CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete t	this form.	Filer ID (Ethics Commission Fil 00080065		2 Total pages file 40	
3 CANDIDATE /	MS / MRS / MR FIF	RST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable Vid	ctoria			Date Received ELECTRONICA	
					02/05/2024	LETTILLD
	_	ST eave Criado		SUFFIX	02/05/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT / SU	JITE#; CITY;		ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 472773				Receipt #	Amount
Change of Address	Garland, TX 75047				Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS / MRS / MR FIR	RST		MI		
TREASURER NAME	Kri	stina N.				
	NICKNAME LAS	ST		SUFFIX		
	Kristi Ka					
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BO) 4144 N. Central Expy., Ste. 10		APT / SU	ITE #; CITY;	STA ⁻	TE; ZIP CODE
ADDRESS (Residence or Business)						
	Dallas, TX 75204					
7 CAMPAIGN	AREA CODE PHONE N	IUMBER EX	TENSION			
TREASURER PHONE	(214) 937-4424					
8 REPORT TYPE	January 15 X	30th day before ele	ection Runof	if	15th day after cam	
	July 15	8th day before elec	rtion D Even	eded modified	appointment (office Final Report (Attac	
	July 15	our day belore elec		ing limit	Fіпаі Кероп (Ацас	JII C/OH-PK)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	THRO	DUGH	01/25/2024		
10 ELECTION	ELECTION DATE			ECTION TYPE	_	
	Month Day Year	XPrim	ary	Runoff	Other	
	03/05/2024	Gene	eral	Special		
11 OFFICE	OFFICE HELD (if any)		12 (OFFICE SOUGHT ((if known)	
	State Representative District 2	107		State Senator Dis		
	1		l			
		GO ТО	PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 40

13 C / OH NAME	14 Filer ID 00080065	(Ethics Com	ımission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus of may have been made without equired to report this informatio	the candidate's or office	eholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	1E			
	GENERAL	COMMITTEE ADD	NDECC			
	SPECIFIC	COMMITTEE ADD	RESS			
	Si Zeii ie					
		COMMITTEE CAM	IPAIGN TREASURER NAME			
		COMMITTEE CAM	IPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			ONTRIBUTIONS (OTHER THA CONTRIBUTIONS MADE ELE		\$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	S)	\$	28,953.59
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EX	XPENDITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURE	S		\$	30,734.98
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	33,288.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT			I swear, or affirm, under penalt			
			true and correct and includes a under Title 15, Election Code.	ll information required t	o be reporte	ed by me
			The Honora	ble Victoria Neave Cı	riado	
			Signature of	f Candidate or Officehol	lder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		day
of	, 20, to co	ertify which, witness	my hand and seal of office.			
Signature of office	cer administering	Printed name	of officer administering	Title of office	r administer	ing oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 40			
18 FILER NA		19 Filer ID	(Ethics	Commission Filers)			
	riado, Victoria (The Honorable)	00080065					
	LE SUBTOTALS		SI	UBTOTAL AMOUNT			
NAIVIE OF	SCHEDULE		 				
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	25,011.00			
2. X	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4.	SCHEDULE E: LOANS		\$				
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS						
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 I TO FILER	RETURNED	\$				

