CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form	1 Filer ID (Ethics Commission Filers) 00020956		2 Total pages filed: 47	
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE ON	NLY
OFFICEHOLDER NAME	The Honorable Roberto			Date Received	LED
				ELECTRONICALLY FIL	LED
	NICKNAME LAST		SUFFIX	02/26/2024	
	Serna				
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #;	CITY;	ZIP CODE	Date Hand-delivered or Date Postn	narked
OFFICEHOLDER MAILING ADDRESS	1665 N. Bibb Ave.			Receipt # Amount	
l					
Change of Address	Eagle Pass, TX 78852-6612			Date Processed	
				Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIRST		MI		
TREASURER	Mr. Roberto				
NAME	TOBERS 1				
	NICKNAME LAST		SUFFIX		
	Serna		SUFFIX		
	Sema				
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASI	E); APT / SUITE	:#; CITY;	STATE;	ZIP CODE
TREASURER	1665 N. Bibb Ave	E), APT/SUITE	:#, CITY,	SIAIE,	ZIP CODE
ADDRESS	1003 N. Bibb Ave				
(Residence or Business)					
	Eagle Pass, TX 78852-6612				
7 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
TREASURER	(830) 968-5856				
PHONE	(000) 000 0000				
8 REPORT					
TYPE	January 15 30th day be	efore election Runoff		15th day after campaign tre	asurer
				appointment (officeholder of	
	July 15 X 8th day bef	ore election Exceeded reporting	I modified limit	Final Report (Attach C/OH-F	FR)
a DEDIOD	Month Box Von				
9 PERIOD COVERED	Month Day Year	THROUGH	onth Day	Year	
	01/26/2024	THROUGH	02/24/2024	+	
10 ELECTION	ELECTION DATE	El E0:	TION TYPE		
10 ELECTION	ELECTION DATE Month Day Year		TION TYPE	Other	
	03/05/2024		11011		
		General Sp	ecial		
		_			
11 OFFICE	OFFICE HELD (if any)		FICE SOUGHT		
	District Attorney (Multi-county) District	293rd Maverick Dist	trict Attorney ((Multi-county) District 293	3rd
	•	1			
	G	O TO PAGE 2			
	0.				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 47

13 C / OH NAME	Serna, Roberto (The	Honorable)		14 Filer ID 00020956	(Ethics Comn	nission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	accepted or political expenditu may have been made without t quired to report this information	the candidate's or office	eholder's kno	vledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	E			
	GENERAL					
	_	COMMITTEE ADDI	RESS			
	SPECIFIC					
		COMMITTEE CAM	PAIGN TREASURER NAME			
		COMMITTEE CAM	PAIGN TREASURER ADDRES	SS		
					_	
16 CONTRIBUTION TOTALS			ONTRIBUTIONS (OTHER THAI CONTRIBUTIONS MADE ELEC		\$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	5)	\$	23,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EX	PENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	S		\$	37,365.71
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		S MAINTAINED AS OF THE L	AST DAY OF THE	\$	4,613.07
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	37,500.00
17 AFFIDAVIT	•				-	
		1	swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
				orable Roberto Sern		
			Signature of	Candidate or Officeho	lder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		_ day
of	, 20, to co	ertify which, witness	my hand and seal of office.			
Signature of offi	cer administering	Printed name of	of officer administering	Title of office	r administerin	g oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 47				
	18 FILER NAME Serna, Roberto (The Honorable) 19 Filer ID (Ethics Commission Filers) 00020956							
20 SCHEDU NAME O	SUBTOT	AL AMOUNT						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	23,000.00				
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	200.00				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4. X	SCHEDULE E: LOANS		\$	14,500.00				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	;	\$	32,465.47				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$					
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	2,968.47				
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,931.77				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$					
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$								
				_				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 1/5 Rpt: 4/47	
2	FILER NAME Serna, Robe	rto (The Honorable)			3	Filer ID (Ethics Commission 00020956	on Filers)
4	Date 02/06/2024			7	Amount of Contribution (\$)	\$250.00	
_		Dallas, TX 75216					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/12/2024 Ajamie LLP Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
	Houston, TX 77002				_		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/21/2024 Gonzalez and Associates P.C. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
		Eagle Pass, TX 78852					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
Date O2/09/2024 Full name of contributor out-of-state PAC (ID#:) Guerrero, Mwlissa (Mrs.) Contributor address; City; State; Zip Code Crystal City, TX 78839			Amount of Contribution (\$)	\$100.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) Harper J.D., Jad (Mr.) Contributor address; City; State; Zip Code Eagle Pass, TX 78852			Amount of Contribution (\$)	\$1,000.00		
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/47		
2	FILER NAME Serna, Robe	rto (The Honorable)		3	Filer ID (Ethics Commission 00020956	Filers)	
4	Date 02/21/2024	5 Full name of contributor out-of-state PAC (ID#:) Harper J.D., Jad (Mr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00	
•	Dringing Loggy	Eagle Pass, TX 78852	O Employer (Coa Instructions				
8	Principal occu		9 Employer (See Instructions)			
	Date 02/20/2024	20/2024 Knickerbocker Heredia Salinas and Salinas P. C. Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$	2,000.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions))			
	Date Full name of contributor out-of-state PAC (ID#:) 102/14/2024 Law Office Office of Hugo Zapata PLLC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00	
	Principal occu	Eagle Pass, TX 78852 pation / Job title (See Instructions)	Employer (See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:) 02/21/2024 Linebarger Goggan Blair and Sampson LLP Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00		
	Principal occu	Austin , TX 78706 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/20/2024 Maurer, Bernard (Mr.) Contributor address; City; State; Zip Code Eagle Pass, TX 78852			Amount of Contribution (\$)	\$100.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 3/5 Rpt: 6/47		
