CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1	Filer ID (Eth	ics Commission Filers)	2 Total pages file	1:			OFFICE U	SE ONLY
	00043618		46				Date Received	
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Gina M.			MI	ELECTRONICAL 01/18/2024	LY FILED
		NICKNAME	LAST			SUFFIX		
			Benavides				Date Hand-delivered or D	Date Postmarked
4	ORIGINAL REPORT TYPE	X January 15	Runoff		Other (s	pecify)		1
		July 15	Exceeded modif	1 0			Receipt #	Amount
		30th day before election	appointment (off	iceholder only)	ei		Date Processed	
L		8th day before election	Final Report (Att					
5	ORIGINAL PERIOD COVERED	Month Day Yea 07/01/2023	ar THROUG	Month H 12/	Day 31/2023	Year	Date Imaged	
6	EXPLANATION OF C	CORRECTION					-	
	T madvenenuy input t	he figure from the last repo		n upualing w	ur ure new	conect ligure.		
7	AFFIDAVIT							
				swear, or affir nd correct.	m, under p	enalty of perjury	ν, that this corrected ι	report is true
			С	heck the box	next to any	and all applical	ble statements:	
			\square	was mad	e in good fa	aith and without	affirm that the origina an intent to mislead ned in the report.	
			E	report no that the r swear, or	t later than eport as ori	the 14th busine ginally filed is in any error or on	that I am filing this c ss day after the date accurate or incomple nission in the report a	l learned ete. l
						onorable Cina	M. Benavides	
			_		_		or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE			_ 9			
	Sworn to and subsc	ribed before me, by the sai	d			, this th	ne	day
		, 20, to cer						
	Signature of offic	er administering oath	Printed name of	officer admir	istering oa	th	Title of officer admini	stering oath
	Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections							

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instructior	n Guide explains how to	complete this form	1 Filer ID (Ethics Comr 0004361	nission Filers) 8	2 Total pages	filed: 46
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER	The Honorable	Gina M.				
NAME		Giria M.			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	01/18/2024	
		Benavides				
			<u> </u>	710 0005	Data Lland delivered	l or Date Postmarked
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT/SUITE#; C	Υ;	ZIP CODE	Date Hand-delivered	I OI Dale Posiliarkeu
MAILING						
ADDRESS	REDACTED PER	R 254.0313, GOV'I			Receipt #	Amount
		(204.0010, COV	CODE			
Change of Address					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Ms.	Leticia M.				
NAME		Lotiola III				
	NICKNAME	LAST			SUFFIX	
		Perez				
6 CAMPAIGN	STREET ADDRESS (N	O PO BOX PLEASE	i); Al	PT / SUITE #; CITY;	S	TATE; ZIP CODE
TREASURER						
ADDRESS						
(Residence or Business)	REDACTED PER	R 254.0313, GOV'7	CODE			
7 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER						
PHONE	(361) 765-9004					
8 REPORT						
TYPE	X January 15	30th day bef	fore election	Runoff		campaign treasurer
					appointment (or	fficeholder only)
	July 15	8th day befo	ore election	Exceeded modified	Final Report (A	ttach C/OH-FR)
				reporting limit		
9 PERIOD	Month Day	/ear		Month Day	Year	
COVERED			TUPOUCU			
OOVERLED	07/01/2023		THROUGH	12/31/202	3	
10 ELECTION	ELECTION DA	TE		ELECTION TYPE		
		/ear	Primary	Runoff	Other	
	11/06/2024		1 minuty			
	11/00/2024	X	General	Special		
			-4			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	Court Of Appeals, Ju	stice Place 5 Distr	rict 13	Court of Appeals	s,Chief Justice F	Place 1 District 13
		GC	D TO PAGE 2			
Forms provided by Te	exas Ethics Commissio	n \\\\\\\\	.ethics.state.tx.	115	۵/\	rsion V3.5.1.0bfcfb67
i onno provided by Te				45	ve	1001001

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 3 of 46

I

13 C / OH NAME	Benavides, Gina M. (The Honorable)	14 Filer ID 00043618	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or offic	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC					
	COMMITTEE CAMPAIGN TREASURER ADDRESS					
16 CONTRIBUTION TOTALS	\$ 0.00					
	\$ 89,409.60					
COTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS				\$ 0.00		
TOTALS	\$ 5,414.08					
CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE BALANCE REPORTING PERIOD				\$ 124,150.52		
OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY LOAN TOTALS OF THE REPORTING PERIOD				\$ 0.00		
17 AFFIDAVIT		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.				
The Honorable Gina M. Benavides						
Signature of Candidate or Officeholder						
AFFIX NOTARY STAMP / SEAL ABOVE						
		aid	, this the	day		
of	, 20, to c	ertify which, witness my hand and seal of office.				
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath		
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.0bfcfb67		

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

4 of 46

18 FILER NAM Benavide:	IE s, Gina M. (The Honorable)	19 Filer ID 00043618	(Ethics Commission Filers)
	E SUBTOTALS		
NAME OF	SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 86,133.65
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 3,275.95
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$ 4,373.89
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		\$ 1,040.19
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