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S 		SCHEDUI	_E A1
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 1/17 Rpt: 4/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)				3	Filer ID (Ethics Commission 00080065	on Filers)
4	Date 01/19/2024	5 Full name of contributor Acosta, Arcilia6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75247						
8	Principal occu President/CE	pation / Job title (See Instructions EO)	9	Employer (See Instructions CARCON Industries & C		struction	
	Date 01/07/2024	Full name of contributor Arredondo, Rebecca Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code				Amount of Contribution (\$)	\$100.00
	Dringing! goog	Richardson, TX 75081			Employer (See Instructions	<u></u>		
	Paralegal	pation / Job title (See Instructions			Oldcastle BuildingEnvel		e Inc.	
	Date 01/25/2024	Full name of contributor Baez, Salomon Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75217						
	Principal occu Mecnico	pation / Job title (See Instructions	5)		Employer (See Instructions Employer	5)		
	Date 01/09/2024	Full name of contributor Bradley, Glenn Contributor address; City; St Mesquite, TX 75181	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Advertising	pation / Job title (See Instructions)		Employer (See Instructions Big Hit Creative	5)		
	Date 01/02/2024	Full name of contributor Bridges, Janet Contributor address; City; St Dallas, TX 75218	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	()		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	olete this forr	n.	1	Total pages Schedule A1: Sch: 2/17 Rpt: 5/40	
2	FILER NAME	lo, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)
4	Date 01/08/2024		ate PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
		Dallas, TX 75214					
8	Principal occu Attorney	pation / Job title (See Instructions)	9	Employer (See Instructions Butcher Legal Group PL	•	;	
	Date 01/09/2024	Cedillo, Frances	ate PAC (ID#:			Amount of Contribution (\$)	\$97.00
	Deignaignal annu	Dallas, TX 75227		Franksian (Caalinatuustiana			
	Director	pation / Job title (See Instructions)		Employer (See Instructions Hope Academy for Dysl		a	
	Date 01/05/2024	Full name of contributor out-of-st Chartier, Tiffany Contributor address; City; State; Zip Cod	ate PAC (ID#:)		Amount of Contribution (\$)	\$16.00
		Richardson, TX 75080					
	Principal occu Assistant Ed	pation / Job title (See Instructions) litor		Employer (See Instructions The Dallas Express	5)		
	Date 01/06/2024	Chavez, Aracely				Amount of Contribution (\$)	\$100.00
	Principal occu Executive Di	pation / Job title (See Instructions) irector		Employer (See Instructions FWISD	5)		
	Date 01/09/2024	Full name of contributor out-of-st Del Bosque, Lizette Contributor address; City; State; Zip Cod Arlington, TX 76002	ate PAC (ID#:			Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	EDD Operat	ions Anaiyst		MUFG			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/17 Rpt: 6/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)		3	Filer ID (Ethics Commission 00080065	n Filers)
4	Date 01/25/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	El Paso, TX 79901 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 01/11/2024	Full name of contributor out-of-state PAC (ID#:_ Flores, Hector Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Duncanville, TX 75137 pation / Job title (See Instructions)	Employer (See Instructions Not Employed)		
	Date 01/09/2024	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Javan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$16.00
	Principal occu Retail	Wichita, KS 67203 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
	Principal occu Retired	Dallas, TX 75218 pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 01/20/2024	Full name of contributor out-of-state PAC (ID#:_Guio, Alexandra Contributor address; City; State; Zip Code Dallas, TX 75204	<u>'</u>		Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Estrada & Puente)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 4/17 Rpt: 7/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)
4	Date 01/20/2024	5 Full name of contributor Halkins, Mary6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Princeton, TX 75407 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	(i)		
	Date 01/05/2024	Full name of contributor Hernandez-Erbeyi, Laura Contributor address; City; State	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Staff	Garland, TX 75014 pation / Job title (See Instructions)		Employer (See Instructions MKI	<u>;</u>)		
	Date 01/09/2024	Full name of contributor Hesson, O'Neil Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$2.00
		Dallas, TX 75210 pation / Job title (See Instructions)		Employer (See Instructions			
	Date 01/02/2024	Full name of contributor Hoffman, Jane Contributor address; City; State	out-of-state PAC (ID#:	The SERUN Foundation		Amount of Contribution (\$)	\$500.00
	Principal occu Not Employe	Dallas, TX 75225 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>;</u>)		
	Date 01/09/2024	Full name of contributor Horlick, Benjamin Contributor address; City; State Charlotte, NC 28205	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$16.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	()		

	MONET	ARY POLITICAL (CONTRIBUTIO	N(SCHEDUI	LE A1
	The Instru	ction Guide explains hov	v to complete this f	orr	m.	1	Total pages Schedule A1: Sch: 5/17 Rpt: 8/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)				3	Filer ID (Ethics Commission 00080065	on Filers)
4	Date 01/14/2024	5 Full name of contributor Howard, Marcel6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$15.00
		Cedar Hill, TX 75104						
8	Principal occu Driver	pation / Job title (See Instruction:	5)	9	Employer (See Instructions UPS	s) 		
	Date 01/09/2024	Full name of contributor Kastl, Krisi Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75204 pation / Job title (See Instruction:	<i>s</i>)		Employer (See Instructions	<u>:)</u>		
	attorney	pation / Job title (See Instruction)	3)		KASTL LAW PC	"		
	Date 01/03/2024	Full name of contributor Kastl, Krisi Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 75204						
	Principal occu attorney	pation / Job title (See Instruction:	5)		Employer (See Instructions KASTL LAW PC	5)		
	Date 01/09/2024	Full name of contributor Kastl, Krisi Contributor address; City; S Dallas, TX 75204	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
	Principal occu ATTORNEY	pation / Job title (See Instruction	s)		Employer (See Instructions KASTL LAW PC	s)		
	Date 01/09/2024	Full name of contributor Ledferd, Ericka Contributor address; City; S Royse City, TX 75189	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$516.00
	Principal occu Public Relati	pation / Job title (See Instructions	5)		Employer (See Instructions Ledferd PR	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 6/17 Rpt: 9/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)				3	Filer ID (Ethics Commission 00080065	on Filers)
4	Date 01/25/2024	5 Full name of contributor Lee, Kevin6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$250.00
Ĺ		Kennedale, TX 76060	, I		5 1 (0 1 1 1			
8	Sr Field Eng	pation / Job title (See Instructions ineer)	9	Employer (See Instructions Nordson Corp	5)		
	Date 01/02/2024	Full name of contributor Lloyd Gosselink Rochelle Contributor address; City; St Austin, TX 78701					Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 01/19/2024	Full name of contributor Long, Shannon Contributor address; City; St					Amount of Contribution (\$)	\$50.00
	Principal occu	Mesquite, TX 75149 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Police Dispa		,		City of Murphy	,		
	Date 01/06/2024	Full name of contributor Lopez, Homero Contributor address; City; St Mesquite, TX 75150	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Operations N	pation / Job title (See Instructions Manager)		Employer (See Instructions Alexander Ballroom	5)		
	Date 01/10/2024	Full name of contributor Lopez, Rachel Contributor address; City; St Mesquite, TX 75181	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Product Man	pation / Job title (See Instructions nager)		Employer (See Instructions Broadspire	s)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/17 Rpt: 10/40	
2		do, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)
4	Date 01/14/2024	5 Full name of contributor Lugo, Rene6 Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$15.00
_	British al once	Grand Prairie, TX 75050	·	2. Francisco (Con Instructions	Ĺ		
8		upation / Job title (See Instructions) Health Worker	<u> </u>	9 Employer (See Instructions Centene	S) 		
	Date 01/09/2024	Full name of contributor Maldonado, Joseph Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu	Fort Worth, TX 76244 upation / Job title (See Instructions))	Employer (See Instructions	 s)		
	Chief Deputy			Tarrant County	_		
	Date 01/09/2024	Full name of contributor Martinez, Arturo Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Dallas, TX 75208					
	Principal occu Legal	upation / Job title (See Instructions))	Employer (See Instructions Dallas	5)		
	Date 01/14/2024	Full name of contributor Martinez, Dante Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu Operations M	upation / Job title (See Instructions))	Employer (See Instructions Interstate Solutions	<u>I</u> S)		
	Date 01/09/2024	Full name of contributor Martinez, Janet Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu Human Reso	upation / Job title (See Instructions) ources)	Employer (See Instructions HR Mami	5)		

