FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00061857 22 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Lyda A. NAME Date Received **ELECTRONICALLY FILED** 02/05/2024 NICKNAME LAST **SUFFIX** Ness-Garcia CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** The Honorable Lyda A. NAME NICKNAME LAST **SUFFIX** Ness-Garcia **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (915) 920-1849 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 01/25/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 383 El Paso District Judge District 383

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Ness-Garcia, Lyda A	(The Honorable)		14 Filer ID 00061857	(Ethics Com	ımission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus may have been made without equired to report this informatio	the candidate's or of	fficeholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ИЕ			
⊔ °	GENERAL					
		COMMITTEE ADD	DRESS			
	SPECIFIC					
		COMMITTEE CAN	MPAIGN TREASURER NAME			
		COMMITTEE CAN	MPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL C	ONTRIBUTIONS(OTHER THAI	 N PLEDGES, LOANS	S,	
TOTALS		ES OF LOANS, OR	CONTRIBUTIONS MADE ELE	CTRONICALLY)	\$	0.00
		ICAL CONTRIBU PLEDGES, LOANS	JTIONS 5, OR GUARANTEES OF LOAN	S)	\$	10,266.82
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL E	XPENDITURES		\$	0.00
	4. TOTAL POLIT	ICAL EXPENDIT	URES		\$	10,822.60
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	36,900.66
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	16,785.43
17 AFFIDAVIT						
			I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.	y of perjury, that the Ill information require	accompanying ed to be reporte	report is ed by me
			The Honora	ıble Lyda A. Ness-	Garcia	
			Signature of	f Candidate or Office	holder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subso	cribed before me, by the s	aid		, this the		day
			my hand and seal of office.			
Signature of office	cer administering oath	Printed name	of officer administering oath	Title of off	icer administer	ing oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