6 Contributor address; City; State; Zip Code Harlingen, TX 78551 9 Contributor's Principal Occupation 9 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor's a child, law firm of parent(s) (if any) Date Full name of contributor 09/28/2023 Full name of contributor 00/28/2023 Full name of contributor 09/28/2023 Full name of contributors is city; State; Zip Code Contributor's Principal Occupation Contributor's spouse (if any) It contributor is a child, law firm of parent(s) (if any) Law firm of contributor's spouse (if any) It contributor is a child, law firm of parent(s) (if any) Amount of Contributor (s) It contributor is a child, law firm of parent(s) (if any) Amount of Contributor (s) It contributor is a child, law firm of parent(s) (if any) Amount of Contribution (s) 12/05/2023 Full name of contributor Amount of Contribution (s) 26.63 Contributor addres	Benavides, Gina M. (The Honorable) 00043613 4 Date 5 Full name of contributor	The Instruction Guide explains how	1 Total pages Schedule A(J)1: Sch: 1/28 Rpt: 5/46		
4 Date 5 Full name of contributor out-of-state PAC (ID#:	4 Date 5 Full name of contributor out-of-state PAC (IDIF 7 Amount of Contribution (\$) \$500.00 9/28/2023 6 Contributor address: City: State: 2ip Code 7 Amount of Contributor's \$500.00 8 Contributor's employer/law firm 9 Contributor's by Title 7 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor's a child, law firm of parent(\$) (if any) Amount of Contributor's spouse (if any) 24 Full name of contributor out-of-state PAC (IDIF Amount of Contribution (\$) 9/28/2023 Full name of contributor out-of-state PAC (IDIF Amount of Contribution (\$) 09/28/2023 Full name of contributor out-of-state PAC (IDIF Amount of Contribution (\$) 09/28/2023 Full name of contributor Contributor's abb Title S250.00 Contributors employer/law firm Law firm of contributor's spouse (If any) S260.00 If contributor is a child, law firm of parent(\$) (f1 any) Law firm of contributor's spouse (If any) \$26.63 12/05/2023 Full name of contributor out-of-state FAC (IDIF Amount of Contributor (\$) \$26.63 <	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
09/28/2023 Adams & Graham, L.L.P. \$500.00 6 Contributor address; City; State; Zip Code	09/28/2023 Adams & Graham, L.L.P. \$500.00 6 Contributor address; City, State; Zip Code ************************************	Benavides, Gina M. (The Honorable)		00043618	
6 Contributor address; City; State; Zip Code Harlingen, TX 78551 9 8 Contributor's Principal Occupation 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Aguilar & Zabarte 09/28/2023 Full name of contributor 09/28/2023 Full name of contributor's tate; Zip Code Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contribution (\$) 12/05/2023 Full name of contributor out-of-state PAC (IDer) Attemport of Contributor address; City, State; Zip Code Amount of Contribution (\$) \$26.63	6 Contributor address; City; State; Zip Code Harlingen, TX 78551 9 30 Contributor's Principal Occupation 9 10 Contributor's employer/law firm 11 12 If contributor's employer/law firm 11 12 Full name of contributor out-of-state PAC (ID#:	4 Date 5 Full name of contributor	out-of-state PAC (ID#:	_) 7 Amount of Contribution (\$)	
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Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/28/2023 Aguilar & Zabarte \$250.00 Contributor address; City; State; Zip Code \$250.00 Brownsville, TX 78520 Contributor's Job Title Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2023 Full name of contributor out-of-state PAC (ID#:) McAllen, TX 78501 McAllen, TX 78501	Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/28/2023 Aguilar & Zabarte \$250.00 Contributor address; City; State; Zip Code Second Brownsville, TX 78520 Contributor's Decupation Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Almague, Pablo Sec 63 Contributor's Principal Occupation Contributor's Job Title McAllen, TX 78501 Contributor's Job Title Contributor's Principal Occupation Contributor's Job Title McAllen, TX 78501 Contributor's Job Title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any)	12 If contributor is a shild low firm of parant(a) (if an			
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09/28/2023 Aguilar & Zabarte \$250.00 Contributor address; City; State; Zip Code Brownsville, TX 78520 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Out-of-state PAC (ID#:) Atmague, Pablo Atmague, Pablo Contributor address; City; State; Zip Code McAllen, TX 78501	09/28/2023 Aguilar & Zabarte \$250.00 Contributor address; City; State; Zip Code Brownsville, TX 78520 \$250.00 Contributor's Principal Occupation Contributor's Job Title \$250.00 Contributor's employer/law firm Law firm of contributor's spouse (if any) \$250.00 If contributor is a child, law firm of parent(s) (if any) Law firm of contributor's spouse (if any) \$26.63 Date Full name of contributor out-of-state PAC (ID#:				
Contributor address; City; State; Zip Code Brownsville, TX 78520 Contributor's Principal Occupation Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor 12/05/2023 Full name of contributor Out-of-state PAC (ID#:) Atmague, Pablo Contributor address; City; State; Zip Code McAllen, TX 78501	Contributor address; City; State; Zip Code Brownsville, TX 78520 Contributor's Principal Occupation Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Date Pull name of contributor 12/05/2023 Almague, Pablo Contributor's Principal Occupation Almague, Pablo Contributor's Principal Occupation McAllen, TX 78501 Contributor's Principal Occupation Contributor's Principal Occupation Attorney Contributor's spouse (if any)		out-of-state PAC (ID#:		
Brownsville, TX 78520 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2023 Full name of contributor out-of-state PAC (ID#:) McAllen, TX 78501 McAllen, TX 78501	Brownsville, TX 78520 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Law firm of contributor's spouse (if any) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 200 Contributor address; City; State; Zip Code Amount of Contribution (\$) McAllen, TX 78501 Contributor's Job Title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA Law firm of contributor's spouse (if any)				
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501	Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contributor's spouse (if any) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2023 Almague, Pablo \$26.63 Contributor's Principal Occupation Contributor's Job Title McAllen, TX 78501 Contributor's Job Title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA Law firm of contributor's spouse (if any)	Contributor address; City; Sta			
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501	Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contributor's spouse (if any) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2023 Almague, Pablo \$26.63 Contributor's Principal Occupation Contributor's Job Title McAllen, TX 78501 Contributor's Job Title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA Law firm of contributor's spouse (if any)				
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501	Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contributor's spouse (if any) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2023 Almague, Pablo \$26.63 Contributor's Principal Occupation Contributor's Job Title McAllen, TX 78501 Contributor's Job Title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA Law firm of contributor's spouse (if any)	Brownsville, TX 79520			
Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501	Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code Sector McAllen, TX 78501 Contributor's principal Occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA Law firm of contributor's spouse (if any)		Contributorio Job Title		
If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor 12/05/2023 Almague, Pablo Contributor address; City; State; Zip Code McAllen, TX 78501	If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501 McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title Attorney Attorney Law firm of contributor's spouse (if any) TRLA TRLA Law firm of contributor's spouse (if any)	Contributor's Principal Occupation			
If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor 12/05/2023 Almague, Pablo Contributor address; City; State; Zip Code McAllen, TX 78501	If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501 McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title Attorney Attorney Law firm of contributor's spouse (if any) TRLA TRLA Law firm of contributor's spouse (if any)	Contributor's employer/law firm	r's spouse (if any)		
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501	Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501 McAllen, TX 78501 Contributor's Principal Occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA TRLA				
12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501	12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501 McAllen, TX 78501 Contributor's Principal Occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA TRLA	If contributor is a child, law firm of parent(s) (if ar	цу)		
12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501	12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501 McAllen, TX 78501 Contributor's Principal Occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA TRLA				
12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501	12/05/2023 Almague, Pablo \$26.63 Contributor address; City; State; Zip Code McAllen, TX 78501 McAllen, TX 78501 Contributor's Principal Occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA TRLA	Date Full name of contributor	out-of-state PAC (ID#:) Amount of Contribution (\$)	
Contributor address; City; State; Zip Code McAllen, TX 78501	Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Attorney Contributor's employer/law firm TRLA	12/05/2023 Almague, Pablo		\$26.63	
	Contributor's Principal Occupation Contributor's Job Title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA TRLA				
	Contributor's Principal Occupation Contributor's Job Title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA TRLA				
	Contributor's Principal Occupation Contributor's Job Title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA TRLA				
	Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA TRLA	McAllen, TX 78501			
Contributor's Principal Occupation Contributor's Job Title	Contributor's employer/law firm Law firm of contributor's spouse (if any) TRLA	Contributor's Principal Occupation	Contributor's Job Title		
Attorney Attorney	TRLA	Attorney	Attorney		
Contributor's employer/law firm Law firm of contributor's spouse (if any)		Contributor's employer/law firm	Law firm of contributo	r's spouse (if any)	
TRLA	If contributor is a child, law firm of parent(s) (if any)	TRLA			
If contributor is a child, law firm of parent(s) (if any)		If contributor is a child, law firm of parent(s) (if ar	y)		
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2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Benavides, G	ina M. (The Honorable)		00043618
4 Date 07/27/2023			7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's er	nployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/04/2023	Almaguer, Pablo		\$52.95
Contributor address; City; State; Zip Code			
	McAllen, TX 78501		
		Contributor's Job Title	
		Attorney	
Contributor's employer/law firm Law firm of contributor's sp TRLA		ouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/28/2023	Armstrong, Ronald		\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's employer/law firm		Law firm of contributor's sp	oouse (if any)
Armstrong Law Firm			
If contributor is	a child, law firm of parent(s) (if any)		
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2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Benavides, C	Gina M. (The Honorable)			00043618
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/31/2023	Atlas, Hall, & Rodriguez, I			\$2,500.00
	6 Contributor address; City; St]
	McAllen, TX 78502		1	
8 Contributor's F	Principal Occupation		9 Contributor's Job Title	
10 Contributor's e	omplovor/low firm		11 Law firm of contributor's sp	pourso (if any)
	employer/law little		II Law IIIII of contributor's sp	
12 If contributor is	s a child, law firm of parent(s) (if a	anv)		
Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
11/07/2023	Baker Botts		,	\$2,500.00
	Contributor address; City; St	ate; Zip Code		
	Houston, TX 77002			
Contributor's F	Principal Occupation		Contributor's Job Title	·
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)
If contributor in	s a child, law firm of parent(s) (if a			
	s a criliu, law littl of parefit(s) (if a	ury)		
Date	Full name of contributor		\ \	Amount of Contribution (\$)
10/22/2023	Begum, Alex	out-of-state PAC (ID#:)	\$2,500.00
10/22/2023		ate: Zin Code		φ2,000.0
	Brownsville, TX 78526			
Contributor's F	rincipal Occupation		Contributor's Job Title	
Attorney			Attorney	
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)
Attorney			Begum Law Firm	
If contributor is	s a child, law firm of parent(s) (if a	iny)		
<u> </u>	hu Tayaa Ethiaa Cammiaaian			Version V2 E 1 Obfeth

