought	Office held	
-	Date	Payee name				
	01/25/2024	Campirano, Sandra (Mrs.)				
	Amount (\$)	Payee address; City;	State; Zip C	Code		
	\$300.00	619 West Lake	,p	-		
		Crystal City, TX 78839				
	PURPOSE OF	a) Category (See Categories listed at the		(b) Description	ol outside of Toyon Complete Cabadala T	
	EXPENDITURE	Salaries/Wages/Contract La	bor	 	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense	
				campaign w		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office so	pught	Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

kpense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/24 Rpt: 12/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/19/2024	Carrizo Springs Javelin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,110.00	P. O. Box 1046
		Carrizo Springs, TX 78834
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Purchase of ads for newspaper
		i dichase of aus for newspaper
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
-	Date	Payee name
	01/25/2024	
		Carrizo Springs Javelin
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.00	P. O. Box 1046
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Purchase of newspaper ad
		i dichase of newspaper ad
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
_	Date	Davies same
	01/23/2024	Payee name Controls Podro (Mrs.)
		Contreras, Pedro (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	P.O.Box 128
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaign worker
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	,
1 Total pages Schedule F1: Sch: 6/24 Rpt: 13/35	2 FILER NAME Serna, Roberto (The Honorable) 3 Filer ID (Ethics Commission Filers) 00020956
4 Date	5 Payee name
01/05/2024	Coronado, Tina (Mrs.)
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code619 E. Dimmit St.
	Crystal City, TX 78839
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	campaign worker
	ouripaigh worker
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/12/2024	Coronado, Tina (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	619 E. Dimmit St.
	Crystal City, TX 78839
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense campaign worker
	ouripaigh worker
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Data	
Date	Payee name Caronado, Tina (Mrs.)
01/19/2024	Coronado, Tina (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	619 E. Dimmit St.
	Crystal City, TX 78839
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense campaign worker
	campaign worker
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	•
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/24 Rpt: 14/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/25/2024	Coronado, Tina (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	619 E. Dimmit St.
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	01/16/2024	Eagle Pass Business Journal
H	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	P. O. Drawer 2160
	Ψ2,000.00	1 . G. Biawoi 2100
		Eagle Pass, TX 78853-2160
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Purchase of newspaper ads
L	Commiste ONII V if direct	Constitute (Office helds a name of the constitute of the constitut
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
⊨	<u> </u>	
	Date	Payee name
	01/18/2024	Eagle Pass News Leader
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	168 Washington Street
		Eagle Pass, TX 78852
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Purchase of newspaper ads
		T dichase of newspaper aus
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Con Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
Ļ			2
1	Total pages Schedule F1: Sch: 8/24 Rpt: 15/35	Serna, Roberto (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020956
4	Date	5 Payee name	
	01/02/2024	El Latino	
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 1212 Katy Dr. Suite 1212 Eagle Pass, TX 78852	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin,	TX, officeholder living expense newspaper ads
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/04/2024	Election Nerds LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,795.09	2076 N. Veterans Blvd.	
		Eagle Pass, TX 78852	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	(=
	EXPENDITURE	Navertising Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense
			gistered voters
		Wandus to re	gistered voters
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/09/2024	Galeria News	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	P.O.Box 4483	
		Eagle Pass, TX 78852	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T.
	EXI ENDITORE	l	TX, officeholder living expense
		Purchase of a	ads in newspaper and internet
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Sinos noiu