2	FILER NAME Serna, Robe	R NAME na, Roberto (The Honorable)			Filer ID (Ethics Commission 00020956	n Filers)	
4	Date 02/21/2024			7	Amount of Contribution (\$)	\$2,500.00	
_	Deinsinal	Eagle Pass, TX 78216	O Faralassa (Osa lastassationa				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/20/2024 Padilla, Alfredo (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
	Carrizo Springs, TX 78834-6355						
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions	')			
	Date Full name of contributor out-of-state PAC (ID#:) 02/12/2024 Patterson Jr., John H. (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
		San Antonio, TX 78230					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)			
	Date 02/14/2024	Full name of contributor out-of-state PAC (ID#:_R. M. Jasso P.L.L.C. Contributor address; City; State; Zip Code Eaagle Pass, TX 78852)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()			
	Date Full name of contributor out-of-state PAC (ID#:) 02/23/2024 Rhodes, Crawford Adams (Mr.) Contributor address; City; State; Zip Code Eagle Pass, TX 78853			Amount of Contribution (\$)	\$300.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
		-					

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/47		
2	FILER NAME Serna, Robe	rto (The Honorable)			3	Filer ID (Ethics Commission 00020956	on Filers)
4	Date 02/14/2024			7	Amount of Contribution (\$)	\$1,000.00	
		Crystal City, TX 78839					
8	Principal occu	pation / Job title (See Instructions)	Ş	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/22/2024 Serna J.D., Eduardo d/b/a Texas Stop and Go (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
	Crystal City, TX 78839 Principal occupation / Job title (See Instructions) Employer (See Instructions))		
	Date Full name of contributor out-of-state PAC (ID#:) 101/31/2024 Ted Rodriguez, Jr, P.C. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00		
	Principal occu	Carrizo Springs, TX 78834 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 02/23/2024	Full name of contributor out out Villabobos & Villalobos, P. C. Contributor address; City; State; Zi McAllen, TX 78504				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 02/10/2024	Full name of contributor ou villarreal Esq., Isaac (Mr.) Contributor address; City; State; Zi Austin, TX 78701	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			•				

	MONETAF	RY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instructio	n Guide explains how to complete this	1 Total page Sch: 5/5	es Schedule A1: Rpt: 8/47		
2	FILER NAME Serna, Roberto ((The Honorable)		1	(Ethics Commission	on Filers)
4			7 Amount of	Contribution (\$)	\$1,000.00	
_		San Antonio, TX 78216	1			
8	Principal occupation	on / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date O2/03/2024 Full name of contributor out-of-state PAC (ID#:) Weinberg, Michael (Mr.) Contributor address; City; State; Zip Code		Amount of	Contribution (\$)	\$5,000.00	
		Houston, TX 77007-3029 on / Job title (See Instructions)	Employer (See Instructions	<u> </u> 		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 9/47 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Serna, Roberto (The Honorable) 00020956 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 02/02/2024 Calderon, Rudy (Mr.) \$200.00 Putting up campaign signs 7 Contributor address; City; State; Zip Code in the District Crystal City, TX 78839 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) self - employed handyman 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

	LOANS					SCHEDULE E
	The Instruction	n Guide explains how to	complete this	form. 1 Total pages Schedule E: Sch: 1/2 Rpt: 10/47		
2	FILER NAME Serna, Roberto	(The Honorable)			3 Filer ID 000209	(Ethics Commission Filers) 56
4	TOTAL OF UN	IITEMIZED LOANS				\$
5	Date of loan 01/31/2024	7 Name of lender Serna J.D., Roberto (Mr.)	out-of-state PA	AC (ID#:)	9 Loan Amount (\$) \$3,000.00
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate 11 Maturity Date
	INU	Eagle Pass, TX 78852				01/01/2030
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instructions State of Texas	s)	
14	Description of Coll X None	ateral		15 Check if personal funds we	ere deposited	into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	X not applicable	18 Guarantor address; City	State;	Zip Code		
20 Principal occupation 21 Employer (21 Employer (See Instructions	5)	
	Date of loan	Name of lender	out-of-state PA	AC (ID#:)	Loan Amount (\$)
	02/09/2024	Serna J.D., Roberto (Mr.)				\$1,500.00
	Is lender a financial institution?	Lender address; City	State;	Zip Code		Interest Rate
	No					Maturity Date
	<u> </u>	Eagle Pass, TX 78852		T = 1 (0 1 1 11	,	02/09/2030
	District Attorney	on / Job title (See Instructions)		Employer (See Instructions State of Texas	5)	
	Description of Coll			Check if personal funds we	ere denosited	into political account
	X None	a.c.		X	or o dopoentod	(See Instructions)
	GUARANTOR INFORMATION	Name of guarantor				Amount Guaranteed (\$)
	X not applicable	Guarantor address; City;	State;	Zip Code		
Principal occupation			Employer (See Instructions	5)		

LOANS				SCHEDULE E		
The Instruction	The Instruction Guide explains how to complete this form. 1 Total page Sch: 2/2					
2 FILER NAME Serna, Roberto	(The Honorable)		3 Filer ID 000209	(Ethics Commission Filers) 56		
4 TOTAL OF UN	NITEMIZED LOANS			\$		
5 Date of loan 02/20/2024	7 Name of lender	C (ID#:)	9 Loan Amount (\$) \$10,000.00		
6 Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate		
No	Eagle Pass, TX 78852			11 Maturity Date 02/20/2030		
12 Principal occupati	on / Job title (See Instructions)	13 Employer (See Instructions State of Texas	s)			
14 Description of Col X None	lateral	15 Check if personal funds we	ere deposited	into political account (See Instructions)		
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)		
X not applicable	18 Guarantor address; City; State;	Zip Code				
20 Principal occupati	on .	21 Employer (See Instructions	s)			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/30 Rpt: 12/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/31/2024	Aguilar, Alex (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P.O.Box 54
		Carrizo Springs, TX 78834