The Instruction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 4/28 Rpt: 8/46	
2 FILER NAME Benavides, Gina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618
4 Date 5 Full name of contributor out-of-state PAC (ID# 12/24/2023 Borjon, Jose 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$1,579.26
Brownsville, TX 78520		
8 Contributor's Principal Occupation Attorney	9 Contributor's Job Title Attorney	
10 Contributor's employer/law firm Akin Gump	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID# 12/12/2023 Brunkenhoefer, Blake Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$2,500.00
Corpus Christi, TX 78702 Contributor's Principal Occupation	Contributor's Job Title	
Attorney Contributor's employer/law firm	oouse (if any)	
Brunkenhoefer Law Firm If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID# 10/18/2023 Calderon, Linda Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
McAllen, TX 78501		
Contributor's Principal Occupation retired	Contributor's Job Title retired	
Contributor's employer/law firm not applicable	Law firm of contributor's sp	oouse (if any)
If contributor is a child, law firm of parent(s) (if any)	1	
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2 FILER NAME Benavides, Gina M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00043618			
4 Date 5 Full name of contributor out-of-state PAC (ID: 11/01/2023 Caldwell, Joshua	Date 5 Full name of contributor out-of-state PAC (ID#:) 11/01/2023 Caldwell, Joshua			
San Antonio, TX 78216				
8 Contributor's Principal Occupation Attorney	9 Contributor's Job Title Attorney			
10 Contributor's employer/law firm Santos & Davis	11 Law firm of contributor's sp	oouse (if any)		
12 If contributor is a child, law firm of parent(s) (if any)				
Date Full name of contributor out-of-state PAC (ID: 10/04/2023 10/04/2023 Canales , Ruben Contributor address; City; State; Zip Code	¥:)	Amount of Contribution (\$) \$52.95		
Kingsville, TX 78363				
Contributor's Principal Occupation Retired	Contributor's Job Title Retired			
Contributor's employer/law firm Non-Applicable	bouse (if any)			
If contributor is a child, law firm of parent(s) (if any)				
Date Full name of contributor out-of-state PAC (ID: 12/06/2023 12/06/2023 Cantu, Eric Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1,000.00		
Corpus Christi, TX 78466				
Contributor's Principal Occupation Business Owner	Contributor's Job Title Business Owner			
Contributor's employer/law firm	Law firm of contributor's sp	pouse (if any)		
Not Applicable				
If contributor is a child, law firm of parent(s) (if any)				
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2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Benavides, C	Gina M. (The Honorable)		00043618		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$)		
10/18/2023	Castellanos, Dolores		\$250.00		
	6 Contributor address; City; State; Zip Code				
	McAllen, TX 78501				
	Principal Occupation	9 Contributor's Job Title			
Psychologist		Psychologist			
10 Contributor's e Self employe		11 Law firm of contributor's sp	bouse (if any)		
	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
12/04/2023	Castellanos, Evelyn)	\$105.58		
	Contributor address; City; State; Zip Code				
	Austin, TX 78731				
Contributor's Principal Occupation Contributor's Job Title					
Media Consultant Media Consultant					
Contributor's employer/law firm Law firm of contributor's s			oouse (if any)		
Verve Media	LLC				
If contributor is a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
10/18/2023	Celis Law Group, PLLC		\$5,000.00		
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78411				
Contributor's		Contributor's Job Title			
Contributors P	Principal Occupation				
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)		
If contributor is a child, law firm of parent(s) (if any)					
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The Instruction Guide explains how to complete this form. 1 Total pages Schedul Sch: 7/28 Rpt: 11/4				
2 FILER NAME 3 Filer ID (Ethics Con 00043618 Benavides, Gina M. (The Honorable) 00043618				
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contributi 10/18/2023 Champion, Norma 6 Contributor address; City; State; Zip Code 7	ion (\$) \$50.00			
McAllen, TX 78504				
8 Contributor's Principal Occupation 9 Contributor's Job Title				
Paralegal Paralegal				
10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 11 Law firm of contributor's spouse (if any)				
Law Offices of Bobby Garcia				
12 If contributor is a child, law firm of parent(s) (if any)				
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributi	. ,			
12/07/2023 Chapman, Randall	\$100.00			
Contributor address; City; State; Zip Code				
Austin, TX 78704				
Contributor's Principal Occupation Contributor's Job Title				
Retired Lawyer Retired Lawyer				
Contributor's employer/law firm Law firm of contributor's spouse (if any)				
Not Applicable				
If contributor is a child, law firm of parent(s) (if any)				
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributi	ion (\$)			
09/28/2023 Colvin Saenz Rodriguez & Kennamer LLP	\$1,000.00			
Contributor address; City; State; Zip Code				
Brownsville, TX 78520				
Contributor's Principal Occupation Contributor's Job Title				
Contributor's employer/law firm Law firm of contributor's spouse (if any)				
If contributor is a child, law firm of parent(s) (if any)				