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 9/24 Rpt: 16/35	Serna, Roberto (The Honorable) 00020956	
4	Date	5 Payee name	
	01/11/2024	Herrera, Annixa (Ms.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$180.00	791 N. Bibb	
		Eagle Pass, TX 78852	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taylor Camplete Schedule T	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Creation of videos for campaign	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	experional to benefit C/Or		
	Date	Payee name	
	01/18/2024	Herrera, Annixa (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$90.00	791 N. Bibb, Unit 233	
		-	
		Eagle Pass, TX 78852	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense. (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Creation of ad for newspapers	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/25/2024	Herrera, Annixa (Ms.)	
	Amount (\$) \$90.00	Payee address; City; State; Zip Code 791 N. Bibb, Unit 233	
	φ90.00	791 N. BIDD, OTHE 233	
		Eagle Pass, TX 78852	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Creation of ad for newspapers	
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/OH		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
l	Sch: 10/24 Rpt: 17/35	Serna, Roberto (The Honorable) 00020956	
4	Date	5 Payee name	_
l	01/25/2024	Herrera, Annixa (Ms.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
l	\$90.00	791 N. Bibb, Unit 233	
l			
		Eagle Pass, TX 78852	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Creation of ad for newspapers	
L			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	'		_
	Date	Payee name	
L	01/11/2024	Interview Magazine	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	902 Seco Road	
		Eagle Pass, TX 78852	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
l		Purchase of ads in newspaper and internet	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
F	Date	Payee name	_
	01/05/2024	Martinez, Mari (Mrs.)	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$300.00	P.O. Box 454	
l			
		Asherton, TX 78827	
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		campaign worker	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	experience to beliefit 6/01	·	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