	FARY POLITICAL CONTRIBUTIO	VIN 5		SCHEDUI	E A1
The Instru	action Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/17 Rpt: 11/40	
2 FILER NAME Neave Criad	: do, Victoria (The Honorable)		3	Filer ID (Ethics Commission 00080065	on Filers)
4 Date 01/10/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00
	Duncanville, TX 75116				
8 Principal occu Human Res	' '	9 Employer (See Instruction HR Mami	s)		
Date 01/09/2024	Full name of contributor out-of-state PAC (ID#: Meaders, Alexandra Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
Principal occi	Canal Winchester, OH 43110 upation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
Lawyer	apation / 665 title (See Instituctions)	MEADERS LAW PLLC			
Date 01/18/2024	Full name of contributor out-of-state PAC (ID#: Montoya, Regina Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dallas, TX 75229				
Principal occu Attorney	upation / Job title (See Instructions)	Employer (See Instruction Regina T. Montoya PLI			
Date 01/09/2024	Full name of contributor out-of-state PAC (ID#:_ Neave, Belen Contributor address; City; State; Zip Code Scurry, TX 75158			Amount of Contribution (\$)	\$25.00
Principal occu Unemployed	upation / Job title (See Instructions)	Employer (See Instruction Unemployed	s)		
Date 01/09/2024	Full name of contributor out-of-state PAC (ID#:_ Nguyen, Christine Contributor address; City; State; Zip Code Dallas, TX 75218)		Amount of Contribution (\$)	\$50.00
	upation / Job title (See Instructions)	Employer (See Instruction	s)		

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to co	mplete this forr	n.	1	Total pages Schedule A1: Sch: 9/17 Rpt: 12/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	on Filers)
4	Date 01/11/2024	Nicole Collier Campaign	of-state PAC (ID#:		7	Amount of Contribution (\$)	\$350.00
_	<u></u>	Fort Worth, TX 76124	To To				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 01/22/2024	Full name of contributor out- Oncor Texas State PAC Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 75202					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 01/03/2024	Full name of contributor out- Palomino Hidalgo, Luis Enrique Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$16.00
		Dallas, TX 75227					
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions eXp Realty)		
	Date 01/03/2024	Parsel, Linda	of-state PAC (ID#: Code			Amount of Contribution (\$)	\$20.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 01/09/2024	Parsel, Linda	of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
			1				

	MONET	ARY POLITICAL CONTR	S		SCHEDULE A1		
	The Instru	ction Guide explains how to comp	olete this form	n.	1	Total pages Schedule A1: Sch: 10/17 Rpt: 13/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)
4	Date 01/09/2024	 Full name of contributor out-of-st Pena, Meadow Contributor address; City; State; Zip Coo)	7	Amount of Contribution (\$)	\$25.00
		Richardson, TX 75080					
8		pation / Job title (See Instructions) COORDINATOR	9	Employer (See Instructions DR BRIAN WILLIAMS F		R CONGRESS	
	Date 01/09/2024	Full name of contributor out-of-st Perales, Jose Contributor address; City; State; Zip Cod)		Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75357 pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	Teacher	,		Legacy Preparatory cha		r academy	
	Date 01/25/2024	Full name of contributor out-of-st Perez, Juan Contributor address; City; State; Zip Cod)		Amount of Contribution (\$)	\$100.00	
		Katy, TX 77449					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed			
	Date Full name of contributor out-of-state PAC (ID#: 01/09/2024 Prilliman, Angela					Amount of Contribution (\$)	\$50.00
	Principal occu Entrepreneu	pation / Job title (See Instructions) r		Employer (See Instructions Self Employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/03/2024 Ramirez, Joe M Contributor address; City; State; Zip Code Dallas, TX 75217					Amount of Contribution (\$)	\$16.00
	·	pation / Job title (See Instructions) afety Services		Employer (See Instructions	5)		
	Noduside Se	acty Octvices		MIN			