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 8/28 Rpt: 12/46	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Benavides, C	Gina M. (The Honorable)		00043618
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
11/27/2023	Cooper, Kirk		\$52.95
	6 Contributor address; City; State; Zip Code		
	El Paso, TX 79925		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Cooper Law			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/22/2023	Danburg, Debra		\$200.00
	Contributor address; City; State; Zip Code		
Austin, TX 78704			
Contributor's Principal Occupation Contributor's Job Title			
Retired lawy		Retired Lawyer	
Contributor's employer/law firm Law firm of contribute			pouse (if any)
non-apllicabl			
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/07/2023	DeLeon, Maria		\$210.84
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Educator		Educator	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
unknown			
If contributor is	s a child, law firm of parent(s) (if any)		
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2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Benavides, C	Gina M. (The Honorable)		00043618
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
11/10/2023	Diaz, Reynaldo		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78212	1	
	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Diaz Law Fir			
	s a child, law firm of parent(s) (if any)		
Data			Amount of Quantiluctions (ft)
Date 12/11/2023	Full name of contributor out-of-state PAC (ID#: Elizondo, Dolly)	Amount of Contribution (\$) \$158.21
12/11/2023	Contributor address; City; State; Zip Code		
	Continuation address, City, State, Zip Code		
	Mission, TX 78752		
Contributor's F	Principal Occupation	Contributor's Job Title	
Real Estate		Real Estate agent	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
ERED Online	2		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/06/2023	Elliiff, Rosalie		\$200.00
	Contributor address; City; State; Zip Code		
	Harlingen, TX 78550		
	Principal Occupation	Contributor's Job Title	
Retired Law Enforcement Officer Retired Law Enforceme			
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Not applicab			
	s a child, law firm of parent(s) (if any)		
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2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Benavides, Gina M. (The Honorable)		00043618		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/25/2023	Ellis Keoneke & Ramirez		\$2,500.00	
	6 Contributor address; City; State; Zip Code			
	McAllen, TX 78501			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/27/2023	Gamez, Erin Elizabeth		\$1,000.00	
	Contributor address; City; State; Zip Code			
	Brownsville, TX 78526			
Contributor's F	Principal Occupation	Contributor's Job Title		
Attorney		Attorney		
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)		
Gamez Law	Firm			
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/11/2023	Garcia & Villarreal, PLLC		\$2,500.00	
	Contributor address; City; State; Zip Code			
	McAllen, TX 78504			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is a child, law firm of parent(s) (if any)				