l	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 11/24 Rpt: 18/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
l	01/12/2024	Martinez, Mari (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$300.00	P.O. Box 454
l		
		Asherton, TX 78827
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign worker
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	'	
	Date	Payee name
L	01/05/2024	Martinez, Rosa
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$250.00	P.O. Box 458
l		
		Asherton, TX 78827
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		campaign worker
		outhpasg. Home.
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/05/2024	Martinez, Rosa
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 458
l		
l		Asherton, TX 78827
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign worker
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to beliefit 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	,	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/24 Rpt: 19/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/18/2024	Maverick County Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1299 Main Street, suite A and B
L		Eagle Pass, TX 78852
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	ZA ZADITORZ	Candidate/Officeholder/Political Committee
		Contribution to the Maverick County Democratic Party for party purposes
		i dity for party purposes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/05/2024	Mendez, Minerva (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	167 Highland Circle
		Crystal City, TX 78839
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expanse.
		Check if Austin, TX, officeholder living expense campaign worker
		Campaign worker
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
	Date	Payee name
	01/12/2024	Mendez, Minerva (Mrs.)
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	(' <i>)</i>	
	\$300.00	167 Highland Circle
		On the City TV 70000
		Crystal City, TX 78839
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if traval outside of Taxas, Complete Schedule T
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/24 Rpt: 20/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/19/2024	Mendez, Minerva (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	167 Highland Circle
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign worker
		campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_		
	Date	Payee name
	01/05/2024	Padilla, Maria (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P. O. Box 54
		Carrizo Springs, TX 78834
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign worker
		campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
-	5 .	
	Date	Payee name
	01/12/2024	Padilla, Maria (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P. O. Box 54
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		campaign worker
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/24 Rpt: 21/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
L	01/25/2024	Padilla, Maria (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P. O. Box 54
		Coming Carings TV 70034
Ļ	PURPOSE	Carrizo Springs, TX 78834
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
"	expenditure to benefit C/OI	
⊨	Date	Payee name
	01/05/2024	Padilla, Nora (Mrs.)
H	Amount (\$)	Payee address; City; State; Zip Code
l	\$300.00	P.O. Box 54
l		
		Carrizo Springs, TX 78834
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┡	•	
	Date 01/12/2024	Payee name Padilla, Nora (Mrs.)
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O. Box 54
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 15/24 Rpt: 22/35	2 FILER NAME Serna, Roberto (The Honorable) 3 Filer ID (Ethics Commission Filers) 00020956
4	Date 01/25/2024	5 Payee name Padilla, Nora (Mrs.)
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code P.O. Box 54 Carrizo Springs, TX 78834
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign worker
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/05/2024	Payee name Perez, Frances (Mrs.)
	Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 472 Carrizo Springs, TX 78834
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/12/2024	Payee name Perez, Frances (Mrs.)
	Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 472
		Carrizo Springs, TX 78834
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/24 Rpt: 23/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/25/2024	Perez, Francies (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P.O.Box 472
		Carrizo Springs, TX 78834
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		campaign worker
		oumpaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Davies same
		Payee name
	01/05/2024	Perez, Sarah (Mrs.)
,	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O. Box 311
		Big Wells, TX 78830
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	,,,,,,,,	Check if Austin, TX, officeholder living expense
		campaign worker
	Ones data ONII V if disease	Our did to 10 ff as had done as many
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	'	
	Date	Payee name
	01/12/2024	Perez, Sarah (Mrs.)
,	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O. Box 311
		Big Wells, TX 78830
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	,,,,,,,,	Check if Austin, TX, officeholder living expense
		campaign worker
	Complete ONE V if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Comm	ission Filers)
Sch: 17/24 Rpt: 24/35	Serna, Roberto (The Honorable)	00020956	
4 Date	5 Payee name	1	
01/05/2024	Perez, Yolanda (Mrs.)		
6 Amount (\$)	7 Payee address; City; State; Zip Co	de	
\$300.00	P.O.Box 175		
	Crystal City, TX 78839		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense	
		campaign worker	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght Office held	
experientare to benefit 6/0	<u> </u>		
Date	Payee name		
01/12/2024	Perez, Yolanda (Mrs.)		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$300.00	P.O.Box 175		
	Crystal City, TX 78839		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITORE		Check if Austin, TX, officeholder living expense	
		campaign worker	
0 1: 01!! \(\text{''} \) ''			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held	
Date	Payee name		
01/19/2024	Perez, Yolanda (Mrs.)		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$300.00	P.O.Box 175		
	Crystal City, TX 78839		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		campaign worker	
Complete CNII V if direct	Condidate/Officeholder name	Office hold	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/24 Rpt: 25/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/25/2024	Perez, Yolanda (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P.O.Box 175
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign worker
		Sampaign Worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/25/2024	Portales, Petra (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1600 N. 7th Street
		Crysyal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/19/2024	Puente, Amelia (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	1511 N. 7th Street
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign worker
	Complete ONE Wife direct	Condidate Office helder name
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	,
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commi	ission Filers)
l	Sch: 19/24 Rpt: 26/35	Serna, Roberto (The Honorable) 00020956	
4	Date	5 Payee name	
l	01/25/2024	Puente, Amelia (Mrs.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$450.00	1511 N. 7th Street	
l			
l		Crystal City, TX 78839	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
l		Check if Austin, TX, officeholder living expense campaign worker	
l		Campaigh worker	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
ľ	expenditure to benefit C/O	and the second of the second o	
⊨	Date	Payee name	
l	01/05/2024	Puente, Rosana (Miss)	
┝	Amount (\$)	Payee address; City; State; Zip Code	
l	\$350.00		
l	φοσο.σσ	1001 vina Hormoda	
l		Crystal City, TX 78839	
┝	PURPOSE		
l	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		campaign worker	
L			
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
L			
l	Date	Payee name	
L	01/12/2024	Puente, Rosana (Miss)	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$350.00	1001 Villa Hermosa	
l			
		Crystal City, TX 78839	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
l		campaign worker	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	DH .	

SCHEDULE F1

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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 20/24 Rpt: 27/35	Serna, Roberto (The Honorable) 00020956	
4	Date	5 Payee name	
L	01/19/2024	Puente, Rosana (Miss)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$350.00	1001 Villa Hermosa	
		Crystal City, TX 78839	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	LAI LIIDII OKL	Check if Austin, TX, officeholder living expense campaign worker	
		oampaigh worker	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
Г	Date	Payee name	
L	01/25/2024	Puente, Rosana (Miss)	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$350.00	1001 Villa Hermosa	
		Crystal City, TV 70020	
L	DUDDOCE	Crystal City, TX 78839	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign worker	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	o	
F	Date	Payee name	_
	01/19/2024	Ramirez, Sergio (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$400.00	2106 Buffalo Blvd.	
L		Carrizo Springs, TX 78834	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		campaign worker	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