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDULE A1		
	The Instruc	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 11/17 Rpt: 14/40		
2	FILER NAME Neave Criad	o, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)	
4	Date 01/23/2024	 Full name of contributor	ut-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,500.00	
•	Principal occu	Fort Worth, TX 76101	la l	Employer (See Instructions				
0	Pillicipal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 01/10/2024 Ramos, Ana-Maria Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$500.00	
		Richardson, TX 75085						
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Ramos Law PLLC)			
	Date 01/09/2024	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$40.00	
		Dallas, TX 75235						
	Principal occu Police Office	pation / Job title (See Instructions) r		Employer (See Instructions SMU)			
	Date 01/05/2024	Full name of contributor on the contributor of contributor address; City; State; Zon Dallas, TX 75234	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00	
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Loncar Lyon Jenkins)			
	Date 01/06/2024	Full name of contributor on Reyes, Alicia Contributor address; City; State; Z San Antonio, TX 78223)		Amount of Contribution (\$)	\$25.00		
	Principal occu Assistant pro	pation / Job title (See Instructions) ofessor		Employer (See Instructions Alamo Colleges)			
			I	<u>-</u>				

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 12/17 Rpt: 15/40		
2	FILER NAME Neave Criad	o, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)	
4	Date 01/07/2024	5 Full name of contributor Rios, Zinnia6 Contributor address; City; Sta	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00	
		Fort Worth, TX 76137						
8	Principal occu Realtor	pation / Job title (See Instructions)	9	Employer (See Instructions Kristen Correa Texas R		tors		
	Date 01/11/2024	Full name of contributor Rodella, Debbie Contributor address; City; Sta)	•	Amount of Contribution (\$)	\$500.00	
	Principal occu	Espanola, NM 87532 pation / Job title (See Instructions)		Employer (See Instructions	 s)			
	Retired	panon, cos uno (cos menucione)		Retired	-,			
	Date 01/08/2024	Full name of contributor Rodman, Megan Contributor address; City; Sta	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$250.00	
		Dallas, TX 75206						
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self	5)			
	Date 01/09/2024	Full name of contributor Rodriguez, George Contributor address; City; Sta			•	Amount of Contribution (\$)	\$100.00	
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Saenz-Rodrguez	<u>l</u> S)			
	Date 01/11/2024	Full name of contributor Rojas, Barbara Contributor address; City; Sta Mesquite, TX 75150)		Amount of Contribution (\$)	\$6.00		
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)			
			,					

	MONET	ARY POLITICAL CO	S		SCHEDULE A1		
	The Instruc	ction Guide explains how to	o complete this forn	1.	1	Total pages Schedule A1: Sch: 13/17 Rpt: 16/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	on Filers)
4	Date 01/14/2024	5 Full name of contributor Rojas, Fernando6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)	7	Amount of Contribution (\$)	\$6.00
_	Delicalization	Mesquite, TX 75150	la la	England (Carlotte til			
8	Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/25/2024 Rojas, Fernando Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$20.00
	Deinsinal assu	Mesquite, TX 75150		Familia va (Can Instructiona			
	Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed)		
	Date 01/10/2024	Full name of contributor Roquemore, Marlyncus Contributor address; City; State)	Amount of Contribution (\$) \$25			
		Forney, TX 75126					
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions HealthEquity)		
	Date 01/01/2024	Full name of contributor Ross, Elizabeth Contributor address; City; State Mesquite, TX 75150	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$16.00
	Principal occu Personal sho	pation / Job title (See Instructions) opper		Employer (See Instructions Central market)		
	Date 01/01/2024	Full name of contributor Saenz, Jenn Contributor address; City; State Austin, TX 78746)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions SELF EMPLOYED)		
			1				

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 14/17 Rpt: 17/40	
2	FILER NAME Neave Criad	lo, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)
4	Date 01/09/2024	5 Full name of contributor Saenz, Jenn6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$38.00
		Austin, TX 78746	,		Ĺ		
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions SELF EMPLOYED	s) 		
	Date 01/24/2024	Full name of contributor Salazar, Cristina Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Dallas, TX 75204 spation / Job title (See Instructions	9	Employer (See Instructions	(5)		
	Attorney	pation 7 oob title (See Instructions	,	Self	3)		
	Date 01/25/2024	Full name of contributor Salcido, Francisco Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
		Midland, TX 79705					
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions Self	s)		
	Date 01/01/2024	Full name of contributor Samples, Joseph Contributor address; City; St West Lake Hills, TX 78746	ate; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Self	s)		
	Date 01/25/2024	Full name of contributor Serna, Luis Contributor address; City; St Garland, TX 75043			Amount of Contribution (\$)	\$10.00	
	Principal occu Landscape r	ipation / Job title (See Instructions manager)	Employer (See Instructions Marlin Landscape	s)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 15/17 Rpt: 18/40	
	FILER NAME Neave Criado	o, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)
4		5 Full name of contributor Shipp, Bill6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$25.00
		Marana, AZ 85658					
	Principal occup Not Employe	pation / Job title (See Instructions ed	9	Employer (See Instructions Not Employed	s)		
	Date 01/09/2024	Full name of contributor Small, VR Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Mesquite, TX 75149			L		
	Principal occup CEO	pation / Job title (See Instructions		Employer (See Instructions VWEC	s)		
	Date 01/09/2024	Full name of contributor Suprun, Stephen Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75230					
	Principal occup Adjunct	pation / Job title (See Instructions		Employer (See Instructions Dallas College	s)		
01/25/2024 Taylor, Ben		Full name of contributor Taylor, Ben Contributor address; City; St Dallas, TX 75214	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occup attorney	pation / Job title (See Instructions)	Employer (See Instructions Ted B. Lyon & Associate		P.C.	
	Date O1/11/2024 Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75214 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
				Ted B. Lyon & Associate			