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				3 01 22			
18 FILER N	18 FILER NAME 19 Filer ID (Ethics Commission Filers)						
Ness-Garcia, Lyda A. (The Honorable) 00061857							
	LE SUBTOTALS F SCHEDULE		SUBT	OTAL AMOUNT			
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	10,266.82			
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3. X	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	0.00			
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$	0.00			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	6	\$	10,822.60			
6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$	0.00			
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00			
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00			
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00			
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	148.54			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				
			<u> </u>				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 1/7 Rpt: 4/22		
2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Ness-Garcia	, Lyda A. (The Honorable)				00061857		
4	Date 01/24/2024	5 Full name of contributor Alonzo, Caroline6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$97.01		
		Roundrock, TX 78681						
8	Contributor's I	rincipal Occupation		9 Contributor's Job Title				
	Attorney	, ,		Attorney				
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)		
	Gray Becker							
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 (\$)		
01/07/2024 Anderson, Kathleen (The Honorable) Contributor address; City; State; Zip Code El Paso, TX 79902				\$72.34				
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>			
	Attorney	- ппстрат Оссирацоп		Retired Judge				
		employer/law firm		Law firm of contributor's sp	20116	co (if any)		
	retired	employer/iaw iiim		Law IIIII of Continuator 3 3	Jou	se (ii ariy)		
		s a child, law firm of parent(s) (if	anv)					
	ii continuator i	s a crima, raw inini or parcria(s) (ii	any					
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)		
	01/05/2024	Carr, Aubrey				\$24.25		
		Contributor address; City; 9	State; Zip Code					
	0	Evan, GA 30809		Contaile de de Tale Tide				
	Airline	Principal Occupation		Contributor's Job Title				
				Flight Attendant		(the same)		
	United	employer/law firm		Law firm of contributor's sp	oous	se (If any)		
-		s a child, law firm of parent(s) (if	any)	<u> </u>				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 2/7 Rpt: 5/22	
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Ness-Garcia	, Lyda A. (The Honorable)				00061857
4	Date 01/05/2024	5 Full name of contributor Carreon & Beltran6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$195.33
		El Paso, TX 79902				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's			11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
01/09/2024 Cross, Clinton Contributor address; City; State; Zip Code				\$100.00		
		El Paso, TX 79912				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	1	Τ	Amount of Contribution (\$)
	01/17/2024	Feuille, Robert	U out-of-state i AC (ID#.			\$1,000.00
		Contributor address; City; El Paso, TX 79951	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
Contributor's employer/law firm Law firm of contributor's s				ous	se (if any)	
	Scott Hulse					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.		l pages Schedule A(J)1 : 3/7 Rpt: 6/22	.:
2	FILER NAME				3 Filer	ID (Ethics Commissi	on Filers)
	Ness-Garcia	, Lyda A. (The Honorable)			000	61857	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amo	unt of Contribution (\$)	
	01/09/2024	James Rey Attorneys at L	_aw PC				\$500.00
		6 Contributor address; City; Si El Paso, TX 79901	Contributor address; City; State; Zip Code				
_	Canatuilautaula			9 Contributor's Job Title	1		
8	Contributors	Principal Occupation		• Contributor's Job Title			
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oouse (if a	any)	
12	If contributor is	s a child, law firm of parent(s) (if a	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amo	unt of Contribution (\$)	
	01/17/2024 Law Office of Luis Yanez					\$1,000.00	
		Contributor address; City; Si	tate: Zip Code		1		
	Contributor's F	El Paso, TX 79901 Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if a	any)	
	If contributor is	s a child, law firm of parent(s) (if a	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amo	unt of Contribution (\$)	
	01/17/2024	Law Offices of Leonard M	lorales				\$970.10
		Contributor address; City; Si El Paso, TX 79901					
\vdash	Contributor's F	I Principal Occupation		Contributor's Job Title	1		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse (if a	any)	
	If contributor is	s a child, law firm of parent(s) (if a	any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1		jes Schedule A(J)1 Rpt: 7/22	L:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Ness-Garcia	a, Lyda A. (The Honorable)				000618	57	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount o	of Contribution (\$)	
	01/09/2024	Leverton, Reed (Judge)	, —					\$400.00
		6 Contributor address; City;	State; Zip Code					
		El Paso, TX 79932						
8	Contributor's	Principal Occupation 9 Contributor's Job Title						
	Attorney			retired				
10	Contributor's or	employer/law firm		11 Law firm of contributor's s	pou	se (if any)		
12		s a child, law firm of parent(s) (if any)					
12	. II COILLIDGIOI I	s a criliu, law lilili of parent(s) (n any)					
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount o	of Contribution (\$)	
	01/09/2024	Longoria, Delia Virginia	—					\$145.17
Contributor address; City; State; Zip Code								
		,	, ,					
		El Paso, TX 79912						
	Contributor's	Principal Occupation		Contributor's Job Title				
	Attorney	тиори Оссираноп		Attorney				
_		employer/law firm		Law firm of contributor's s	nou	so (if any)		
	Virgina Long			Law IIIII of Contributor 3 3	spou.	se (ii ariy)		
		s a child, law firm of parent(s) (if any)					
	ii contributor i	s a criliu, law lilili of parent(s) (n any)					
F	Date	Full name of contributor	out-of-state PAC (ID#:		T	Amount o	of Contribution (\$)	
	01/11/2024	Mark Davis Firm	_					\$1,000.00
		Contributor address; City;	State; Zip Code		"			
			·					
		El Paso, TX 79925						
	Contributor's	Principal Occupation		Contributor's Job Title				
		, .						
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)		
	If contributor i	s a child, law firm of parent(s) (if any)					
Г								

	MONET	ARY POLITICAL	CONTRIBUTION	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this t	form.	1		ges Schedule A(J)1 7 Rpt: 8/22	L:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Ness-Garcia	a, Lyda A. (The Honorable)				000618	357	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount	of Contribution (\$)	
	01/09/2024	Pease Law Office						\$2,300.00
		6 Contributor address; City;	State; Zip Code					
		El Paso, TX 79901						
8	Contributor's	Principal Occupation	upation 9 Contributor's Job Title					
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pou	se (if any)	<u> </u>	
12	2 If contributor i	s a child, law firm of parent(s) (if any)	1				
	Date	Full name of contributor	out-of-state PAC (ID#:		T	Amount	of Contribution (\$)	
	01/09/2024 Pease Law Office							\$500.00
		Contributor address; City;	State; Zip Code		"			
		El Paso, TX 79901						
	Contributor's	I Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)	1	
	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 (\$)	
	01/23/2024	Rios, Erica			.]			\$242.52
		Contributor address; City;	State; Zip Code		"]			
		El Paso, TX 79901						
	Contributor's	Principal Occupation		Contributor's Job Title				
	Attorney			Attorney				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)	1	
	Erica Rios L	aw Offices						
	If contributor i	s a child, law firm of parent(s) (if any)					
L								

MONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
The Instru	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 6/7 Rpt: 9/22
2 FILER NAME Ness-Garcia	ı, Lyda A. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00061857
4 Date 01/05/2024	5 Full name of contributor Sam Flores Law Firm 6 Contributor address; City; S	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$970.10
	El Paso, TX 79903			
8 Contributor's I	Contributor's Principal Occupation 9 Contributor's Job Title		9 Contributor's Job Title	
10 Contributor's	10 Contributor's employer/law firm 11 Law firm of contributor's			pouse (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 (\$)
01/09/2024 Semko, Gene Contributor address; City; State; Zip Code			\$500.00	
	El Paso, TX 79901			
Contributor's I	Principal Occupation		Contributor's Job Title	
Attorney			Mediator	
	employer/law firm		Law firm of contributor's sp	oouse (if any)
Eugene Sen				
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 (\$)
01/21/2024	Wearmouth, Hope			\$50.00
	Contributor address; City; S El Paso, TX 79925	State; Zip Code		
Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>
Retired			Retired	
			Law firm of contributor's sp	oouse (if any)
Retired				
If contributor i	s a child, law firm of parent(s) (if	any)		

MONE	TARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A(J)1
The Instru	uction Guide explains how to complete this f	orm.	I	l pages Schedule A(J)1: : 7/7 Rpt: 10/22
2 FILER NAME	FILER NAME Ness-Garcia, Lyda A. (The Honorable)			ID (Ethics Commission Filers) 61857
4 Date 01/15/2024	 5 Full name of contributor out-of-state PAC (ID#:_ Williams, John 6 Contributor address; City; State; Zip Code)		unt of Contribution (\$) \$200.00
9 Contributorio	El Paso, TX 79901 Principal Occupation	9 Contributor's Job Title		
Attorney	Principal Occupation	Attorney		
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	ouse (if a	any)
John William	ms is a child, law firm of parent(s) (if any)			

PLEDGED CONTRIBUTIONS (J	JUDICIAL)		SCHE	DULE B(J)
The Instruction Guide explains how to	o complete this form.	1 Total pages Sc Sch: 1/1 Rpt:		
2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	Ness-Garcia, Lyda A. (The Honorable)			sion Filers)
TOTAL OF UNITEMIZED PLEDGES			\$	0.00
5 Date 6 Full name of pledgor out-of-state PAC (ID#:) 7 Pledgor Address; City; State; Zip Code		8 Amount of pledge (\$)	9 In-kin (If a	d description applicable)
		Check if travel of	I I I outside of Texa	s. Complete Schedule T.
10 Pledgor's principal occupation	11 Pledgor's job title			
12 Pledgor's employer/law firm	13 Law firm of pledgo	or's spouse (if any)		
14 If pledgor is a child, law firm of parent(s) (if any)	-			

	LOANS (J	UDICIAL)				SCHI	EDULE E (J)
	The Instruction Guide explains how to complete this form			al pages Sched				
2	FILER NAME Ness-Garcia, Lyd	FILER NAME Ness-Garcia, Lyda A. (The Honorable)				r ID (Ethics C 061857	ommission File	ers)
4	TOTAL OF UNITEMIZED LOANS					\$		0.00
5	Date of loan 7 Name of lender out-of-state PAC (ID#:)		9 Loan A	Amount (\$)				
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interes		
						11 Maturi	ty Date	
12 Lender's Principal Occupation 13 Lender's Job Title								
14 Lender's Employer/Law Firm				15 Law Firm of lender's spo	use (if any	′)		
16	16 If lender is child, law firm of parent(s) (if any)							
17 Description of Collateral None			18 Check if personal funds v	were depo		al account nstructions)		
19 GUARANTOR INFORMATION 20 Name of guarantor						22 Amour	nt Guaranteed	(\$)
	not applicable	21 Guarantor address; City;	State;	Zip Code				
23	Guarantor's Princip	pal Occupation		24 Guarantor's Job Title				
25	Guarantor's Emplo	yer/Law Firm		26 Law Firm of guarantor's spouse (if any)				
27	If guarantor is child	d, law firm of parent(s) (if any)						