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/28 Rpt: 15/46	
2 FILER NAME Benavides, Gina M.	(The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618
12/04/2023 Gar	name of contributor 🔲 out-of-state PAC (za, Liza ributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$105.58
McA	llen, TX 78504		
8 Contributor's Principal	Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's employer		11 Law firm of contributor's sp	pouse (if any)
Roerig Olveira Fisch			
	law firm of parent(s) (if any)		
Date Full	name of contributor Out-of-state PAC (Amount of Contribution (\$)
	name of contributor out-of-state PAC (I zalez, Veronica	D#:)	\$500.00
	ributor address; City; State; Zip Code		
McA	llen, TX 78504		
Contributor's Principal	Occupation	Contributor's Job Title	
Lawyer		Government Relations	
Contributor's employer,	Contributor's employer/law firm Law firm of contributor's st		pouse (if any)
UTRGV			
If contributor is a child,	law firm of parent(s) (if any)		
	name of contributor out-of-state PAC (D#:)	Amount of Contribution (\$)
	van Elizondo		\$1,000.00
Cont	ributor address; City; State; Zip Code		
Corr	ous Christi, TX 78401		
Contributor's Principal		Contributor's Job Title	
Contributor 5 Finicipal			
Contributor's employer	/law firm	Law firm of contributor's s	pouse (if any)
If contributor is a child,	law firm of parent(s) (if any)		
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/28 Rpt: 16/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Benavides, G	Gina M. (The Honorable)		00043618
	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/26/2023	Harrison, Tom		\$526.63
	6 Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78413		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	•
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Cotton Schm			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/01/2023	Herrera, Jorge		\$1,579.26
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78207		
Contributor's P	rincipal Occupation	Contributor's Job Title	•
Attorney		Attorney	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Herrera Law			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/28/2023	Huseman, Alice Vowel		\$1,000.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78504		
Contributor's P	rincipal Occupation	Contributor's Job Title	•
Retired Attor	ney	Retired Attorney	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Non Applicable Huseman Law Firm			
If contributor is	a child, law firm of parent(s) (if any)		
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2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Benavides, Gina M. (The Honorable)		00043618	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
11/10/2023	Jones Galligan Key & Lozano, LLP		\$2,000.00
	6 Contributor address; City; State; Zip Code		1
	Weslaco, TX 78596	1	
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	bouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
	s a child, law littl of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:	``````````````````````````````````````	Amount of Contribution (\$)
08/22/2023	Full name of contributor out-of-state PAC (ID#: Karam Law Firm)	\$1,250.00
00/22/2023	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	McAllen, TX 78501		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/04/2023	Lacey, Beth Ann		\$26.63
	Contributor address; City; State; Zip Code		
	Tarrytown, NY 10591		
	Principal Occupation	Contributor's Job Title	
Retired paralegal Retired Paralegal			
Contributor's employer/law firm Law firm of contributor's sp not applicable		Jouse (II any)	
If contributor is a child, law firm of parent(s) (if any)			
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The Instruc	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/28 Rpt: 18/46	
2 FILER NAME Benavides, C	Sina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618	
4 Date 10/25/2023	 5 Full name of contributorout-of-state PAC (ID#:) Langley & Banack, Inc. 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$250.00	
	San Antonio, TX 78212			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date 09/28/2023	Full name of contributor out-of-state PAC (ID#:_ Law Office of John Williamson Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00	
Contributor's F	Brownsville, TX 78523 Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)	I		
Date 09/26/2023	Full name of contributorout-of-state PAC (ID#:_ Law Office of Michael Flanagan Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$1,500.00	
Contributor's F	McAllen, TX 78501 Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)	
If contributor is a child, law firm of parent(s) (if any)				
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 15/28 Rpt: 19/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Benavides, 0	Gina M. (The Honorable)		00043618	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/15/2023	Law Office of Michael Flanagan		\$2,500.00	
	6 Contributor address; City; State; Zip Code		1	
	McAllen, TX 78501			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)	
10 lf				
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date 09/28/2023	Full name of contributor out-of-state PAC (ID#: Law Offices of Ernesto Gamez)	Amount of Contribution (\$)	
09/28/2023			\$500.00	
	Contributor address; City; State; Zip Code			
	Brownsville, TX 78520			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor 3 1				
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/05/2023	Lewis , Mario		\$105.58	
	Contributor address; City; State; Zip Code			
	Austin, TX 78727			
Contributor's F	Principal Occupation	Contributor's Job Title		
Retired Attor	ney	Retired Attorney		
	employer/law firm	Law firm of contributor's sp	oouse (if any)	
Not applicab				
If contributor is a child, law firm of parent(s) (if any)				
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2 FILER NAME Benavides, G	Sina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618
11/07/2023	5 Full name of contributor out-of-state PAC (ID#:) Liles White PLLC 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$5,000.00
	Corpus Christi, TX 78401		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)	L	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/21/2023	Linbebarger Goggan Blair & Sampson		\$2,500.00
	Contributor address; City; State; Zip Code Austin, TX 78760		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		ouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)		
Date 10/18/2023	Full name of contributor out-of-state PAC (ID#: Mary , Cortez Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$200.00
	La Feria, TX 78559		
Contributor's P	rincipal Occupation	Contributor's Job Title	1
Retired Educ	ator	not applicable	
	mployer/law firm	Law firm of contributor's sp	ouse (if any)
not applicable	e		
If contributor is	a child, law firm of parent(s) (if any)		
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 17/28 Rpt: 21/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Benavides, G	ina M. (The Honorable)		00043618
4 Date 11/06/2023	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$526.63
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78212		
8 Contributor's P Paralegal	rincipal Occupation	9 Contributor's Job Title Paralegal	•
10 Contributor's e	mplover/law firm	11 Law firm of contributor's sp	oouse (if any)
Martin Cukjat			
-	a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/27/2023	Motaghi, Moe		\$5,000.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78404		
Contributor's P	rincipal Occupation	Contributor's Job Title	1
Business Ow	ner	Business Owner	
Contributor's e	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Zeba, LLC			
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/28/2023	Nix, Angela		\$35.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Attorney Attorney			
Contributor's e	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Nix Law Firm			
If contributor is	a child, law firm of parent(s) (if any)		
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/28 Rpt: 22/46	
2 FILER NAME Benavides, Gina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618	
10/18/2023	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$100.00
	Edinburg, TX 78689		
8 Contributor's Princ		9 Contributor's Job Title	
Business Owner		Business Owner	
10 Contributor's emplo	oyer/law firm	11 Law firm of contributor's sp	ouse (if any)
La Rose			
12 If contributor is a cl	hild, law firm of parent(s) (if any)		
	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$) \$158.21
	O'Quinn, Brian (Judge)		\$130.21
	Contributor address; City; State; Zip Code		
	Lubbock, TX 79407		
Contributor's Princ		Contributor's Job Title	
Jurist		Jurist	
Contributor's emplo	over/law firm	Law firm of contributor's sp	oouse (if anv)
State of Texas			
If contributor is a cl	hild, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	Omar Ochoa Law Firm		\$5,000.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's Princ	ipal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		ouse (if any)	
If contributor is a cl	hild, law firm of parent(s) (if any)		
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 19/28 Rpt: 23/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Benavides, Gina M. (The Honorable)		00043618	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/29/2023	Orozco, Cynthia		\$100.00
	6 Contributor address; City; State; Zip Code		
	Cuero, TX 77954		
	Principal Occupation	9 Contributor's Job Title	
Retired Educ		Retired Educator	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
Not applicab			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/14/2023	Peralez Franz LLP		\$2,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/01/2023	Perez, Roger		\$250.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
Contributoria		Contributor's Job Title	
Attorney	Contributor's Principal Occupation Contributor's Job Title Attorney Attorney		
Contributor's employer/law firm Law firm of contributor's sp			
Roger Perez Law Firm			
If contributor is a child, law firm of parent(s) (if any)			
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/28 Rpt: 24/46		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Benavides, G	Benavides, Gina M. (The Honorable)		00043618	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
12/20/2023	Perez Trevino, Emma		\$100.00	
Ì	6 Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78402			
	rincipal Occupation	9 Contributor's Job Title		
retired journa		retired journalist		
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)	
not applicable				
12 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
11/01/2023	Person Mohrer Morales Boddy Garcia & Gutierr	ez PLLC	\$1,000.00	
	Contributor address; City; State; Zip Code			
	Sn Antonio, TX 78217			
Contributor's P	rincipal Occupation	Contributor's Job Title		
Contributor's o	mployer/law firm	Law firm of contributor's sp		
Contributors e	inployentaw in th	Law IIIII of contributor 5 St		
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:	\ \	Amount of Contribution (\$)	
09/26/2023	Full name of contributor out-of-state PAC (ID#: Ramirez Law Firm)	\$507.50	
03/20/2023	Contributor address; City; State; Zip Code			
	McAllen, TX 78501			
Contributor's P	rincipal Occupation	Contributor's Job Title		
Contributor's e	mployer/law firm	Law firm of contributor's sp	bouse (if any)	
If contributor is a child, law firm of parent(s) (if any)				