	MONET	ARY POLITICAL CONTRIBUT	ION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 16/17 Rpt: 19/40	
2	FILER NAME Neave Criad	o, Victoria (The Honorable)			3	Filer ID (Ethics Commission 00080065	n Filers)
4	Date 01/09/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$100.00
_	Dringing age	Mesquite, TX 75181	١٥	Employer (Coo Instructions	<u></u>		
8	Community F	pation / Job title (See Instructions) Relations	9	Employer (See Instructions Dallas Area Rapid Trans			
	Date 01/24/2024	Full name of contributor out-of-state PAC (ID Tejeda, Sucet Contributor address; City; State; Zip Code	•	Amount of Contribution (\$)	\$5.00		
	Principal occu	Balch Springs, TX 75180 pation / Job title (See Instructions)	1	Employer (See Instructions	<u> </u>		
	Litigation Pa	,		SettlePou Law Firm	,		
	Date 01/17/2024	Full name of contributor out-of-state PAC (ID Tejeda, Sucet Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$23.00	
		Balch Springs, TX 75180			_		
	Principal occu Litigation Pa	pation / Job title (See Instructions) ralegal		Employer (See Instructions SettlePou Law Firm	5)		
	Date 01/02/2024	Full name of contributor out-of-state PAC (ID Tolle, Andrew Contributor address; City; State; Zip Code Garland, TX 75041)		Amount of Contribution (\$)	\$16.00
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> S)		
	Date 01/09/2024	Full name of contributor out-of-state PAC (ID Vasquez, Vita Contributor address; City; State; Zip Code The Colony, TX 75056)		Amount of Contribution (\$)	\$25.00	
	Principal occu Self Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Vita Credit Queen	s)		
	. ,			<u>-</u>			

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S 	SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 17/17 Rpt: 20/40			
2	FILER NAME Neave Criad	o, Victoria (The Honorable)				3	Filer ID (Ethics Commission 00080065	on Filers)		
4	Date 01/06/2024	5 Full name of contributor Wendel, George6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00		
		Dallas, TX 75241								
8	Principal occu Physician	pation / Job title (See Instructions	s) !		Employer (See Instructions American Board of Obst		ics and Gynecology			
	Date 01/22/2024	Full name of contributor Wev, Elissa Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00		
	Principal occu	Dallas, TX 75208 pation / Job title (See Instructions	9		Employer (See Instructions	:) 				
	Attorney				Dallas County	')				
	Date 01/09/2024	Full name of contributor Wev, Elissa Contributor address; City; S)		Amount of Contribution (\$)	\$100.00				
		Dallas, TX 75208								
	Principal occu Attorney	pation / Job title (See Instructions	;) 		Employer (See Instructions Dallas County	5)				
	Date O1/08/2024 Full name of contributor Out-of-state PAC (ID#:_ Williams, Terrsa Contributor address; City; State; Zip Code The Colony, TX 75056						Amount of Contribution (\$)	\$500.00		
	Principal occu Self employe	pation / Job title (See Instructions ed	5)		Employer (See Instructions Vita credit queen LLC	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 01/18/2024 Wilt, Melora Contributor address; City; State; Zip Code Garland, TX 75041						Amount of Contribution (\$)	\$16.00		
	Principal occu Organizer	pation / Job title (See Instructions	(3)		Employer (See Instructions Self	5)				
			1							

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Sch Sch: 1/3 Rpt:							
2 FILER NAME Neave Criad	do, Victoria (The Honorable)		3 Filer ID (Ethic 00080065	s Commission Filers)						
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$							
5 Date 01/01/2024	 Full name of contributor out-of-state PAC (ID#:		contribution (\$) \$1,000.00	Campaign office space						
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Check if travel outside of Texas. Complete Schedule T S) 11 Employer (FOR NON-JUDICIAL) (See instructions)								
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)						
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (I	FOR JUDICIAL)						
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)									
Date 01/09/2024	Full name of contributor out-of-state PAC (ID#: Ben E Keith Company Texas PAC Contributor address; City; State; Zip Code		Amount of contribution (\$) \$335.25	In-kind contribution description Drink for campaign kickoff						
	Fort Worth, TX 76102		Check if travel o	outside of Texas. Complete Schedule T.						
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ir	nstructions)						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (I	FOR JUDICIAL)						
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)									
Date 01/25/2024	Full name of contributor			In-kind contribution description Snacks for campaign office						
	Dallas, TX 75218		_	lutside of Texas. Complete Schedule T.						
Principal occu Not Employ	upation / Job title (FOR NON-JUDICIAL) (See instructions) ed	Employer (FOR NON Not Employed	-JUDICIAL) (See ir	nstructions)						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (I	FOR JUDICIAL)						
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)									

