### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instructior	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commission 00088105	n Filers)	2 Total pages f	iled: 18
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	· · · · · · · · · · · · · · · · · · ·	USE ONLY
OFFICEHOLDER	Mr.	Abiel			OFFICE	USE UNL I
NAME	1011.	Abiei			Date Received	
					ELECTRONIC	ALLY FILED
					02/05/2024	
	NICKNAME	LAST		SUFFIX	02/03/2024	
		Flores				
4 CANDIDATE /	ADDRESS / PO BOX; AP		·V·	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER			,			
MAILING	2508 E. Griffin Parkway				Receipt #	Amount
ADDRESS					Receipt #	Amount
Change of Address	Mission, TX 78572					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER						
NAME	Mrs.	Sylvia R.				
	NICKNAME	LAST			SUFFIX	
		Flores				
		FIDIES				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	APT / S	SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	2508 E. Griffin Parkway					
ADDRESS						
(Residence or Business)						
	Mission, TX 78572					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER	(956) 630-7777					
PHONE	()					
8 REPORT						
TYPE	January 15	X 30th day before		Inoff	15th day after or	ampaign treasurer
		X 30th day before			appointment (off	
	July 15	8th day before	election 🗌 Ex	ceeded modified	Final Report (Att	ach C/OH-FR)
				porting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	IROUGH	01/25/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimary	Runoff	Other	
	03/05/2024	X F	lilldiy	Kulloli	Other	
	03/03/2024		Seneral	Special		
			1.		(ff 1	
11 OFFICE	OFFICE HELD (if any)		1	2 OFFICE SOUGHT		
				District Judge Dis	strict 332	
	!					
		GO 1	O PAGE 2			
Forme provided by T	exas Ethics Commission	1484841 -4	hice state ty us		10	sion V3.5.1.9000c47
i onno provided by Te	Aus Luncs Commission	www.et	hics.state.tx.us		vers	JOIL 4 2.2.1.3000C471

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 18

13 C / OH NAME	Flores, Abiel (Mr.)		14 Filer ID 00088105	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t d officeholders are required to report this information	he candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS		I. IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		<b>\$</b> 0.00
			-	<b>\$</b> 25,350.00
EXPENDITURE	· · · · · · · · · · · · · · · · · · ·	PLEDGES, LOANS, OR GUARANTEES OF LOANS IZED POLITICAL EXPENDITURES	5)	<b>.</b>
TOTALS				<b>\$</b> 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		<b>\$</b> 31,300.08
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	<b>\$</b> 59,250.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 142,500.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Μ	r. Abiel Flores	
		Signature of	Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to cr	ertify which, witness my hand and seal of office.		
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of office	r administering oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.9000c47

	FORM JC/OH COVER SHEET PG 3 3 of 18
19 Filer ID	(Ethics Commission Filers)
00088105	5

18 FILER NA		19 Filer ID 00088105	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		<b>\$</b> 25,350.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$ 50,000.00
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		<b>\$</b> 31,300.08
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.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

SUBTOTALS - JC/OH

The Instruc	tion Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 1/6 Rpt: 4/18
2 FILER NAME Flores, Abiel (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088105	
	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
01/15/2024	24 Hr. Rescue Desk, LLC	]	\$1,500.00
	6 Contributor address; City; State; Zip Code		
	Edinburg, TX 78542		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	<b>11</b> Law firm of contributor's sp	pouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/02/2024	Advance 911 Pain Management PLLC		\$2,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of cor		Law firm of contributor's sp	oouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/12/2024	Anzaldua, Rene	]	\$500.00
	Contributor address; City; State; Zip Code		
	· · · · · · · · · · · · · · · · · · ·		
	Edinburg, TX 78542		
Contributor's P	rincipal Occupation	Contributor's Job Title	
business owr	ier	owner	
Contributor's e	mployer/law firm	Law firm of contributor's sp	bouse (if any)
self			
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided I	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.9000c47

The Instruc	tion Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 2/6 Rpt: 5/18
2 FILER NAME Flores, Abiel (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088105	
01/16/2024	<ul> <li>5 Full name of contributorout-of-state PAC (ID#:)</li> <li>Arredondo Law Firm</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$1,500.00
	McAllen, TX 78504		
8 Contributor's P	incipal Occupation	9 Contributor's Job Title	•
10 Contributor's e	nployer/law firm	<b>11</b> Law firm of contributor's sp	ouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/16/2024	Atlas, Hall & Rodriguez, LLP		\$2,500.00
	Contributor address; City; State; Zip Code McAllen, TX 78502		
Contributor's P	incipal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)	1	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/10/2024	Barrera, Juan Aviel		\$1,500.00
	Contributor address; City; State; Zip Code		
	Mission, TX 78572		
	incipal Occupation	Contributor's Job Title	
business owr		owner	
self	nployer/law firm	Law firm of contributor's sp	Jouse (If any)
	a child, law firm of parent(s) (if any)		
Forms provided h	y Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.9000c4

