STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT

FORM SC C/OH COVER SHEET PG 1

The SC C/OH Instruction C	Guide explains how to complete t	this form	1 Filer ID		2 Total pages file	ed:
The 3C C/OH illstruction C	Turde explains now to complete t	.iiis ioiiii.	(Ethics Commission Filers) 00087944		13	3
3 CANDIDATE NAME	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
INAIVIE	Mrs.	Deborah L.			Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	02/05/2024	
	THOIN WILL	Bell		001117.		
		D 0			Date Hand-delivered or	Data Bastmarkad
4 CANDIDATE	ADDRESS / PO BOX; APT	/ SUITE #; C	CITY; STATE; ZIP CO	DE	Date Hallu-delivered of	Date Postiliaineu
ADDRESS	5920 Forest Blvd.		•		Receipt #	Amount
Change of Address	Brownsville, TX 78526				Date Processed	•
Change of Address						
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Mrs.	Stacy A.				
NAME		· · · · · · ·				
	NICKNAME	LAST			SUFFIX	
		Bielstein				
6 CAMPAIGN	STREET ADDRESS (NO PO	Y BOY DI EVCE)	· ADT / CHITE #	CITY;	STATE;	ZIP CODE
TREASURER	1405 Boca Chica Blvd.	BUA PLEASE)	, APT/ SUITE #,	CIII,	SIAIE,	ZIP CODE
ADDRESS						
(Residence or Business)	Apt. 128					
	Brownsville, TX 78520					
		-::ONE 1				
7 CAMPAIGN TREASURER	AREA CODE	PHONE N	NUMBER		EXTENSION	
PHONE	(956) 346-6944					
8 REPORT TYPE	January 15	30th da	y before convention / elect	tion [Runoff	
	Junuary 15	<u> </u>	y Delote Convention / Close	,ion L	Kunon	
	July 15	8th day	before convention / election	on [Final report (A	ttach SC C/OH-FR)
9 PERIOD		'ear				Day Year
COVERED	01/01/2024		THROUGH		01/25	5/2024
10 CONVENTION / ELECTION DATE	Month Day Ye	ear	11 OFFICE SOUGHT	г	STATE CHAIR	₹
				·	X COUNTY CHA	AIR
12 POLITICAL	Republican			JNTY (If Applica	abla)	
PARTY	Republican			neron	ible)	
			- Can	ICIOII		
	<u> </u>					
		GO.	TO PAGE 2			
		GO	TO PAGE 2			

STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT: SUPPORT & TOTALS

FORM SC C/OH COVER SHEET PG 2

2 of 13

13 CANDIDATE NAME	Bell, Deborah L. (Mr	S.)	14 Filer ID (00087944	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)		political expenditures by political committees to suppart andidate's knowledge or consent. Candidates are respenditures.		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
	🖵	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 1,180.80
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 1,262.47
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LARIOD	AST DAY OF THE	\$ 1,833.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFADAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Mrs.	Deborah L. Bell	
		Signa	ature of Candidate	
AFFIX NO	ΓARY STAMP / SEAL AΒ	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	er administering oath	Printed name of officer administering oath	Title of officer	administering oath

SUBTOTALS - SC C/OH

FORM SC C/OH COVER SHEET PG 3

				3 of 13
18 CANDIDA		19 Filer ID	(Ethi	cs Commission Filers)
	porah L. (Mrs.)	00087944		
	LE SUBTOTALS = SCHEDULE		SUBTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,140.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	40.80
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	1,235.50
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	26.97
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRI	IBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to compl	ete this for	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/13	
2	FILER NAME Bell, Debora	ո L. (Mrs.)			3	Filer ID (Ethics Commission 00087944	n Filers)
4	Date 01/16/2024		te PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
_		Harlingen, TX 78552			_		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 01/20/2024	Chryst, Ruth)		Amount of Contribution (\$)	\$100.00
		San Benito, TX 78586	<u> </u>	5 1 (0 1 : "	<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/22/2024	Elbert, Wyatt)		Amount of Contribution (\$)	\$25.00
		San Antonio, TX 78238					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 01/13/2024	Garcia, Lorenzo				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 01/05/2024	Full name of contributor out-of-state Gonzales, Eduardo Contributor address; City; State; Zip Code Brownsville, TX 78520	te PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			l				