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 2/3 Rpt: 22/40				
2 FILER NAME Neave Criad	do, Victoria (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080065				
4	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
5 Date 01/06/2024	7 Contributor address; City; State; Zip Code		8 Amount of contribution (\$) 9 In-kind contribution description \$75.00 Snacks for office				
10 Principal occu	Saginaw, TX 76179 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)					
Police	apation / 30b title (1 OK NON-30DICIAL)	11 Employer (FOR NON FWPD	-30DICIAL) (GGG managara)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 01/18/2024	Full name of contributor out-of-state PAC (ID#: Garcia, Linda Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$50.00 Food for campaign office				
	Garland, TX 75043		I I Check if travel outside of Texas. Complete Schedule T.				
Principal occu Educator	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Self	I-JUDICIAL) (See instructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 01/11/2024	Full name of contributor out-of-state PAC (ID#: Kastl, Krisi Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$250.00 Pens and office supplies				
	Dallas, TX 75204		Check if travel outside of Texas. Complete Schedule T.				
Principal occu Attorney	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON KASTL LAW PC	I-JUDICIAL) (See instructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 3/3 Rpt: 23/40					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Neave Criad	do, Victoria (The Honorable)		00080065					
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$					
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution					
01/09/2024	Martinez, Arturo		contribution (\$) description \$2,000.00 Music for campaign kickoff					
	7 Contributor address; City; State; Zip Code		ψ ₂ ,000.00 Hiviusic for campaigh κισκοπ					
	Dallag TV 75200							
10 Drive in all acco	Dallas, TX 75208	11 Francis von (FOR NON	Check if travel outside of Texas. Complete Schedule T.					
DJ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON Self	I-JUDICIAL) (See instructions)					
	principal accupation (EOP 1LIDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)					
12 Continuators	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)					
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
14 Contributor 3	employemaw iiiii (i ON 30016IAL)	13 Law IIIII of Contribute	or a spouse (ii arry) (i ort aobierne)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>						
	(a) (a) (b) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c							
Date	Full name of contributor		Amount of ! In-kind contribution					
01/09/2024	Full name of contributor out-of-state PAC (ID#: Mata, Eric		contribution (\$) description					
02,00,202	Contributor address; City; State; Zip Code		\$25.00 Multi purpose plug					
	Continuator address, City, State, 21p code		į į					
			į					
	Dallas, TX 75204		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)					
Recruiter		The Dallas Morning News						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description					
01/09/2024	Narvaez, Omar		\$100.00 Hand sanitizer					
	Contributor address; City; State; Zip Code							
	Dallas, TX 75212		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON						
Community		Lambda legal	, ,					
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
	· · · · · · · · · · · · · · · · · · ·		•					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1						

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 Cor	mmittee	Gift/Awards/Memorials Legal Services The Instruction G	·		ages.	/Contract Labor		Travel Out of I OTHER (enter	District a category not listed above)	
Ļ	T 5.	٦	EU E5		uiue expiaiiis	11044 10 001	iihie	te una ioiiii.	<u> </u>		/EU-1	->
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filer	S)
Ļ	Sch: 1/17 Rpt: 24/40	Ļ		do, Victoria (Th	e Honorable	=)				00080065	i 	
4	Date	5	Payee name									
	01/10/2024		7-ELEVEN									
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$50.00		1717 North	west Hwy								
				-								
			Garland, TX	75041								
8	PURPOSE	(a)		ee Categories listed at	the top of this sob	nedule)	(b)	Description				
	OF	` <i>`</i>	Travel In Di		uic tob oi tills scu	icuuie)	,	_ `	outsi	de of Texas. Co	emplete Schedule T.	
	EXPENDITURE							Check if Austin	, TX,	officeholder livi	ng expense	
								Fuel for camp	oaiç	gn voluntee	ers	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office	held	
L	expenditure to benefit C/OI	H										
	Date		Payee name									
	01/08/2024		7-Eleven									
	Amount (\$)	Г	Payee addre	ss; City;	State	; Zip Co	de					
	\$50.00		1717 North	west Hwy								
				-								
			Garland, T〉	75041								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Travel In Di					=			mplete Schedule T.	
										officeholder livi		
								Fuel for camp	วลเด	jii voluntee	ers	
_												
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offi	ceholder name	(Office sou	ght			Office	neid	
L		_										
	Date		Payee name									
L	01/09/2024	L	7-Eleven									
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$18.89		4840 Harry	Hines Blvd								
			Dallas, TX	75235								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Event Expe			·		ш			implete Schedule T.	
	LAFEINDITURE		•					Check if Austin				
								Ice for campa	aigr	n kickoff ev	rent	
	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office	held	
	expenditure to benefit C/OI	_										