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 3/6 Rpt: 6/18
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)	
Flores, Abie			00088105
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
01/16/2024	C & C Waste Management LLC		\$2,500.00
	6 Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
12 If contributor i	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/18/2024	Caso Law Firm, PLLC		\$2,500.00
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's s		bouse (if any)	
If contributor i	s a child, law firm of parent(s) (if any)	•	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/17/2024	Chavana, Vito		\$750.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's	Principal Occupation	Contributor's Job Title	
business ow	ner	owner	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
self			
If contributor i	s a child, law firm of parent(s) (if any)		
Forme provided	by Toxas Ethics Commission www.ethic	e etato ty ue	Version V/2 5 1 0000c/7

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 4/6 Rpt: 7/18
2 FILER NAME Flores, Abiel	(Mr.)		3 Filer ID (Ethics Commission Filers) 00088105
4 Date 01/12/2024	5 Full name of contributor out-of-state PAC (ID#: Dale and Klein, LLP		7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/17/2024	G. Lopez Law Group, PLLC		\$1,500.00
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's s		oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/02/2024	Gaona, Bailey Nicole		\$1,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78503		
	Principal Occupation	Contributor's Job Title	
business ow		owner	
self	employer/law firm	Law firm of contributor's sp	ouse (ii any)
If contributor is	s a child, law firm of parent(s) (if any)	I	
	by Toyas Ethics Commission	s state ty us	Version V/2 5 1 9000c477

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 5/6 Rpt: 8/18		
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)	
Flores, Abiel (Mr.)			00088105	,	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
01/12/2024	HKC Law Firm				\$1,500.00
	6 Contributor address; City; S	State; Zip Code			
	McAllen, TX 78504				
8 Contributor's F	Principal Occupation		9 Contributor's Job Title	1	
10 Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if	any)			
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/05/2024	Law Office of Edna Esca	name Cedillo			\$500.00
	Contributor address; City; S	State; Zip Code			
	Edinburg, TX 78539				
Contributor's F	Principal Occupation		Contributor's Job Title		
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if	anvl			
	s a child, law littl of parent(s) (if	any)			
Data	Full name of contributor			Amount of Contribution (ft)	
Date 01/11/2024	Full name of contributor Linebarger, Goggan, Bla	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	\$1,500.00
01/11/2024					φ1,300.00
	Contributor address; City; S	state, zip code			
	Austin, TX 78760				
Contributor's F	rincipal Occupation		Contributor's Job Title		
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if	any)			
				· · · ·	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 6/6 Rpt: 9/18		
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)			
Flores, Abiel (Mr.)		00088105			
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)		
01/15/2024	Patino & Associates, PLLC		\$1,500.00		
	6 Contributor address; City; State; Zip Code				
	McAllen, TX 78501				
8 Contributor's I	Principal Occupation	9 Contributor's Job Title			
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)		
12 If contributor is	s a child, law firm of parent(s) (if any)	•			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
01/08/2024	Rodriguez, Roberto		\$100.00		
	Contributor address; City; State; Zip Code		1		
	New Braunfels, TX 78130				
Contributor's Principal Occupation Contributor's Job Title					
business ow	ner	owner			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)			
self					
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)		
01/15/2024	Sig Transit Serv., LLC		\$1,000.00		
	Contributor address; City; State; Zip Code		1		
	Hidalgo, TX 78557				
Contributor's I	Principal Occupation	Contributor's Job Title			
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				
L	by Tayaa Ethica Commission		Voreign V2 E 1 0000047		

LOANS (J	UDICIAL)			SCHEDULE E(J)
The Instructio	n Guide explains how to complete this f	orm.	-	ges Schedule E(J): 1 Rpt: 10/18
2 FILER NAME Flores, Abiel (Mr	.)		<ul><li>3 Filer ID</li><li>000881</li></ul>	(Ethics Commission Filers) 05
<sup>4</sup> TOTAL OF UN	ITEMIZED LOANS			\$
5 Date of loan 01/23/2024	7 Name of lender out-of-state PA Flores, Abiel	C (ID#:	)	9 Loan Amount (\$) \$50,000.00
6 Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
No	Mission, TX 78574			<b>11</b> Maturity Date
12 Lender's Principal	Occupation	13 Lender's Job Title		
Attorney		Attorney/Owner		
14 Lender's Employe	/Law Firm	15 Law Firm of lender's spous	e (if any)	
Law Office of Ab	iel Flores			
16 If lender is child, la	w firm of parent(s) (if any)			
17 Description of Coll	ateral	18 Check if personal funds we	re deposited	into political account
X None			·	(See Instructions)
19 GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
X not applicable	21 Guarantor address; City; State;	Zip Code		
23 Guarantor's Princi	bal Occupation	24 Guarantor's Job Title		
25 Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27 If guarantor is child	d, law firm of parent(s) (if any)			