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 21/28 Rpt: 25/46	
2 FILER NAME Benavides, Gina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618	
4 Date 12/02/2023			7 Amount of Contribution (\$) \$526.63
	Austin, TX 78763		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Ratliff Law F			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/31/2023	Roerig, Oliveira & Fisher, L.L.P.)	\$1,000.00
	Brownsville, TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/25/2023	Royston Rayzor Vickery Williams, L.L.P,		\$1,250.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78521		
Contributor's F	I Principal Occupation	Contributor's Job Title	I
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is a child, law firm of parent(s) (if any)			
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 22/28 Rpt: 26/46	
2 FILER NAME Benavides, Gina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618	
12/14/2023	te 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$50.00
	Pharr, TX 78577		
	rincipal Occupation	9 Contributor's Job Title	
Retired Educ		Retired Educator	
10 Contributor's en not applicable		11 Law firm of contributor's sp	ouse (if any)
	a child, law firm of parent(s) (if any)		
Date 12/01/2023	23 Full name of contributor out-of-state PAC (ID#:) 23 Sander, Jody Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$158.21
Contributor's P	Fort Worth, TX 76110		
Attorney		Attorney	
		Law firm of contributor's sp	ouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date 11/01/2023			Amount of Contribution (\$) \$1,500.00
	San Antonio, TX 78204		
Contributor's Principal Occupation Contributor's Job Title		I	
Contributor's employer/law firm Law firm of contributor's sp		ouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)		
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 23/28 Rpt: 27/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sina M. (The Honorable)		00043618
4 Date 10/24/2023	5 Full name of contributor out-of-state PAC (ID#: Shephard, Joseph		7 Amount of Contribution (\$)\$200.00
	6 Contributor address; City; State; Zip Code		
	Cuero , TX 77954		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
Shephard La			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
11/01/2023	Sloan, Jeremy		\$526.63
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78213		
Contributor's P	rincipal Occupation	Contributor's Job Title	
attorney		Attorney	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Sloan Law Fi	irm		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
11/30/2023	Snapka, Kathryn		\$500.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78403		
Contributor's P	Principal Occupation	Contributor's Job Title	
Attorney	Attorney Attorney		
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
Snapka Law			
If contributor is	s a child, law firm of parent(s) (if any)		
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 24/28 Rpt: 28/46	
2 FILER NAME Benavides, Gina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618	
4 Date 10/03/2023	5 Full name of contributor out-of-state PAC (ID#: Stokes, Macey		7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77006		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Baker Botts			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/12/2023	Ted Rodriguez, Jr. P.C.		\$1,500.00
	Contributor address; City; State; Zip Code		
	Carrizo Springs, TX 78834		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)		
Data	Full name of contributor out-of-state PAC (ID#:	``````````````````````````````````````	Amount of Contribution (\$)
Date 10/02/2023	Full name of contributor out-of-state PAC (ID#: The Garriga Law Firm)	\$3,000.00
10,02,2020	Contributor address; City; State; Zip Code		
	Odessa, TX 79761		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 25/28 Rpt: 29/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Gina M. (The Honorable)		00043618
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/28/2023	The Green Law Firm, P.C.		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/18/2023	Thrash, Celia		\$100.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
	Principal Occupation	Contributor's Job Title	
Author		Self employed	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
self employe	s a child, law firm of parent(s) (if any)		
	s a child, law little of parend(s) (it any)		
Data	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
Date 12/04/2023	Full name of contributor out-of-state PAC (ID#:_ Thrash, Greg)	Amount of Contribution (\$) \$105.58
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's F	Principal Occupation	Contributor's Job Title	
Business Owner Business Owner			
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
LFD Furniture			
If contributor is a child, law firm of parent(s) (if any)			
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.0bfcfb67

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 26/28 Rpt: 30/46	
2 FILER NAME Benavides, Gina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618	
11/01/2023 Va	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$1,000.00
Sa	n Antonio, TX 78230		
8 Contributor's Principa	I Occupation	9 Contributor's Job Title	
10 Contributor's employe	r/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor is a child	I, law firm of parent(s) (if any)		
11/14/2023 Ve	Full name of contributor out-of-state PAC (ID#:) Velasquez, Mary Ontributor address; City; State; Zip Code		Amount of Contribution (\$) \$200.00
Ed Contributor's Principa	inburg, TX 78539	Contributor's Job Title	
Business Owner		Business Owner	
Contributor's employer/law firm Law firm of contributor's sp Coastal Tropical		ouse (if any)	
If contributor is a child	l, law firm of parent(s) (if any)		
07/01/2023 Ve	/2023 Full name of contributor out-of-state PAC (ID#:) Vera, Nancy Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
Co	rpus Christi, TX 78504		
Contributor's Principa Educator	Contributor's Principal OccupationContributor's Job TitleEducatorPresident of AFT		
Contributor's employer/law firm Law firm of contributor's sp		ouse (if any)	
non applicabke	I, law firm of parent(s) (if any)		
Forme and ded to T	as Ethics Commission www.ethics	s state tx us	Version V3 5 1 0bfcfb67

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 27/28 Rpt: 31/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Benavides, Gina M. (The Honorable)		00043618	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/04/2023	Villarreal, Rick		\$52.95
	6 Contributor address; City; State; Zip Code		
0 Osustuikustaula (Edinburg, TX 78439	• Ocatella de la Tida	
Insurance A	Principal Occupation	9 Contributor's Job Title Insurance Agent	
10 Contributor's e		11 Law firm of contributor's sp	pource (if any)
Farmer's Ins			Jouse (II ally)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	١	Amount of Contribution (\$)
10/18/2023	Wadhawani, Selma		\$1,000.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Not employe	d	not applicable	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
not applicabl			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/25/2023	Webb Cason, P.C.		\$5,000.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78401		
Contributor's	Principal Occupation	Contributor's Job Title	
Contributor 3 P			
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Formo providad	hy Texas Ethics Commission www.ethic	rs state tx us	Version V3.5.1.0hfcfh67

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 28/28 Rpt: 32/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Benavides, C	Gina M. (The Honorable)		00043618
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/04/2023	Wechsler, Sharon		\$26.63
	6 Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78414	I	
	Principal Occupation	9 Contributor's Job Title	
non-employe		non-employed	
10 Contributor's enot applicabl		11 Law firm of contributor's sp	bouse (if any)
	s a child, law firm of parent(s) (if any)		
	s a child, law littl of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:	``````````````````````````````````````	Amount of Contribution (\$)
12/08/2023	Full name of contributor out-of-state PAC (ID#: Wilson Baron, Patti)	\$26.63
12/00/2020	Contributor address; City; State; Zip Code		
	Bridgepoint, IL 60455		
Contributor's F	Contributor's Principal Occupation Contributor's Job Title		
Event Planne	er	Event Planner	
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
Bridgepoint (Community		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/01/2023	Yanta, Virgil		\$500.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78205		
	Principal Occupation	Contributor's Job Title	
Attorney Attorney			
Contributor's employer/law firm Law firm of contributor's sp Yanta Law Firm			
If contributor is a child, law firm of parent(s) (if any)			
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.0bfcfb67