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

	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: 2/17 Rpt: 25/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
	01/01/2024	Access Self Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	3241 S Buckner
		Dallas, TX 75227
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Storage unit rent
		Storage unit rem
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/21/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.91	366 Summer Street
	Ψ0.31	ood dammer direct
		Somerville, MA 02144
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Service fee
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/14/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.99	366 Summer Street
		Somerville, MA 02144
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Service fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	4
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/17 Rpt: 26/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
	01/21/2024	ActBlue Technical Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$259.77	366 Summer Street
		Somerville, MA 02144
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		Service fee
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	oxponantaro to zonom oro.	
	Date	Payee name
	01/14/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$171.52	366 Summer Street
		Somerville, MA 02144
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Service fee
		33.7760.100
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	01/07/2024	Payee name ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$235.08	366 Summer Street
		Somerville, MA 02144
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Service fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	•	

SCHEDULE F1

vertising Expense Event Expense Loan Repayment/Reimbu

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

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

Candidate/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: 4/17 Rpt: 27/40	Neave Criado, Victoria (The Honorable) 00080065
4 Date	5 Payee name
01/02/2024	Bank of America
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$29.08	P.O. Box 15284
	Wilmington, DE 19850
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Bank fees
	Dank loop
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Dete	T -
Date	Payee name
01/16/2024	Blue Scout Digital LLC
Amount (\$)	Payee address; City; State; Zip Code
\$3,350.00	2505 Royal Birkdale Dr
	Plano, TX 75025
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Digital communications consulting and texting list
	Digital confinitionications consulting and texting list
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
	-
Date	Payee name
01/02/2024	Campaign Verify
Amount (\$)	Payee address; City; State; Zip Code
\$95.00	PO Box 3554
	Washington, DC 20007
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Texting validation
2 1 2 2 3 3 4 5 7	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experience to belieff 6/6	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 5/17 Rpt: 28/40	Neave Criado, Victoria (The Honorable)	00080065
4	Date	5 Payee name	-
	01/07/2024	Chicken Express	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$56.35	2002 Eastgate Dr	
		Garland, TX 75041	
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.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Food for volunteers
_	0 1: 01:14 7 1		05.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/09/2024	Contreras Valet	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$433.00	3301 Hudnall ST	
		Dallas, TX 75235	
	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 Valet service for campaign kickoff
			valor con voor campaign menon
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	01/09/2024	EBTF Dancers	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	1318 Laurenwood Drive	
	Ψ230.00	1010 Eddicimood Bilve	
		Dallas, TX 75217	
	DUDDOCE		
	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
			Campaign kickoff Ballet Folklorico dancers
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/17 Rpt: 29/40 Neave Criado, Victoria (The Honorable) 00080065 4 Date Payee name 01/16/2024 FedEx Office Print & Ship Center 6 Amount (\$) Payee address; City; State; Zip Code \$113.66 18661 Lyndon B Johnson Fwy Ste 200 Mesquite, TX 75150 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense SD16 map Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/01/2024 Hooks Epstein Galleries Amount (\$) Payee address; City; State; Zip Code \$1,000.00 2631 Colquitt St Houston, TX 77098 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense State Rep. Senfronia Thompson commissioned portrait Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/22/2024 Italia Express Amount (\$) Payee address: City: State; Zip Code \$28.69 111 Continental Ave #300 Dallas, TX 75207 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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

Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F1:		Filer ID (Ethics Commission Filers)	
Sch: 7/17 Rpt: 30/40	Neave Criado, Victoria (The Honorable)	00080065	
4 Date	5 Payee name		
01/21/2024	Italia Express		
6 Amount (\$) \$22.19	7 Payee address; City; State; Zip Code 111 Continental Ave		
Φ22.19	#300		
	Dallas, TX 75207		
8 PURPOSE	<u> </u>		
OF		de of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX,	officeholder living expense	
	Meal		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
expenditure to benefit C/Ol		Silice field	
Date	Payee name		
01/21/2024	Italia Express		
Amount (\$)	Payee address; City; State; Zip Code		
\$73.07	111 Continental Ave		
	#300		
DUDDOGE	Dallas, TX 75207		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outsing	de of Texas. Complete Schedule T.	
EXPENDITURE	1 Journal Expense	officeholder living expense	
	Meal for campai	gn team	
Complete CNII V if direct			
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
		Office held	
expenditure to benefit C/OI Date	Payee name	Office held	
expenditure to benefit C/OI Date 01/02/2024	Payee name MAS Strategy Group LLC	Office held	
expenditure to benefit C/Ol Date 01/02/2024 Amount (\$)	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code	Office held	
expenditure to benefit C/OI Date 01/02/2024	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave.	Office held	
expenditure to benefit C/Ol Date 01/02/2024 Amount (\$)	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave. Apt. 231	Office held	
expenditure to benefit C/Ol Date 01/02/2024 Amount (\$) \$4,000.00	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave. Apt. 231 Dallas, TX 75204	Office held	
expenditure to benefit C/Ol Date 01/02/2024 Amount (\$)	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave. Apt. 231 Dallas, TX 75204 (a) Category (See Categories listed at the top of this schedule) (b) Description		
expenditure to benefit C/OI Date 01/02/2024 Amount (\$) \$4,000.00	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave. Apt. 231 Dallas, TX 75204 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outsi	Office held de of Texas. Complete Schedule T. officeholder living expense	
expenditure to benefit C/OI Date 01/02/2024 Amount (\$) \$4,000.00 PURPOSE OF	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave. Apt. 231 Dallas, TX 75204 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outsi	de of Texas. Complete Schedule T. officeholder living expense	
expenditure to benefit C/Ol Date 01/02/2024 Amount (\$) \$4,000.00 PURPOSE OF EXPENDITURE	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave. Apt. 231 Dallas, TX 75204 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outsing Check if Austin, TX, Finance Consult	de of Texas. Complete Schedule T. officeholder living expense ing	
expenditure to benefit C/OI Date 01/02/2024 Amount (\$) \$4,000.00 PURPOSE OF	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave. Apt. 231 Dallas, TX 75204 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sought	de of Texas. Complete Schedule T. officeholder living expense	
expenditure to benefit C/Ol Date 01/02/2024 Amount (\$) \$4,000.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name MAS Strategy Group LLC Payee address; City; State; Zip Code 3700 Cole Ave. Apt. 231 Dallas, TX 75204 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sought	de of Texas. Complete Schedule T. officeholder living expense ing	