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen nmittee Legal Services The Instruction Guide e		Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 1/8 Rpt: 11/18		Flores, Abiel (Mr.)					00088105
4	Date	5	Payee name					
	01/17/2024		Brand Boosters					
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le		
	\$2,500.00		301 S. McColl Rd.					
			McAllen, TX 78501					
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	edule)	(b) Description		
	OF EXPENDITURE		Printing Expense					de of Texas. Complete Schedule T.
								officeholder living expense
						campaign ma	ater	ial
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	Jht		Office held
	Date		Payee name					
	01/04/2024		Cabrera, Lorenzo					
	Amount (\$)		Payee address; City;	State:	Zip Co	le		
	\$600.00		P O Box 757	,				
	\$000.00							
			Edcouch, TX 78538					
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	edule)	(b) Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Complete Schedule T.
								officeholder living expense
						campaign lat	or	
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	Iht		Office held
	expenditure to benefit C/OF							
	Date		Payee name					
	01/11/2024		Donna Fundraiser for Indigent H	lospice	<b>:</b>			
	Amount (\$)		Payee address; City;	State;	Zip Co	le		
	\$649.50							
			Doppo TV 79527					
	DUDDOGT		Donna, TX 78537			(L) _ · ·		
	PURPOSE OF	(a)	Category (See Categories listed at the top		edule)	(b) Description	outoi	de of Texas. Complete Schedule T.
	EXPENDITURE		Contributions/Donations Made E Candidate/Officeholder/Political		ittoo			officeholder living expense
			Candidate/Officerioide//Political	Comm	lillee	donation	, 17,	
						achadon		
_		Ļ	andidata/Officabaldar as as			ubt		Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	Jrit		Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event E Fees Food/Be Gift/Awa nmittee Legal S	xpense everage Expense ards/Memorials Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ayment/Reimbursemer rrhead/Rental Expense pense kpense /ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 2/8 Rpt: 12/18		Flores, Abiel (Mr.	)				00088105	
4	Date	5	Payee name						
	01/18/2024		Exclusive Design	S					
6	Amount (\$)	7	Payee address;	City; State	e; Zip Co	de			
	\$958.01		2421 E. Griffin Pl						
			Mission, TX 7857	2					
8	PURPOSE	(a)	Category (See Categ	ories listed at the top of this sc	hedule)	(b) Description			
	OF EXPENDITURE		Printing Expense					ide of Texas. Comp	
								, officeholder living	expense
						campaign	mater	ial	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehold	ler name	Office sou	ght		Office he	ld
	Date		Payee name						
	01/19/2024		Farias III, Leonel						
-	Amount (\$)		Payee address;	City; State	e; Zip Co	de			
	\$500.00		- uj co uu,	ону, <u>-</u>	<b>, _</b> ,				
	<b>4000.00</b>								
			Weslaco , TX 78	3596					
	PURPOSE	(a)	Category (See Categ	ories listed at the top of this sc	hedule)	(b) Description			
	OF EXPENDITURE		Salaries/Wages/0					ide of Texas. Comp	
								, officeholder living	expense
						campaign	labor		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehold	ler name	Office sou	ght		Office he	ld
	- p	-							
	Date		Payee name						
	01/11/2024		Flores, Sylvia						
	Amount (\$)		Payee address;	City; State	e; Zip Coo	de			
	\$1,500.00								
			Mission, TX 7857	2					
	PURPOSE	(a)	Category (See Cateç	ories listed at the top of this sc	hedule)	(b) Description			
	OF EXPENDITURE		Salaries/Wages/0	Contract Labor				ide of Texas. Comp	
								, officeholder living	expense
						campaign	CONIT	actiador	
		L				-			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehold	ler name	Office sou	ght		Office he	ld