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 33/46		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Benavides, Gina M. (The Honorable)		00043618		
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date 10/25/2023	5 Date 6 Full name of contributor		8 Amount of 9 In-kind contribution contribution (\$) description \$345.90 Food for Meet & Greet	
	Corpus Christie, TX 78401		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
Attorney		Attorney		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
Linebarger,	Goggan Blair			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1		
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of In-kind contribution	
10/19/2023	Leonard, Maria		contribution (\$) description	
	Contributor address; City; State; Zip Code		\$393.34 Food & Beverages for Fundraiser	
	Mission, TX 78574		Check if travel outside of Texas. Complete Schedule T.	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	· · · · · · · · · · · · · · · · · · ·	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Professor		Professor		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	
UTRGV				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I		
Date	Full name of contributor out-of-state PAC (ID#:	١	Amount of In-kind contribution	
10/19/2023	Liscano, Rosie	/	contribution (\$) description	
	Contributor address; City; State; Zip Code		\$393.34 Food and Beverages for	
			Fundriaser	
	Mission, TX 78572		Check if travel outside of Texas. Complete Schedule T.	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title		(FOR JUDICIAL) (See instructions)		
Social Worker Training Managme		nt		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)	
State of Texas				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 2/2 Rpt: 34/46	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Benavides, Gina M. (The Honorable)		00043618	
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date 09/28/2023	 6 Full name of contributor out-of-state PAC (ID#: Martinez, Trey 7 Contributor address; City; State; Zip Code Brownsville, TX 78520)	 Amount of 9 In-kind contribution contribution (\$) description \$1,029.121 	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
Attorney		Attorney		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
Martinez & ⁻	Tijerina			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•		
Date 10/19/2023	Full name of contributor out-of-state PAC (ID#: Saldana, Mellie Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$393.34 Food and Beverage for fundraiser	
	Mission, TX 78572		Check if travel outside of Texas. Complete Schedule T.	
		Employer (FOR NON		
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Manager		Manager	tor's spouse (if any) (FOR JUDICIAL)	
JC Penney	employer/law firm (FOR JUDICIAL)	Law IIIm of contribute	I'S Spouse (II any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/25/2023	Full name of contributor out-of-state PAC (ID#: Shepard , Cynthia Contributor address; City; State; Zip Code Cuero, TX 77954)	Amount of In-kind contribution contribution (\$) description \$720.91 I Food & Beverages for Meet and Greet	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. JUDICIAL) (See instructions)	
r incipal occi				
Contributor's principal occupation (FOR JUDICIAL)Contributor's job titleAttorneyAttorney		(FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL) Law firm of contribute Shepard Law Firm		or's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
-	Sch: 1/11 Rpt: 35/46	[Benavides, Gina M. (The Honorable))				00043618			
4	Date	5	Payee name								
	09/06/2023		First Community Bank								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$7.50		5406 Everhart								
			Corpus Christi, TX 78413								
8	PURPOSE				(h)	Description					
°	OF	(a)	Category (See Categories listed at the top of this a	schedule)	(0)	Description	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Fees					, officeholder living expense			
						Bank Charge	Ba	ack Fee			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office held			
╞											
	Date		Payee name								
	10/03/2023		Hidalgo County Democratic Party								
	Amount (\$)		Payee address; City; Sta	ite; Zip Co	ode						
	\$500.00		3307 N. McColl Road, Suite D								
			McAllen, TX 78501								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.			
							, TX,	, officeholder living expense			
						Blue Gala					
					Ļ						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office held			
	- p	_									
	Date		Payee name								
	09/11/2023		Pam Oliver Munoz Photography								
	Amount (\$)		Payee address; City; Sta	ite; Zip Co	ode						
	\$591.25		unknown								
			Weslaco, TX 78596								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
	Photography										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office held			
		1									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reim Fees Office Overhead/Renta Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contra The Instruction Guide explains how to complete this	I Expense Transportation Equipment & Related Expense Travel in District Travel Out of District ct Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 2/11 Rpt: 36/46	Benavides, Gina M. (The Honorable)	00043618						
4	Date 10/19/2023	Payee name Ramirez, Joseph							
6	Amount (\$) \$750.00	Payee address; City; State; Zip Code 1741 Star Cove Corpus Christi, TX 78413							
8	PURPOSE OF EXPENDITURE		ription neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense riding support for campaign events						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/28/2023	Stripe							
	Amount (\$) \$26.63	Payee address; City; State; Zip Code 354 Oyster Point Blvd							
	PURPOSE	San Francisco, CA 94080 Category (See Categories listed at the top of this schedule) (b) Desc	ription						
	OF EXPENDITURE		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense ine fee for donation						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/24/2023	Stripe							
	Amount (\$) \$79.26	Payee address; City; State; Zip Code 354 Oyster Point Blvd							
		San Francisco, CA 94080							
	PURPOSE OF EXPENDITURE		rription neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense ine donation fee						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committ Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	lains h	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 3/11 Rpt: 37/46		Benavides, Gina M. (The Honorat	ole)				00043618	
4	Date 12/20/2023		Payee name Stripe						
6	Amount (\$) \$5.30		Payee address; City; 3 354 Oyster Point Blvd San Francisco, CA 94080	State;	Zip Coo	e			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of t Fees	his sche	edule)		ı, TX,	de of Texas. Complete Schedule T. , officeholder living expense 1 fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	ffice souç	ht		Office held	
	Date		Payee name						
	12/12/2023		Stripe						
	Amount (\$) \$125.30		354 Oyster Point Blvd	State;	Zip Coo	e			
	PURPOSE OF EXPENDITURE	(a)	San Francisco, CA 94080 Category (See Categories listed at the top of t Fees	his sche	edule)		ı, TX,	de of Texas. Complete Schedule T. officeholder living expense In fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	ffice soug	ht		Office held	
	Date		Payee name						
	12/11/2023		Stripe						
	Amount (\$) \$8.21		Payee address; City; 3 354 Oyster Point Blvd	State;	Zip Coo	e			
			San Francisco, CA 94080						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of t Fees	his sche	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense In fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	ffice soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memor	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME 3 Filer ID (Ethics Commis						
	Sch: 4/11 Rpt: 38/46		Benavides, Gina M. (The	Honorable)				00043618	
4	Date 12/08/2023	5	Payee name Stripe						
6	Amount (\$) \$1.63	7	Payee address; City; 354 Oyster Point Blvd San Francisco, CA 9408(; Zip Coo	le			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed Fees	at the top of this sch	edule)		ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense 1 fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office souç	ht		Office held	
	Date		Payee name						
	12/07/2023		Stripe						
	Amount (\$) \$10.84		Payee address; City; 354 Oyster Point Blvd		; Zip Coo	le			
	PURPOSE OF EXPENDITURE	(a)	San Francisco, CA 94080 Category _{(See Categories listed} Fees		edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense 1 fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held	
	Date		Payee name						
	12/05/2023		Stripe						
	Amount (\$) \$1.63		Payee address; City; 354 Oyster Point Blvd	State;	; Zip Coo	le			
			San Francisco, CA 94080)					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed Fees	at the top of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense on fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense 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 F1:	2	FILER NAME 3 Filer ID (Ethics Commiss							
	Sch: 5/11 Rpt: 39/46		Benavides, Gina M. (The Honorable)				00043618			