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Campaign worker
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit Grot	
l	Date	Payee name
l	02/09/2024	Aguilar, Alex (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
l	\$300.00	P.O.Box 54
l		
l		Carrizo Springs, TX 78834
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor
l		Check if Austin, TX, officeholder living expense Campaign worker
l		Campaign worker
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/OI	
⊨	Data	
l	Date 02/16/2024	Payee name
L		Aguilar, Alex (Mr.)
l	Amount (\$)	Payee address; City; State; Zip Code P.O.Box 54
l	\$300.00	P.O.Box 54
l		
		Carrizo Springs, TX 78834
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/30 Rpt: 13/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/23/2024	Aguilar, Alex (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P.O.Box 54
		Carrizo Springs, TX 78834
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
⊨	Date	Payee name
	02/07/2024	American Express
L		
	Amount (\$)	
	\$600.00	P. O. Box 650448
		Dallas, TX 75265-0448
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	2/11 2/13/13/12	Check if Austin, TX, officeholder living expense
		paid credit card for facebook ads paid by credit card
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	•
	Date	Payee name
	02/12/2024	American Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$414.06	P. O. Box 650448
		Dallas, TX 75265-0448
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Payment for Facebook ads
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7	·
1 Total pages Schedule F1: Sch: 3/30 Rpt: 14/47	2 FILER NAME Serna, Roberto (The Honorable) 3 Filer ID (Ethics Commission Filers) 00020956
4 Date	5 Payee name
02/14/2024	American Express
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$454.41	P. O. Box 650448
	Dallas, TX 75265-0448
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payment for Facebook ads
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/24/2024	American Express
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	P. O. Box 650448
	Dallas, TX 75265-0448
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	payment for text messages charged
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/31/2024	Barrera, Sylvia (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	PO Box 305
	Carrizo Springs, TX 78834
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	campaign worker
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponential to belief 0/01	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/30 Rpt: 15/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/09/2024	Barrera, Sylvia (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	PO Box 305
		Carrizo Springs, TX 78834
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaigh Worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/OI	
-	Date	Dougo nomo
	02/16/2024	Payee name Payrora, Sylvia (Mrs.)
		Barrera, Sylvia (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	PO Box 305
		Carrizo Springs, TX 78834
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expenses.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaigh worker
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	02/23/2024	Payee name Barrera, Sylvia (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	PO Box 305
		Carrizo Springs, TX 78834
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
		Sampang none.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/30 Rpt: 16/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/31/2024	Calderon, Rudy (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	415 E. ValVerde
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Expenses Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		For food and gas while putting up campaign signs in
		the District
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/31/2024	Campirano, Sandra (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	619 West Lake
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	02/09/2024	Campirano, Sandra (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	619 West Lake
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Sampaigh none.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/30 Rpt: 17/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/16/2024	Campirano, Sandra (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	619 West Lake
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/Ol	
⊨	Date	Payso nama
	02/23/2024	Payee name Campirano, Sandra (Mrs.)
L		Campirano, Sandra (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	619 West Lake
		Crystal City, TX 78839
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campagn worker
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	02/19/2024	Campos, Ricky (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	514 E. Crockett Street
	φ130.00	514 E. Glockett Street
		Oraștel Oita TV 70000
		Crystal City, TX 78839
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if traval outside of Taxas, Complete Schedule T
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		payment for washers tournament for Roberto Serna
		for District Attorney
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
l		

SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/30 Rpt: 18/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/18/2024	Carrizo Springs Javelin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$85.00	P. O. Box 1046
		Carrizo Springs, TX 78834
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		newspaper ad
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/23/2024	Carrizo Springs Javelin
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.00	P. O. Box 1046
	Ψ00.00	1 . O. BOX 1040
		On wine Continue TV 70004
		Carrizo Springs, TX 78834
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Ad in newspaper
		/ d iii newspaper
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/23/2024	Cisneros, Laura (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	101 Chula Vista
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/30 Rpt: 19/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/31/2024	Coronado, Tina (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	619 E. Dimmit St.