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage I
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

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

	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: 1/9 Rpt: 13/22	Ness-Garcia, Lyda A. (The Honorable) 00061857
4	Date	5 Payee name
	01/08/2024	2Ten
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.00	3007 Montana
		El Paso, TX 79901
8	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 Coffee for volunteers
		Solice is. Volumesis
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/23/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	366 Summer St
		Somerville, MA 02144
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Tejano Tejano
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payao nama
	01/25/2024	Payee name ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	366 Summer St
	420.00	
		Somerville, MA 02144
	PURPOSE	· • • • • • • • • • • • • • • • • • • •
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Democrats donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	- Firming to bollone of of	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Tatal assess Calcadala E4.	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	
	Sch: 2/9 Rpt: 14/22	Ness-Garcia, Lyda A. (The Honorable) 00061857
4	Date	5 Payee name
	01/25/2024	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.18	410 Terry Ave N
		Seattle, TX 98109
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) supplies for signs and drop lit (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Zip ties rubberbands etc
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	01/22/2024	Barnes & Noble - Starbucks
_		
	Amount (\$) \$10.59	
	\$10.59	8889 Gateway West
		El Paso, TX 79925
	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
		Conee
_	Compulate ONLY if direct	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	01/22/2024	Black El Paso Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	3231 E. Wyoming
		El Paso, TX 79901
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Membership
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	onpenditure to beliefft C/Of	·

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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 cor	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 3/9 Rpt: 15/22	Ness-Garcia, Lyda A. (The Honorable)		00061857
4	Date	5 Payee name		I
	01/02/2024	Coffee Box		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$49.50	401 N. Mesa		
		El Paso, TX 79901		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Food/Beverage Expense	` ,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Coffee & BreakFast block walker
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
	Date	Payee name		
	01/03/2024	Coffee Box		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$19.66	401 N. Mesa		
		El Paso, TX 79901		
	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 Coffee for volunteers
				Collee for volunteers
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		JIIL	Office field
	D-4-			
	Date	Payee name		
	01/10/2024	Constant Contact		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$79.95	1601 Trapelo		
		Waltham , MA 02451		
	PURPOSE OF	, ,	(b)	Description
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				email
	Complete ONLY if direct	Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/OI		,	223

SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		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: 4/9 Rpt: 16/22	Ness-Garcia, Lyda A. (The Honorable)	00061857
4	Date	5 Payee name	
	01/11/2024	Costco	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$46.94	6101 Gateway Blvd	
		El Paso, TX 79925	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
	EXPENDITURE		TX, officeholder living expense
		Gas	
_	2		200
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	<u>'</u>		
	Date	Payee name	
	01/11/2024	Costco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$46.94	6101 Gateway Blvd	
		El Paso, TX 79925	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Traver in District	outside of Texas. Complete Schedule T. TX, officeholder living expense
		gas volunteer	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	01/16/2024	Costco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$495.67	6101 Gateway Blvd	
		El Paso, TX 79925	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin,	TX, officeholder living expense
		food for camp	paign
	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

Fees Office Overhead/fr
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Magnes/C

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/9 Rpt: 17/22	Ness-Garcia, Lyda A. (The Honorable) 00061857
4	Date	5 Payee name
	01/16/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.34	6101 Gateway Blvd
		El Paso, TX 79925
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense goods
		goods
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	David and the second se
	01/19/2024	Payee name El Paso Mail & Print Service
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$9,143.90	1144 Vista De Oro St
		EL Paso, TX 79935
	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 Mailers and postage
		Maliers and postage
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payso nama
	01/22/2024	Payee name El Paso Wing House
	Amount (\$)	
	\$62.63	Payee address; City; State; Zip Code 4028 N. Mesa
	Φ02.03	4026 N. Mesa
		FLD TV 70000
		EL Paso, TX 79902
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		block walkers
1		
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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