SCHEDULE F1

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/24 Rpt: 28/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/25/2024	Ramirez, Sergio (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	2106 Buffalo Blvd.
		Carrizo Springs, TX 78834
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		campaign worker
		Campaign Worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	Date	Payee name
	01/22/2024	Ramos, Federico Daniel (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	956 Medina Steet Apt. #5
		Eagle Pass, TX 78852
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Purchase of ads on internet
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/22/2024	Ruiz, Isaak
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	410 S. Bibb Ave
		Eagle Pass, TX 78852
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Purchase of ads on internet
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
1		
I		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/24 Rpt: 29/35	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/18/2024	The News Gram
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	2431 Del Rio Blvd
		Eagle Pass, TX 78852
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Purchase of newspaper ads.
		T dionace of homopaper ade.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
F	Date	Payee name
	01/25/2024	The News Gram
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	2431 Del Rio Blvd
		Eagle Pass, TX 78852
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Purchase of ad in newspaper
		T dionace of ad in novopaper
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/05/2024	Vega, Alma (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1505 Wooding Street
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		campaign worker
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

SCHEDULE F1

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-		/Wages	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
ᆫ			II Guide explains now to c	ompi	ete tilis ioriii.				
1	Total pages Schedule F1: Sch: 23/24 Rpt: 30/35	2 FILER NAME Serna, Roberto (The Ho	norable)			3	Filer ID 00020956	(Ethics Commission File	rs)
Ŀ	·		,						
4	Date	5 Payee name							
	01/12/2024	Vega, Alma (Mrs.)							
6	Amount (\$)	7 Payee address; City;	State; Zip C	ode					
	\$300.00	1505 Wooding Street							
		•							
		Carriae Caringo TV 700	24						
L		Carrizo Springs, TX 788							
8	PURPOSE	(a) Category (See Categories liste	d at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Salaries/Wages/Contract	t Labor		=		de of Texas. Com		
					\Box		officeholder living	expense	
					campaign wo	rke	: [
9	Complete ONLY if direct	Candidate/Officeholder nam	e Office so	ught			Office he	eld	
	expenditure to benefit C/O								
F	Date	Payee name							
	01/25/2024	Vega, Alma (Mrs.)							
H			State; Zip C	odo					
	Amount (\$)	, ,	State, Zip C	oue					
	\$300.00	1505 Wooding Street							
		Carrizo Springs, TX 788	34						
	PURPOSE	(a) Category (See Categories liste	d at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Salaries/Wages/Contrac			Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	•			ш		officeholder living	expense	
					campaign wo	rke	er		
	Complete ONLY if direct	Candidate/Officeholder nam	e Office so	ught			Office he	eld	
	expenditure to benefit C/O								
F	Date	Payee name							
	01/19/2024	Zavala County Sentinel							
			0 7. 0						
	Amount (\$)	Payee address; City;	State; Zip C	ode					
	\$810.00	202 E Nueces Street							
		Crystal City, TX 78839							
	PURPOSE	(a) Category (See Categories liste	d at the top of this schedule)	(b)	Description				
	OF	Advertising Expense	a at ano top or ano corrodato,	` `		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE				Check if Austin,	TX,	officeholder living	expense	
					Purchase of a	ads	in newspap	er	
Г	Complete ONLY if direct	Candidate/Officeholder nam	e Office so	ught			Office he	eld	
	expenditure to benefit C/O			-					
\vdash									

SCHEDULE F1

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 Credit Card Payment		, ₋ I Coi	mmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		nse es/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	category not listed above)
┞	Total pages Schedule F1:	_			пас схрішно і			3	Filor ID	(Ethics Commission Filers)
	Sch: 24/24 Rpt: 31/35	_		berto (The Honor	able)				Filer ID 00020956	(Luics Commission Filers)
4	Date	5	Payee name	e						
	01/25/2024			unty Sentinel						
6	Amount (\$)	7	Payee addr	ess; City;	State;	Zip Code				
	\$100.00		202 E Nue	ces Street						
			Crystal Cit	y, TX 78839						
8	PURPOSE	(a)	Category (See Categories listed at th	ne top of this sch	_{edule)} (b) Description			
	OF EXPENDITURE		Advertising	g Expense					ide of Texas. Com	
							_		, officeholder living	expense
							Purchase o	T nev	wspaper ad	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	fficeholder name	C	Office sough	t		Office he	eld