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Campaign worker
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit Grot	'
	Date	Payee name
l	02/09/2024	Coronado, Tina (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	619 E. Dimmit St.
l		
		Crystal City, TX 78839
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor
l	EXI ENDITORE	Check if Austin, TX, officeholder living expense
l		Campaign worker
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
⊨		
l	Date	Payee name
	02/16/2024	Coronado, Tina (Mrs.)
l	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	619 E. Dimmit St.
l		
		Crystal City, TX 78839
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Campaign worker
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 9/30 Rpt: 20/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/23/2024	Coronado, Tina (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$300.00	619 E. Dimmit St.
l		
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign worker
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit c/of	'
	Date	Payee name
l	02/24/2024	Coronado, Tina (Mrs.)
Г	Amount (\$)	Payee address; City; State; Zip Code
l	\$80.00	619 E. Dimmit St.
		Crystal City, TX 78839
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		beverages for absentee voting site
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
⊨	Data	David and the second se
l	Date 02/23/2024	Payee name De La Cruz, Pat (Mrs.)
L		
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$300.00	2206 Old Uvalde Hwy
l		0
		Crystal City, TX 78839
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		campaign worker
一	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		

SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 10/30 Rpt: 21/47	Serna, Roberto (The Honorable)	00020956
4	Date	5 Payee name	•
	02/23/2024	Esparza, Daniel (Mr.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	111 Highland Circle	
		Crystal City, TX 78839	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE		Check if Austin, TX, officeholder living expense
		au	ds on loud speakers, to get out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/OI		Office field
	Data		
	Date 02/10/2024	Payee name	
		Flores, Jesus (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	506 Nueces Street	
		Eagle Pass, TX 78852	
	PURPOSE OF	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	escription
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Ci	ampaign worker
			. •
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	02/20/2024	Flores, Norma L (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	843 Ceylon St.	
		•	
		Eagle Pass, TX 78852	
	PURPOSE	-	escription
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		Ci	ampaign worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 11/30 Rpt: 22/47	Serna, Roberto (The Honorable)		00020956
4	Date	5 Payee name		·
	02/08/2024	Herrera, Annixa (Ms.)		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$90.00	791 N. Bibb, Unit 233		
		Eagle Pass, TX 78852		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Creation of ad for newspapers
				orealist of da to hewspapers
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI			C33 1.612
_	Date	Payee name		
	02/15/2024	Herrera, Annixa (Ms.)		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$90.00	791 N. Bibb, Unit 233		
	400.00	101 M. Biss, 61M 200		
		Eagle Pass, TX 78852		
_	PURPOSE		h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	٠,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	, laverileing Expense		Check if Austin, TX, officeholder living expense
				Creation of ad for newspapers
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht	Office held
	Date	Payee name		
	02/18/2024	Herrera, Annixa (Ms.)		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$180.00	791 N. Bibb, Unit 233		
		Eagle Pass, TX 78852		
	PURPOSE OF	,	b)	Description
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				creation of ads for newspapers
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
_				

SCHEDULE F1

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

	Credit Card Payment	The Instruction Guide explains how to complete t	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 12/30 Rpt: 23/47	Serna, Roberto (The Honorable)	00020956
4	Date	5 Payee name	•
	01/31/2024	Martinez, Fransica V. (Mrs.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,000.00	661 S. Brazos Street	
		Eagle Pass, TX 78852	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense Ampaign worker
			ampaigh worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol		Office field
	Data	D	
	Date 02/23/2024	Payee name Martinez, Mari (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	P.O. Box 454	
		A.L. 1. TV 70007	
		Asherton, TX 78827	
	PURPOSE OF	, , ,	escription
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		ca	ımpaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	02/23/2024	Martinez, Matthew (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	209 E. Val Verde	
		Crystal City, TX 78839	
	PURPOSE		escription
	OF		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		ca	ımpaign worker
			200
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 13/30 Rpt: 24/47	Serna, Roberto (The Honorable)	00020956
4	Date	5 Payee name	•
	02/23/2024	Martinez, Rosa	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	P.O. Box 458	
		Asherton, TX 78827	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			ampaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/OI		Office field
H	D-1-	_	
	Date	Payee name	
	02/20/2024	Martinez, Veronica (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	661 S. Brazos Street	
		Eagle Pass, TX 78852	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	escription
	EXPENDITURE	gas L	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			oney for gas to get out the vote
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	01/29/2024	Morales IV, Pedro (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	519 N. Ave D	
		Crystal City, TX 78839	
	PURPOSE	, ,	escription
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		C	ampaign worker
	Operated ONE VIII	Out distant 10ff on holding garage	Office In 11
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	•		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Lead Services Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/30 Rpt: 25/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/23/2024	Ochoa, Nati (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	915 Chambers Street
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense campaign worker
		Campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Date	Payee name
	02/16/2024	Ortiz Perez, Gracie
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	801 Medison Dr.