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/13		
2	FILER NAME Bell, Debora	h L. (Mrs.)			3	Filer ID (Ethics Commission 00087944	n Filers)
4	Date 01/04/2024	5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	\$500.00
_	Duinning Langu	Brownsville, TX 78521		O Francisco (Con Instructions			
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	•)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/20/2024 Olson, Julia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00		
	Principal occu	San Benito, TX 78586 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 01/07/2024	Full name of contributor [Shugart, Keith Contributor address; City; Star	out-of-state PAC (ID#:_ te; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing aggr	Denton, TX 76201	1	Employer (Coo Instructions	_		
	Filicipal occu	pation / Job title (See Instructions)		Employer (See Instructions	')		
	Date 01/14/2024	Full name of contributor [Southerland, Javier Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Brownsville, TX 78520 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/20/2024	Full name of contributor [Tyma, Ellen Contributor address; City; Sta				Amount of Contribution (\$)	\$40.00
	Principal occur	Brownsville, TX 78521		Employer (See Instructions	3)		
	enncipal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			'				

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/13 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Bell, Deborah L. (Mrs.) 00087944 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 01/24/2024 Elbert, Aubrey \$40.80 US Postal Service stamps 7 Contributor address; City; State; Zip Code for get out the vote postcards Edinburg, TX 78542 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 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)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/5 Rpt: 7/13	Bell, Deborah L. (Mrs.) 00087944
4	Date	5 Payee name
	01/22/2024	Allegra
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$102.85	1801 S 77 Sunshine Strip
		Halfraga, TV 70FF0
Ļ		Harlingen, TX 78550
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Get out the vote post cards
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Data	
	Date 01/05/2024	Payee name Brand Boosters
_	Amount (\$)	Payee address; City; State; Zip Code
	\$433.00	301 N McColl Rd
	, , , , , ,	
		McAllen, TX 78501
	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
		Palm cards
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit ever	
	Date	Payee name
	01/17/2024	Cavasos, Johnny
	Amount (\$) \$432.46	Payee address; City; State; Zip Code 317 7th St
	Φ432.40	317 7111 31
		Brownsville, TX 78520
	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
		Political signs by EHLJ Mgmt
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Orialians to bottom of of	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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	•	Expense Printing E	Expense /Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed abo	ve)
1	Total pages Schedule F1:				3 Filer ID (Ethics Commission	on Filers)
	Sch: 2/5 Rpt: 8/13	Bell, Deborah L. (Mrs.)			00087944	
4	Date	Payee name				
	01/05/2024	Delta Air Baggage Fee				
6	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$30.00	3002 Heritage Way				
		Harlingen, TX 78550				
8	PURPOSE	a) Category (See Categories listed at the	ne top of this schedule)	(b) Description		
	OF EXPENDITURE	Travel Out of District		1 =	outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
				Training	n, 175, unicendiaer living expense	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ught	Office held	
_	Date	Payee name				
	01/05/2024	Embassy Suites by Hilton D	es Moines			
	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$8.00	101 E Locust St	•			
		Des Moines, IA 50309				
	PURPOSE OF	a) Category (See Categories listed at the	ne top of this schedule)	(b) Description		
	EXPENDITURE	Travel Out of District		ı =	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
				Training	J ,	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ught	Office held	
	Date	Payee name				
	01/08/2024	Facebook advertising				
	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$24.97	1 Hacker Way				
		Menlo Park, CA 94025				
	PURPOSE	a) Category (See Categories listed at the	ne top of this schedule)	(b) Description		
	OF EXPENDITURE	Advertising Expense		ı <u> </u>	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
				Facebook at		
					J	
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	_ I ught	Office held	
	expenditure to benefit C/O			-		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

	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: 3/5 Rpt: 9/13	Bell, Deborah L. (Mrs.) 00087944	
4	Date	5 Payee name	
	01/22/2024	FundHero	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$1.53	243 E 400 S. Ste B-100,	
		Salt Lake City, UT 84101	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Donation fee	
		Donation lee	
_	0 1: 0:11:4"		_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/05/2024	FundHero	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$2.75	243 E 400 S. Ste B-100,	
		Salt Lake City, UT 84101	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Donation fee	
		Donation lee	
_	Opening the ONLY if allowed	Occadidate (Office health are reserved)	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	<u>'</u>		
	Date	Payee name	
	01/07/2024	FundHero	
	Amount (\$)	Payee address; City; State; Zip Code	Τ
	\$12.55	243 E 400 S. Ste B-100,	
		Salt Lake City, UT 84101	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	LA LIBITORE	Check if Austin, TX, officeholder living expense	
		Donation fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefit 6/01	•	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 Salaries (Contract Labor, Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 4/5 Rpt: 10/13	Bell, Deborah L. (Mrs.) 00087944	
4	Date	5 Payee name	_
	01/14/2024	FundHero	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1.53	243 E 400 S. Ste B-100,	
		Salt Lake City, UT 84101	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Donation fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
	Date	Payee name	
	01/04/2024	The Ink Spot Print & Design	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$120.16	1601 E Alton Gloor Blvd	
		Brownsville, TX 78526	
	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	
		Name tags	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	01/16/2024	Wal-Mart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$34.12	2205 Ruben M Torres	
		Brownsville, TX 78526	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political sign zip ties	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experientare to benefit G/OI	·	_