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission File	ers)			
Sch: 1/3 Rpt: 32/35	Serna, Roberto (Th	e Honorable)		00020956				
4 CREDIT CARD ISSUER		ncial institution n Express	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$400.00	01/14/2024	01/19/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip C	Code			
	Facebook		P. O. Box 650448					
			Dallas, TX 75265-0448					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description					
X Political	Advertising Expense	of this schedule)	Purchase of Facebook ac	ds				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 01/19/2024	r Paid				
	\$274.93	01/12/2024	01/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip C	Code			
	Facebook		P. O. Box 650448					
			Dallas, TX 75265-0448					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cahadula)	(b) Description					
X Political	Advertising Expense	or this scriedule)	Purchase of Facebook ads					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder		ce sought Office held					
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$125.00	01/03/2024	01/05/2024					
	4120.00	01/00/2021						
PAYEE	(a) Payee name	I	(b) Payee address;	City, State, Zip C	Code			
	l		P. O. Box 650448					
	Facebook							
			Dallas, TX 75265-0448					
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description					
EXPENDITURE	Advertising Expense	of this scriedule)	Purchase of ads					
X Political								
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
, , , , , , , , , , , , , , , , , , , ,	<u> </u>							

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)					
Sch: 2/3 Rpt: 33/35	Serna, Roberto (The Honorable)			00020956					
4 CREDIT CARD ISSUER	Name of financial institution See previous 5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD			ITURES	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid				
	\$605.00	01/06/2024	01/17/202	4					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	Texas Democratic I	Party		hland Mall Blvd	., Suite 508				
8 PURPOSE OF	(a) Category		Austin, TX (b) Descripti						
8 PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top Advertising Expense	of this schedule)		of VAN informat	tion for mailing	out ads			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 01/06/2024	(c) Date(s) 0 01/19/202	Credit Card Issuei 4	Paid				
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	Facebook		P. O. Box						
			Dallas, TX 75265-0448						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Purchase of ads						
X Political	3 pr								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
PAYMENT	(a) Amount Charged \$2,800.00	(b) Date of Charge 01/11/2024	(c) Date(s) 0 01/17/202	Credit Card Issuei 4	r Paid				
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	2 D Ciano		7996 1st S	treet					
	3-D Signs								
			Summerset, TX 78069						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti						
l <u> </u>	Advertising Expense	or time estricularly	Purchase	of campaign sig	ıns				
X Political				_					
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH									