	Ψ100.00	OUT MEdison Dr.
		Carrizo Springs, TX 78852
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		Copies of sample ballots
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
_	Date	Power name
	01/28/2024	Payee name Padilla, Maria (Mrs.)
	Amount (\$)	
	\$107.00	P. O. Box 54
		Carrizo Springs, TX 78834
	DUDDO05	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Purchase of food and water for Democratic meet and
		greet in Dimmit County
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 15/30 Rpt: 26/47	2 FILER NAME Serna, Roberto (The Honorable) 3 Filer ID (Ethics Commission Filers) 00020956
4	Date 01/31/2024	5 Payee name Padilla, Maria (Mrs.)
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code P. O. Box 54 Carrizo Springs, TX 78834
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign worker
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/09/2024	Payee name Padilla, Maria (Mrs.)
	Amount (\$) \$300.00	Payee address; City; State; Zip Code P. O. Box 54 Carrizo Springs, TX 78834
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/16/2024	Payee name Padilla, Maria (Mrs.)
	Amount (\$) \$300.00	Payee address; City; State; Zip Code P. O. Box 54
		Carrizo Springs, TX 78834
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total pages Schedule F1:	
1	Sch: 16/30 Rpt: 27/47	2 FILER NAME Serna, Roberto (The Honorable) 3 Filer ID (Ethics Commission Filers) 00020956
4	Date	5 Payee name
	02/23/2024	Padilla, Maria (Mrs.)
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip CodeP. O. Box 54
		Carrizo Springs, TX 78834
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Compaign worker
		Campaign worker
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/24/2024	Padilla, Maria (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$180.00	P. O. Box 54
	Ψ100.00	1.0.0000
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Reimbursement for food, drinks and tent
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/31/2024	Padilla, Nora (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O. Box 54
	Ψ000.00	
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Frinting Expense
Salaries/Wangs/Contract Labor

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/30 Rpt: 28/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/09/2024	Padilla, Nora (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P.O. Box 54
		Carrizo Springs, TX 78834
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-t
	Date	Payee name
	02/16/2024	Padilla, Nora (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O. Box 54
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/23/2024	Padilla, Nora (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O. Box 54
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign worker
	0 1: 0::::::	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 18/30 Rpt: 29/47	2 FILER NAME Serna, Roberto (The Honorable) 3 Filer ID (Ethics Commission Filers) 00020956
4	Date 02/09/2024	5 Payee name Perez, Frances (Mrs.)
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code P.O. Box 472
8	PURPOSE OF EXPENDITURE	Carrizo Springs, TX 78834 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign worker
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/16/2024	Payee name Perez, Frances (Mrs.)
	Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 472 Carrizo Springs, TX 78834
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/23/2024	Payee name Perez, Frances (Mrs.)
	Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 472
		Carrizo Springs, TX 78834
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this fo	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 19/30 Rpt: 30/47	Serna, Roberto (The Honorable)	00020956
4	Date	5 Payee name	
	01/31/2024	Perez, Francies (Mrs.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	P.O.Box 472	
		Carrizo Springs, TX 78834	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Galaries/ Wages/ Contract East)	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense
		I — I —	aign worker
			•
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	02/23/2024	Perez , Rolando (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	P.O.Box 472	
		Carrizo Springs, TX 78852	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion
	OF EXPENDITURE	Jaianes/Wages/Contract Eabor	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense
		l	aign worker
		· ·	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H	
	Date	Payee name	
	02/23/2024	Perez, Sarah (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	P.O. Box 311	
		Big Wells, TX 78830	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/ Wages/Contract Eabor	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense
		l	aign worker
			-
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/30 Rpt: 31/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/31/2024	Perez, Yolanda (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P.O.Box 175
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	02/09/2024	Perez, Yolanda (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O.Box 175
	φ300.00	F.O.BOX 173
		Chietal City, TV 79920
	DUDD005	Crystal City, TX 78839
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/16/2024	Perez, Yolanda (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O.Box 175
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign worker
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/30 Rpt: 32/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/23/2024	Perez, Yolanda (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P.O.Box 175
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/31/2024	Portales, Petra (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1600 N. 7th Street
		Crysyal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/09/2024	Portales, Petra (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1600 N. 7th Street
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Crysyal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign worker
	0 1 0 0 0 0 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/30 Rpt: 33/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/16/2024	Portales, Petra (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	1600 N. 7th Street
		Crysyal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/23/2024	Portales, Petra (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1600 N. 7th Street
		Crysyal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign worker
		Sampaign none.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/31/2024	Puente, Amelia (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	1511 N. 7th Street
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaign worker
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 23/30 Rpt: 34/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/09/2024	Puente, Amelia (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$450.00	1511 N. 7th Street
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Contract worker
_	Complete ONL V if direct	Candidata/Officeholder name Office county Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/16/2024	Puente, Amelia (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	1511 N. 7th Street
		Crystal City, TX 78839
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense campaign worker
		Campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	Description
	Date 02/23/2024	Payee name
		Puente, Amelia (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	1511 N. 7th Street
		Crystal City, TX 78839
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
		Sampaigh Home.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 24/30 Rpt: 35/47	Serna, Roberto (The Honorable)	00020956
4	Date	5 Payee name	
	01/31/2024	Puente, Rosana (Miss)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$350.00	1001 Villa Hermosa	
		Crystal City, TX 78839	
8	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description Check if tra	vel outside of Texas. Complete Schedule T.