	Credit Card Payment	The Instruction Guide explains how to complete t	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
	Sch: 6/9 Rpt: 18/22	Ness-Garcia, Lyda A. (The Honorable)	00061857
4	Date	5 Payee name	'
	01/22/2024	Food King	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$34.49	5514 Alameda	
		EL PAso, TX 79905	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
		Inte	ear volunteers
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OI		Cinide Held
-	Date	Payee name	
	01/22/2024	Glias Coffee	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.38	4841 Alberta Ave	
	Ψ19.30	4041 Alberta Ave	
		EL Daca TV 70001	
		El Paso, TX 79901	
	PURPOSE OF		escription Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense
		Co	offee for volunteers
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	01/16/2024	Lyft	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$12.99	185 Berry St	
		Suite 400	
		San Francisco, CA 94107	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE		Check if Austin, TX, officeholder living expense
		rid	le home for volunteer
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	Office rielu
L			

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

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

	Contributions/ Donations Made By 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 File	ers)
	Sch: 7/9 Rpt: 19/22	Ness-Garcia, Lyda A. (The Honorable) 00061857	
4	Date	5 Payee name	
	01/09/2024	Martitas Lunch Box	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$13.19	3623 Caitlin	
		El Paso, TX 79925	
8	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	
		Eastside Dem mtg meal	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	01/24/2024	NAACP	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	2115 Wedgewood	
		El Paso, TX 79925	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense NAACP brunch	
		TV VICE STATION	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	01/10/2024	Popeyes	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$53.02	8800 Montana	
		El Paso, TX 79925	
	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 food volunteers	
		iood voidilleers	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	me provided by Tevas F	Ethics Commission www.athics.state.tv.us Version V2.5.1.000)0o47t

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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: 8/9 Rpt: 20/22	Ness-Garcia, Lyda A. (The Honorable) 00061857
4	Date	5 Payee name
	01/22/2024	Valero
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.47	3000 N. Mesa
		El Paso, TX 79902
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		gas
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/22/2024	Valero
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.74	3000 N. Mesa
		El Paso, TX 79902
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense gas volunteers
		gas volunteers
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	01/25/2024	Zippy's Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$482.79	2855 Pershing
		El Paso, TX 79903
	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.
	ZAI ZAISTONZ	Check if Austin, TX, officeholder living expense Literature
		Literature
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com 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		nmittee	Gift/Awards/Memoria Legal Services The Instruction			/ages/	/Contract Labor		Travel Out of Di OTHER (enter a	strict category not listed a	bove)
1	Total pages Schedule F1: Sch: 9/9 Rpt: 21/22	ı		ı, Lyda A. (Th	e Honorable))			ı	Filer ID 00061857	(Ethics Commiss	sion Filers)
4	Date 01/16/2024		Payee name walgreens					•				
6	Amount (\$) \$5.36		Payee addres 2800 N. Mes El Paso, TX	sa	State	; Zip Co	de					
8	PURPOSE OF EXPENDITURE			e Categories listed a age Expense	t the top of this sch	nedule)		=		de of Texas. Com officeholder living	plete Schedule T. g expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		Candidate/Offic	eholder name	(Office sou	ght			Office h	eld	
	Date 01/22/2024	ı	Payee name walgreens									
	Amount (\$) \$17.87		Payee addres 2800 N. Mes El Paso, TX	sa	State	; Zip Co	de					
	PURPOSE OF EXPENDITURE			e Categories listed a age Expense	t the top of this sch	nedule)				de of Texas. Com officeholder living	plete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Offic	eholder name	(Office sou	ght			Office h	eld	

SCHEDULE |

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I: Sch: 1/1 Rpt:4 Date 01/19/2024	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00061857 5 Payee name Albertsons
6 Amount (\$) 10.39	7 Payee Address; City; State; Zip 3100 N. Mesa El Paso, TX 79902
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense (b) Description (See instructions regarding type of information required.) Coffee office
Date 01/19/2024	Payee name The Pizza Joint
Amount (\$) 12.98	Payee Address; City; State; Zip 500 N. Stanton El Paso, TX 79901
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense (b) Description Lunch staff (See instructions regarding type of information required.)
Date 01/18/2024	Payee name Walmart
Amount (\$) 125.17	Payee Address; City; State; Zip 5631 Dyer El PAso, TX 79925
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Supplies (b) Description (See instructions regarding type of information required.) paper goods/cups/coffee etc