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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/Politica				Travel in District Travel Out of District OTHER (enter a category not listed above)				
		ruction Guide explains l	now to complete this form.					
· · ·	2 FILER NAME				ics Commiss	sion Filers)		
Sch: 3/3 Rpt: 34/35	Serna, Roberto (Th	e Honorable)		00020956				
CREDIT CARD	Name of finar	ncial institution						
ISSUER	see p	revious						
			CARD					
PAYMENT	(a) Amount Charged	(b) Date of Charge		er Paid				
	\$250.00	01/11/2024	01/19/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
			P. O. Box 650448					
	насероок І							
			Dallas, TX 75265-0448					
PURPOSE OF	(a) Category	of this color district	(b) Description					
	,	or this schedule)	Purchase of Ads					
X Political	. avoluting Expende							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX	, officeholder living exp	pense			
Complete ONLY if direct	Candidate/Officeholder	name C	ffice sought	Office held				
xpenditure to benefit C/OH								
	Candidate/Officeholder/Politica Total pages Schedule F4: Sch: 3/3 Rpt: 34/35 CREDIT CARD ISSUER PAYMENT PAYEE PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Candidate/Officeholder/Political Committee The Inst Total pages Schedule F4: Sch: 3/3 Rpt: 34/35 CREDIT CARD ISSUER PAYMENT (a) Amount Charged \$250.00 PAYEE (a) Payee name Facebook PURPOSE OF EXPENDITURE X Political Non-Political (c) Check if travel outside Candidate/Officeholder	Total pages Schedule F4: Sch: 3/3 Rpt: 34/35 CREDIT CARD ISSUER PAYMENT (a) Amount Charged \$250.00 PAYEE (a) Payee name Facebook PURPOSE OF EXPENDITURE X Political Non-Political Non-Political Candidate/Officeholder/Political Committee Legal Services The Instruction Guide explains in the Instruction G	The Instruction Guide explains how to complete this form. Total pages Schedule F4: Sch: 3/3 Rpt: 34/35 CREDIT CARD ISSUER PAYMENT (a) Amount Charged \$250.00 PAYEE (a) Payee name Facebook Pacebook Pare Ditical Non-Political (c) Category See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Total pages Schedule F4: 2 FILER NAME Serna, Roberto (The Honorable) 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD (c) Date(s) Credit Card Issue 01/19/2024 (d) Payee address; P. O. Box 650448 Dallas, TX 75265-0448 (b) Paseription Purchase of Ads	The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Sch: 3/3 Rpt: 34/35 Serna, Roberto (The Honorable) Name of financial institution See previous PAYMENT (a) Amount Charged \$250.00 (b) Date of Charge 01/11/2024 (c) Date(s) Credit Card Issuer Paid 01/19/2024 PAYEE (a) Payee name Facebook PURPOSE OF EXPENDITURE (G) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Complete ONLY if direct Candidate/Officeholder name Office held Total pages Schedule this form. 3 Filer ID (Eth 00020956 TOTAL OF UNITEMIZED EXPENDITURES (C) Date(s) Credit Card Issuer Paid 01/19/2024 (c) Date(s) Credit Card Issuer Paid 01/19/2024 (d) Date(s) Credit Card Issuer Paid 01/19/2024 (b) Payee address; City, P. O. Box 650448 (b) Description Purchase of Ads Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held	The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Sch: 3/3 Rpt: 34/35 Serna, Roberto (The Honorable) CREDIT CARD ISSUER Amount Charged \$250.00 See previous (a) Amount Charged \$250.00 See D1/11/2024 PAYEE (a) Payee name (b) Payee address; City, State, P. O. Box 650448 Facebook PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (c) Category Character (b) Description Purchase of Ads (c) Check if Laustin, TX, officeholder living expense Candidate/Office hold The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commiss 00020956) 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD (c) Date(s) Credit Card Issuer Paid 01/19/2024 (d) Payee address; City, State, P. O. Box 650448 Dallas, TX 75265-0448 (b) Description Purchase of Ads (c) Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Ove Polling Ex Printing E: Salaries/V	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME	E 3 F			
	Sch: 1/1 Rpt: 35/35		Serna, Roberto (The Honorable)				Filer ID (Ethics Commission Filers) 00020956
4	Date	5	Payee name				
	01/01/2024	1	American Express				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$150.00	1	P. O. Box 650448	·			
	Reimbursement from political contributions intended		Dallas, TX 75265-0448				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense			Ch	eck if Austin, TX, officeholder living expense
	EXI ENDITORE				ads on Facebook		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	didate/Officeholder name		Office sought		Office held
	Date		Payee name				
	01/01/2024		American Express				
Amount (\$) Payee address; City; State; Zip Code							
	\$58.91		P. O. Box 650448				
	Reimbursement from political contributions intended		Dallas, TX 75265-0448				
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description		eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		supplies		L	_	eck if Austin, TX, officeholder living expense
					hammer, nails an	d c	able ties
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	01/05/2024		American Express				
Т	Amount (\$)	T	Payee address; City; State;	Zip Co	de		
	\$125.00	1	P. O. Box 650448	•			
	Reimbursement from						
	political contributions intended		Dallas, TX 75265-0448				
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description	₹ .	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		L	Ch	eck if Austin, TX, officeholder living expense
					ads of Facebook		
\vdash	Complete ONLY if direct	Can	ndidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH	Cui	and the second s		Cinco Sought		Since Hold