	EXPENDITURE	Galaries/ Wages/ Contract Eabor	stin, TX, officeholder living expense
		Campaign	worker
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	experience to benefit eye		
	Date	Payee name	
	02/09/2024	Puente, Rosana (Miss)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$350.00	1001 Villa Hermosa	
		Createl City, TV 70020	
		Crystal City, TX 78839	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if tra	vel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/ Wages/ Contract Eabor	istin, TX, officeholder living expense
		Campaign	worker
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/23/2024	Puente, Rosana (Miss)	
	Amount (\$) \$350.00	Payee address; City; State; Zip Code 1001 Villa Hermosa	
	φ330.00	1001 VIIIA HEHHOSA	
		Crystal City, TX 78839	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	vel outside of Texas. Complete Schedule T.
	LXI LINDITORL		stin, TX, officeholder living expense
		campaign	MOLVEI
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/30 Rpt: 36/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/16/2024	Puente, Rosanna (Miss)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$350.00	1015 E. Crockett St.
		Crystal City, TX 78839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-1
	Date	Payee name
	02/14/2024	Quijano, Rosa (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	PO Box 36
		La Pryor, TX 78872
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Power name
	02/23/2024	Payee name Quijano, Rosa (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	PO Box 36
	4000.00	
		La Pryor, TX 78872
	PURPOSE	Tax.
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign worker
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contribution/ Officeholds/ (Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/30 Rpt: 37/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	01/31/2024	Ramirez, Sergio (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	2106 Buffalo Blvd.
		Carrizo Springs, TX 78834
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	02/09/2024	Ramirez, Sergio (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	2106 Buffalo Blvd.
	Ψ+00.00	2100 Bullalo Bivu.
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaign worker
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Data	
	Date 02/16/2024	Payee name Payer Sorgio (Mr.)
		Ramirez, Sergio (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	2106 Buffalo Blvd.
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign worker
		Campaign worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Cara r ayment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 27/30 Rpt: 38/47	Serna, Roberto (The Honorable)		00020956
4	Date	5 Payee name		·
	02/23/2024	Ramirez, Sergio (Mr.)		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$400.00	2106 Buffalo Blvd.		
		Carrizo Springs, TX 78834		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				campaign worker
				1.00
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O	1		
F	Date	Payee name		
	02/15/2024	Rios, Jaime (Mr.)		
	Amount (\$)	Payee address; City; State; Zip Cod	le	_
	\$1,000.00	1765 Taft street		
		Eagle Pass, TX 78852		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee		Contribution to a candidate for Maverick County
				Sheriff
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	02/23/2024	Saenz, Rufino (Mr.)		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$300.00	114 Martinez Lane		
		Crystal City, TX 78839		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign worker
				Campaign worker
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O	•		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total manage Calculula E4.	O SU SO NAME	_
1	Total pages Schedule F1: Sch: 28/30 Rpt: 39/47	2 FILER NAME Serna, Roberto (The Honorable) 3 Filer ID (Ethics Commission Filers) 00020956	
4	Date	5 Payee name	
	02/05/2024	Solis, Julie Ann (Ms.)	