4	Date 12/05/2023	5	Payee name Stripe							
6	Amount (\$) \$5.58	7	Payee address; City; State; 354 Oyster Point Blvd San Francisco, CA 94080	Zip Coo	le					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)		n, TX,	de of Texas. Complete Schedule T. , officeholder living expense າ Fee			
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held			
	Date		Payee name							
	12/04/2023		Stripe							
	Amount (\$) \$2.80		Payee address; City; State; 354 Oyster Point Blvd	Zip Co	le					
			San Francisco, CA 94080							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense In Fee			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held			
	Date		Payee name							
	12/04/2023		Stripe							
	Amount (\$) \$5.58		Payee address;City;State;354 Oyster Point Blvd	Zip Co	le					
			San Francisco, CA 94080							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)		n, TX,	de of Texas. Complete Schedule T. , officeholder living expense In Fee			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense 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 F1:	2	FILER NAME 3 Filer ID (Ethics Commiss							
	Sch: 6/11 Rpt: 40/46		Benavides, Gina M. (The Honorable)	00043618						
4	Date 12/04/2023	5	Payee name Stripe							
6	Amount (\$) \$5.58	7	Payee address; City; State; 354 Oyster Point Blvd San Francisco, CA 94080	Zip Co	de					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense n Fee			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held			
	Date		Payee name							
	12/04/2023		Stripe							
	Amount (\$) \$1.63		354 Oyster Point Blvd	Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)	San Francisco, CA 94080 Category (See Categories listed at the top of this sche Fees	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense n Fee			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held			
	Date		Payee name							
	12/04/2023		Stripe							
	Amount (\$) \$5.58		Payee address; City; State; 354 Oyster Point Blvd	Zip Co	de					
			San Francisco, CA 94080							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense n Fee			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Gift/Awards/Me mittee Legal Services					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME 3 Filer ID (Ethics Comm							
	Sch: 7/11 Rpt: 41/46		Benavides, Gina M. (1	he Honorable)				00043618		
4	Date 12/04/2023	5	Payee name Stripe							
6	Amount (\$) \$2.95	7	Payee address; City 354 Oyster Point Blvd San Francisco, CA 94		Zip Coo	le				
8	PURPOSE OF EXPENDITURE	(a)	Category _{(See Categories li} Fees	sted at the top of this sche	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense n Fee		
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder na	me O	Office souç	ht		Office held		
	Date		Payee name							
	12/04/2023		Stripe							
	Amount (\$) \$1.63		Payee address; City 354 Oyster Point Blvd		Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a)	San Francisco, CA 94 Category _{(See Categories li} Fees	U8U sted at the top of this sche	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense n Fee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	me O	Office soug	ht		Office held		
	Date		Payee name							
	12/01/2023		Stripe							
	Amount (\$) \$26.63		Payee address; City 354 Oyster Point Blvd		Zip Coo	le				
			San Francisco, CA 94	080						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories li Fees	sted at the top of this sche	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense n Fee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	me O	Office sou	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate//Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID (Ethics Commission Filers)
	Sch: 8/11 Rpt: 42/46			Gina M. (The	Honorable)					00043618
4	Date 12/01/2023	5	Payee name Stripe							
6	Amount (\$) \$8.21	7	Payee addres 354 Oyster I San Francis			; Zip Co	de			
8	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Fees	e Categories listed	at the top of this sch	edule)			, TX,	ide of Texas. Complete Schedule T. , officeholder living expense DN
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	ght			Office held
	Date		Payee name							
	12/01/2023		Stripe							
	Amount (\$) \$79.26		Payee addres 354 Oyster I	Point Blvd		; Zip Co	de			
	PURPOSE OF EXPENDITURE	(a)	<u> </u>	co, CA 9408() at the top of this sch	edule)			, TX,	ide of Texas. Complete Schedule T. , officeholder living expense On Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	ght			Office held
	Date		Payee name							
	11/27/2023		Stripe							
	Amount (\$) \$2.95		Payee addres 354 Oyster I		State;	; Zip Co	de			
			San Francis	co, CA 94080)					
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Fees	e Categories listed	at the top of this sch	edule)			, TX,	ide of Texas. Complete Schedule T. , officeholder living expense On Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	ght			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	mittee Legal Service	e Expense emorials Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)					
	Sch: 9/11 Rpt: 43/46		Benavides, Gina M. (The Honorable)				00043618	
4	Date 11/10/2023	5	Payee name Stripe						
6	Amount (\$) \$50.30	7	Payee address; City 354 Oyster Point Blvc San Francisco, CA 94	l	Zip Coo	e			
8	PURPOSE OF EXPENDITURE	(a)	Category _{(See Categories I} Fees	isted at the top of this sche	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense n Fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	ame O)ffice souç	ht		Office held	
	Date		Payee name						
	11/06/2023		Stripe						
	Amount (\$) \$26.63		Payee address; City 354 Oyster Point Blvc	I	Zip Coo	e			
	PURPOSE OF EXPENDITURE	(a)	San Francisco, CA 94 Category _{(See Categories I} Fees	isted at the top of this sche	edule)		ı, TX,	de of Texas. Complete Schedule T. officeholder living expense n Fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	ame O)ffice souç	ht		Office held	
	Date		Payee name						
	11/01/2023		Stripe						
	Amount (\$) \$26.62		Payee address; City 354 Oyster Point Blvc		Zip Coo	e			
			San Francisco, CA 94	1080					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories Fees	isted at the top of this sche	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense In Fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	ame O	Office soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 10/11 Rpt: 44/46	Benavides, Gina M. (The Honorable)	00043618						
4	Date 10/11/2023	Payee name Stripe							
6	Amount (\$) \$125.30	Payee address; City; State; Zip Code 354 Oyster Point Blvd San Francisco, CA 94080 San Francisco, CA 94080							
8	PURPOSE OF EXPENDITURE		rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense mation Fee						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/06/2023	Stripe							
	Amount (\$) \$8.21	Payee address; City; State; Zip Code 354 Oyster Point Blvd							
	PURPOSE OF EXPENDITURE		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense nation Fee						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/04/2023	Stripe							
	Amount (\$) \$2.95	Payee address;City;State;Zip Code354 Oyster Point Blvd							
		San Francisco, CA 94080							
	PURPOSE OF EXPENDITURE		rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Ination Fee						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Transportation Ed Travel in District Travel Out of Dist	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1: Sch: 11/11 Rpt: 45/46	FILER NAME Benavides, Gina M. (The Honorable)	3	Filer ID 00043618	(Ethics Commission Filers)	
4	Date 10/04/2023	Payee name Stripe				
6	Amount (\$) \$2.95	Payee address; City; State; Zip Code 354 Oyster Point Blvd San Francisco, CA 94080				
8	PURPOSE OF EXPENDITURE		tin, TX	side of Texas. Comp (, officeholder living DN Fee		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought		Office he	ld	
	Date 12/01/2023	Payee name Texas Democratic Party				
	Amount (\$) \$1,875.00	Payee address; City; State; Zip Code 4818 East Ben White Blvd, Suite 104 Austin, TX 78741				
	PURPOSE OF EXPENDITURE			side of Texas. Comp K, officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought		Office he	ld	

	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 Ov Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement erhead/Rental Expense xpense xpense Vages/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: 46/46	2 FILER NAME Benavides, Gina M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00043618					
4	Date 09/24/2023	5 Payee name Cameron County Woman Lawyers Association	Payee name Cameron County Woman Lawyers Association						
6	Amount (\$) \$250.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 3866 Brownsville, TX 78523							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description	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 08/05/2023	Payee name Vista Print							
	Amount (\$) \$790.19 Reimbursement from political contributions	Payee address; City; State; Zip Co 275 Wyman St	ode						
	PURPOSE OF EXPENDITURE	Waltham, MA 02451 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	I Candidate/Officeholder name	Office sought	Office held					