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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

1 Total pages Schedule F1: Sch: 5/5 Rpt: 11/13 Bell, Deborah L. (Mrs.) 4 Date 01/16/2024 5 Payee name Whataburger 6 Amount (\$) 7 Payee address; City; State; Zip Code 2290 North Expressway Brownsville, TX 78521 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Food expense during political sign place.	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ry - Gift/Awards/Memorials Expense al Committee Legal Services The Instruction Guide explains	Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Travel in District Travel Out of District OTHER (enter a category not listed above)
Sch: 5/5 Rpt: 11/13 Bell, Deborah L. (Mrs.) O0087944 Date 01/16/2024 Food (\$) Sali.58 Payee name Whataburger 7 Payee address; City; State; Zip Code 2290 North Expressway Brownsville, TX 78521 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Food expense during political sign place 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	1 Total names Schedule E1:			Filer ID (Ethics Commission Filers)
4 Date 01/16/2024 5 Payee name Whataburger 6 Amount (\$) 7 Payee address; City; State; Zip Code 2290 North Expressway Brownsville, TX 78521 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Food expense during political sign place 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held			3	
O1/16/2024 Whataburger 6 Amount (\$) 7 Payee address; City; State; Zip Code \$31.58 \$31.58 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Food expense during political sign place. 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
\$31.58 2290 North Expressway Brownsville, TX 78521 8 PURPOSE OF EXPENDITURE		1		
\$31.58 2290 North Expressway Brownsville, TX 78521 8 PURPOSE OF EXPENDITURE	6 Amount (\$)	7 Pavee address: City: State	: Zip Code	
Brownsville, TX 78521 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Food expense during political sign place 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held			, ,	
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule in Check if Austin, TX, officeholder living expense in Check if Austin, TX, officeholder living	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
OF EXPENDITURE Food/Beverage Expense Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Food expense during political sign place 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Brownsville, TX 78521		
Food/Beverage Expense Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Food expense during political sign place Office sought Office held		(a) Category (See Categories listed at the top of this sch	nedule) (b) Description	
Check if Austin, TX, officeholder living expense Food expense during political sign place Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Food/Beverage Expense	Check if travel outs	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	EXPENDITORE		, –	
9 Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			Food expense of	luring political sign placement
9 Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Office held Office held				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name C	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 12/13 Bell, Deborah L. (Mrs.) 00087944 Date Payee name 01/09/2024 **Fundhero Premium** 6 Amount (\$) Payee address; City; State; Zip Code \$26.97 243 E 400 S. Ste B-100 Reimbursement from political contributions intended Salt Lake City, UT 84101 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** Fundraising subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Insti	ruction Guide explains how to complete this form.	1 Total pages Schedule T: Sch: 1/1 Rpt: 13/13		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Bell, Deborah L.	(Mrs.)	00087944		
4 Name of Contribut	or / Corporation or Labor Organization / Pledgor /Payee			
Delta Air Baggaç				
5 Contribution / Expe	enditure reported on:			
Schedule A2	Schedule B Schedule B(J) Schedule C2	Schedule D X Schedule F1		
Schedule F2	Schedule F4 Schedule G Schedule H	Schedule COH-UC		
6 Dates of Travel	7 Name of person(s) traveling			
• Bales of Haver	Bell, Deborah			
	8 Departure city or name of departure location			
01/05/2024	Harlingen			
	9 Destination city or name of destination location			
01/05/2024	Des Moines			
10 Means of transport		other event)		
Baggage Fees	Training			
	or / Corporation or Labor Organization / Pledgor /Payee			
	by Hilton Des Moines			
	enditure reported on:			
Schedule A2	Schedule B Schedule B(J) Schedule C2	Schedule D X Schedule F1		
Schedule F2	Schedule F4 Schedule G Schedule H	Schedule COH-UC		
		Scriedule correc		
Dates of Travel	Name of person(s) traveling			
	Bell, Deborah			
01/05/2024	Departure city or name of departure location			
01/03/2024	Harlingen			
01/05/2024	Destination city or name of destination location De Moines			
		tother event		
Means of transpor	ation Purpose of travel (including name of conference, seminar, or Training	other event)		
	Training			
i e				