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code2500 El Indio Hwy	
		Eagle Pass, TX 78852	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense ads on internet	
		aus on internet	
L			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/15/2024	Universal Media Connections	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$250.00	2524 N. Veterans Blvd	
	,		
		Eagle Pass, TX 78852	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Radio ads	
		inaulo aus	
_	0 1: 01 1/4 1		_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/31/2024	Vega, Alma (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	1505 Wooding Street	
		Carrizo Springs, TX 78834	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Campaign worker	
_			_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	experience to beliefft C/OI	·	
			- 1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/30 Rpt: 40/47	Serna, Roberto (The Honorable) 00020956
4	Date	5 Payee name
	02/09/2024	Vega, Alma (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	1505 Wooding Street
		Carrizo Springs, TX 78834
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Campaign worker
		Cumpaign worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	02/16/2024	Vega, Alma (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1505 Wooding Street
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign worker
		Campaigh Worker
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	02/23/2024	Vega, Alma (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1505 Wooding Street
		Carrizo Springs, TX 78834
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign worker
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials Legal Services The Instruction G			ages	/Contract Labor		Travel Out of Di OTHER (enter a	strict category not listed above)	
L		_			oxpiaiiis i		թ.с		_			_
1	Total pages Schedule F1: Sch: 30/30 Rpt: 41/47	2		E erto (The Hono	able)				3	Filer ID 00020956	(Ethics Commission Filers)	
┝	<u> </u>	_		•								4
4	Date	5	Payee name									
	02/18/2024		Zavala Cou	nty Sentinel								
<u>ہ</u>	Amount (\$)	7	Payee addre	ss; City;	State:	Zip Co	de					_
ľ		l			Oldic,	2.p 00	uc					
l	\$100.00		202 E Nuec	es Street								
l												
l			Crystal City	TY 78830								
ᆫ			Crystal City	, 17, 70033								
8	PURPOSE	(a)	Category (Se	ee Categories listed at t	he top of this sche	edule)	(b)	Description				
	OF		Advertising					Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		9	•				Check if Austin,	, TX,	officeholder living	g expense	
								Newspaper a	d			
L												_
9	Complete ONLY if direct		Candidate/Offi	ceholder name	0	office sou	ght			Office h	eld	
	expenditure to benefit C/O	┥										
F	Date		Dayon name									\exists
l			Payee name									
	02/23/2024		Zavala Cou	nty Sentinel								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de					
	\$100.00		202 E Nueo	es Street								
	Ψ100.00		202 2 11000	.00 011001								
			Crystal City	, TX 78839								
Н	PURPOSE	(a)	Category (6)	ee Categories listed at	ha tan af thia asha	aduda)	(b)	Description				
l	OF	(*,			ne top of this sche	edule)	(~)	<u> </u>	nutsi	de of Texas, Com	plete Schedule T.	
	EXPENDITURE		Advertising	Expense				—		officeholder living		
								Newspaper a		omooriolaer mani	g expense	
l								ivewspapei a	u			
L												
	Complete ONLY if direct		Candidate/Offi	ceholder name	0	office sou	ght			Office h	eld	
l	expenditure to benefit C/O	4										
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Sch: 1/3 Rpt: 42/47	Serna, Roberto (Th	e Honorable)			00020956				
4 CREDIT CARD ISSUER		ncial institution n Express	EXPENDI [*]	UNITEMIZED TURES TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged \$600.00	(b) Date of Charge 02/04/2024	(c) Date(s) Co 02/07/2024	redit Card Issuer	Paid				
7 PAYEE	(a) Payee name Facebook		(b) Payee add P. O. Box 6 Dallas, TX		City,	State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description		S				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held				
PAYMENT	(a) Amount Charged \$414.06	(b) Date of Charge 02/10/2024	(c) Date(s) Ci 02/12/2024	redit Card Issuer	Paid				
PAYEE	(a) Payee name 3-D Signs		(b) Payee add 7996 1st St Summerset	reet	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description purchase of signs and cards						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	· Paid				
PAYEE	(a) Payee name		(b) Payee add	dress;	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	n					
Political									
Non-Political	(1)	of Texas. Complete Schedule T.							
Complete ONLY if direct candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission F							
Sch: 2/3 Rpt: 43/47	Serna, Roberto (Th	e Honorable)		00020956					
4 CREDIT CARD ISSUER		ncial institution a Express	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6 PAYMENT	(a) Amount Charged \$454.41	(b) Date of Charge 02/12/2024	(c) Date(s) Credit Card Issuel 02/14/2024	r Paid					
7 PAYEE	(a) Payee name Facebook		(b) Payee address; P. O. Box 650448	City,	State,	Zip Code			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	Dallas, TX 75265-0448 (b) Description Purchase of Facebook ad	S					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	nse				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
Political									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
ı									

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	rage Expense s/Memorials Expense ices	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	The Inst	ruction Guide explains l	now to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Sch: 3/3 Rpt: 44/47	Serna, Roberto (Th	e Honorable)		00020956
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZ	
ISSUER	America	n Express	EXPENDITURES CHARGED TO A CRI	\$ =DIT
		•	CARD	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid
	\$1,500.00	02/23/2024	02/24/2024	
	4=,000.00	0=,=0,=0= :		
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
			7713 Stoney Creek C	т
	ATC Solutions		-	
			Fairfax Station, VA 22	2039
8 PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Text messages sent t	o voters
X Political	Advertising Expense			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held
expenditure to benefit C/OH				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment			mmittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gu	Expense		xpense Nages/Contract Labor			District ut of District (enter a category not listed above)	
1	Total pages Schedule G:	2	FILER NAME	Ξ				3	Filer ID	(Ethics Commission File	rs)
	Sch: 1/3 Rpt: 45/47		Serna, Rob	erto (The Honora	able)				00020	956	
4	Date	5	Payee name								
	02/18/2024		Academy								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode				
	\$108.23		2083Vetera	ıns Blvd.							
	Reimbursement from political contributions intended		Eagle Pass	, TX 78852							
8	PURPOSE	(a)	Category (s	ee Categories listed at the	e top of this sch	edule)	(b) Description	CI	neck if trav	rel outside of Texas. Complete Sched	dule T.