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)		
	Sch: 3/8 Rpt: 13/18	Flores, Abiel (Mr.)	00088105		
4	Date	5 Payee name			
	01/13/2024	Garza, Cornelio			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,000.00				
		Mission, TX 78572			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T.		
			TX, officeholder living expense		
		campaign labo	ט		
9	Complete ONI V if direct	Candidate/Officeholder name Office sought	Office held		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Once neid		
	Date	D			
	01/04/2024	Payee name Hayes Medrano, Selina			
		-			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$4,200.00	612 W. Nolana, Suite 250			
		McAllen, TX 78504			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense		
		campaign con			
			C .		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OF				
	Date	Payee name			
	01/12/2024	Hayes Medrano, Selina			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,020.00	612 W. Nolana, Suite 250			
		McAllen, TX 78504			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE		utside of Texas. Complete Schedule T.		
			TX, officeholder living expense		
		event expense	e reimbursement		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OF				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Ŀ		· · ·	
1	Total pages Schedule F1: Sch: 4/8 Rpt: 14/18	2 FILER NAME Flores, Abiel (Mr.)	3 Filer ID (Ethics Commission Filers) 00088105
4	Date	5 Payee name	
	01/20/2024	Hayes Medrano, Selina	
6	Amount (\$) \$1,000.00	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>612 W. Nolana, Suite 250</li> <li>McAllen, TX 78504</li> </ul>	
		()	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Insulting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Pavee name	
	01/04/2024	Kool River Media	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	821 S. Valley View Rd Donna, TX 78537	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/12/2024	Lira, Daniel	
	Amount (\$) \$750.00	Payee address; City; State; Zip Code 7203 Sabino	
		Pharr , TX 78577	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ract labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 5/8 Rpt: 15/18	2       FILER NAME       3       Filer ID (Ethics Commission Filers)         Flores, Abiel (Mr.)       00088105
4	Date	5 Payee name
	01/22/2024	Lira, Daniel
6	Amount (\$) \$700.00	7 Payee address; City; State; Zip Code 7203 Sabino Pharr , TX 78577
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/05/2024	Lira, Daniel
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	7203 Sabino Pharr , TX 78577
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Salaries/Wages/Contract Labor</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense campaign labor</li> </ul> </li> </ul>
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/07/2024	Marroquin, Diana
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code
		Weslaco , TX 78596
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense campaign labor</li> </ul> </li> </ul>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITU	RE CATEGORIES FOR	R BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	office Over nse Polling Ex s Expense Printing E	kpense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	ILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	-
	Sch: 6/8 Rpt: 16/18	lores, Abiel (Mr.)			00088105	
4	Date 01/07/2024	ayee name ⁄Iedina, Gerardo				
6	Amount (\$)	Payee address; City;	State; Zip Co	de		_
U	\$1,450.00	418 Beech AcAllen, TX 78501	State, Zip CC	ue		
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at Advertising Expense	the top of this schedule)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Sign	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ght	Office held	
	Date	ayee name				
	01/06/2024	loore, Maggie				
	Amount (\$) \$1,057.00	Payee address; City;	State; Zip Co	de		
		Donna, TX 78537				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at Galaries/Wages/Contract L			outside of Texas. Complete Schedule T. n, TX, officeholder living expense DOI	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ght	Office held	
-	Date	22/00 0200				—
	01/13/2024	Payee name Pena, Rosa				
	Amount (\$) \$500.00	Payee address; City;	State; Zip Co	de		
		Pharr , TX 78577				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at Salaries/Wages/Contract L			outside of Texas. Complete Schedule T. n, TX, officeholder living expense OOI	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ght	Office held	
						-

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Sch: 7/8 Rpt: 17/18	Flores, Abiel (Mr.)	00088105	
4	Date	5 Payee name		
	01/19/2024	Perez, Marco		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$8,500.00	2008 W. Jonquil		
		McAllen, TX 78501		
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Sulting	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	01/04/2024	Radio United		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$808.00	1300 N. 10th St. McAllen, TX 78501		
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	01/13/2024	Rancho Grande		
	Amount (\$) \$457.57	Payee address; City; State; Zip Code 107 N. Nebraska		
		San Juan, TX 78589		
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement     Solicitation/Fundraising Expense       Fees     Office Overhead/Rental Expense     Transportation Equipment & Related Expense       Food/Beverage Expense     Polling Expense     Travel in District       Gitf/Awards/Memorials Expense     Printing Expense     Travel Out of District       Committee     Legal Services     Salaries/Wages/Contract Labor     OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/8 Rpt: 18/18	Flores, Abiel (Mr.) 00088105
4	Date	5 Payee name
	01/12/2024	Rios, Rogelio
6	Amount (\$) \$150.00	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>Mission, TX 78572</li> </ul>
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/05/2024	Texas Citrus Fiesta
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	220 E. 9th St. Mission , TX 78572
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense ad</li> </ul>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/08/2024	Vento Reyes, Norma
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3457 PFC Pedro Martinez Rd
		Mercedes, TX 78570
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held