	OF EXPENDITURE		Event Expe	ense				Cl	neck if Aus	stin, TX, officeholder living expense	
	LAI LINDITORE						purchase of two	tent	ts		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Office	holder name			Office sought			Office held	
	Date		Payee name								
	02/13/2024		Amazon								
	Amount (\$)	T	Payee addre	ss; City;	State;	Zip Co	ode				
	\$324.75	\$324.75 410 Terry Ave N.									
	Reimbursement from political contributions intended		Seattle, WA	A 98109							
	PURPOSE OF		Category (S	ee Categories listed at the	e top of this sch	edule)	Description	_		rel outside of Texas. Complete Sched	dule T.
	EXPENDITURE		Advertising	Expense			L	_		stin, TX, officeholder living expense	
							purchase of print	terı	ns cart	ridges	
	0 1: 01:17.7.1	Ţ	1.1 · 10.00				0"			000	
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Office	noider name			Office sought			Office held	
	C/OH										
	Date	Π	Payee name								
	02/18/2024		Flores, Jes	us (Mr.)							
	Amount (\$)	T	Payee addre	ss; City;	State;	Zip Co	ode				
	\$300.00		506 Nueces	s Street							
	Reimbursement from										
	political contributions intended		Eagle Pass	, TX 78852							
	PURPOSE	T	Category (s	ee Categories listed at the	e top of this sch	edule)	Description	Cl	neck if trav	rel outside of Texas. Complete Sched	dule T.
	OF EXPENDITURE		Salaries/Wa	ages/Contract La	bor		[CI	neck if Aus	stin, TX, officeholder living expense	
	EXI ENDITORE						work for 2 weeks	s ab	sentee	and for food	
	Complete <u>ONLY</u> if direct expenditure to benefit	Car	ndidate/Office	holder name			Office sought			Office held	
	C/OH										
l											

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Printing E Salaries/ The Instruction Guide explains how to co	Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/3 Rpt: 46/47		Serna, Roberto (The Honorable)		00020956
4	Date	5	Payee name		
L	02/23/2024		Flores, Jesus (Mr.)		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$500.00		506 Nueces Street		
	Reimbursement from				
	political contributions intended		Eagle Pass, TX 78852	<u> </u>	
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Labor	L	Check if Austin, TX, officeholder living expense
				Campaign worker	Г
_	Complete ONII V if direct		odidata/Officabaldar nama	Office accept	Office hold
9	Complete <u>ONLY</u> if direct expenditure to benefit	car	ndidate/Officeholder name	Office sought	Office held
L	C/OH				
	Date		Payee name		
	02/21/2024		Fuentes, Blanca (Mrs.)		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$300.00		1576 Roosevelt		
	Reimbursement from				
	political contributions intended		Eagle Passs, TX 78852		
	PURPOSE OF		Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Labor	L	Check if Austin, TX, officeholder living expense
				Campaign worker	г
L	Complete ONLY if direct	<u> </u>	odidata/Officabaldar sama	Office sought	Office hold
	Complete ONLY if direct expenditure to benefit	car	ndidate/Officeholder name	Office sought	Office held
L	C/OH				
	Date	Ī	Payee name		
	02/21/2024		Guibeau, Josie (Ms.)		
	Amount (\$)	\vdash	Payee address; City; State; Zip C	ode	
	\$200.00		1664 Spirit Lanes		
	Reimbursement from				
	political contributions intended		eagle pass, TX 78852		
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Check if Austin, TX, officeholder living expense
				Campaign worker	r
		<u> </u>			
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name	Office sought	Office held
	C/OH				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Offfice Food/Beverage Expense Poll y - Gift/Awards/Memorials Expense Prin al Committee Legal Services Sala			nyment/Reimbursement rhead/Rental Expense pense 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)		
The Instruction Guide explains how to complete this for								
1	, -	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
l	Sch: 3/3 Rpt: 47/47		Serna, Roberto (The Honorable)				00020956	
4	Date	5	Payee name					
l	02/05/2024		Lowe's					
6	Amount (\$)	7	Payee address; City; State; Z	ip Co	de			
l	\$43.31		574 South Bibb Avenue					
	Reimbursement from political contributions intended		Eagle Pass, TX 78852					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	e)	(b) Description	Cł	neck if travel outside of Texas. Complete Schedule T.	
l	OF EXPENDITURE		material			Cł	neck if Austin, TX, officeholder living expense	
l	EXPENDITURE				purchase of tie de	owr	ns for signs	
l								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name	ı	Office sought		Office held	
Г	Date		Payee name					
l	02/18/2024		Walmart					
H	Amount (\$)	(\$) Payee address; City; State; Zip Code						
l	\$155.48		496 Bibb Ave	•				
l	Reimbursement from							
	political contributions intended		Eagle Pass, TX 78852					
⊢	PURPOSE		Category (See Categories listed at the top of this schedule	e)	Description	7 Ch	neck if travel outside of Texas. Complete Schedule T.	
l	OF		Food/Beverage Expense			_	heck if Austin, TX, officeholder living expense	
l	EXPENDITURE		Toda/Bovorago Exponed		purchase of wate	r, c	chips and chairs	
l							·	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name	I	Office sought		Office held	