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

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services	als Expense	Salaries/M		se s/Contract Labor		OTHER (enter a	a category not listed ab	ove)
	Credit Card Payment			The Instruction	Guide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 8/17 Rpt: 31/40		Neave Criac	do, Victoria (T	ne Honorable))				00080065		
4	Date	5	Payee name									
	01/10/2024			ıdience Prese	ntation, Inc							
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$3,673.00		2400 S. 4th	St								
			Austin, TX 7	8704								
8	PURPOSE	(2)					(h)	Description				
ľ	OF	(4)	Printing Exp	e Categories listed a	t the top of this sch	nedule)	(5)	_ :	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		rillulig Lxp	CIISC						officeholder livin	•	
								Campaign pu	ish	cards		
9	Complete ONLY if direct		Candidate/Offic	ceholder name	(Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/25/2024		Message Aı	ıdience Prese	ntation, Inc							
	Amount (\$)	H	Payee addres	ss; City;	State	; Zip Co	de					
	\$14,950.10		2400 S. 4th	St								
			Austin, TX 7	8704								
	PURPOSE	(a)					(h)	Description				
	OF	(")	Printing Exp	e Categories listed a	t the top of this sch	nedule)	()		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		T TITLLING EXP	CHSC				Check if Austin,	, TX,	officeholder livin	g expense	
								Campaign ma	aile	r		
	Complete ONLY if direct		Candidate/Offic	ceholder name	(Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/12/2024		Michaels									
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$17.30		5500 Green	ville Ave								
			Dallas, TX 7	5206								
	PURPOSE	(a)	Category (Se	e Categories listed a	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE			nead/Rental E		,			outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITORE							_		officeholder livin	g expense	
								Campaign off	fice	supplies		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	(Office sou	ght			Office h	eld	
	experience to beliefit 6/01											

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	ll 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: 9/17 Rpt: 32/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
	01/01/2024	NGP VAN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$341.12	1445 New York Ave NW
		Ste. 200
		Washington, DC 20005
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Database subscription
		Database subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/11/2024	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.98	1445 New York Ave NW
		Ste. 200
		Washington, DC 20005
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Database subscription
		Database subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/16/2024	Political Data Intelligence (PDI)
	Amount (\$)	Payee address; City; State; Zip Code
	\$292.50	3780 Kilroy Airport Way
		Suite 200 PMB #992
		Long Beach, CA 90806
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Call time software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	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: 10/17 Rpt: 33/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
	01/23/2024	Pollo Regio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$38.94	11322 Garland Rd
		Dallas, TX 75218
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 Meal for campaign team
		Medi for campaign team
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Davies same
		Payee name
	01/23/2024	Pollo Regio
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.94	11322 Garland Rd
		Dallas, TX 75218
	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
		Meal for campaign team
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	01/09/2024	QuickTrip
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.28	4451 N Galloway Ave
L		Mesquite, TX 75150
	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 Fuel for campaign volunteers
		ruei ioi campaigii voiunteeis
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/17 Rpt: 34/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
	01/20/2024	QuickTrip
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.66	4451 N Galloway Ave
		Mesquite, TX 75150
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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Fuel for campaign volunteers
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	01/22/2024	RaceTrac
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.10	2018 Northwest Hwy
		Garland, TX 75041
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Fuel for campaign canvassing
		a server campangur cama ag
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	01/09/2024	Sam's Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.93	2218 Greenville Ave
		Dallas, TX 75206
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Drinks for campaign kickoff event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 12/17 Rpt: 35/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
l	01/11/2024	Starbucks Coffee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.22	2135 Northwest Hwy
l		
l		Garland, TX 75041
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Food/Beverage Expense
l	EXPENDITORE	Check if Austin, TX, officeholder living expense
l		Coffee
Ļ	Complete ONII V if direct	Condidate (Office helder years Office accepts Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
⊨		
l	Date	Payee name
L	01/05/2024	Starbucks
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$25.00	501 W 15th St
l		
L		Austin, TX 78701
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Coffee for campaign team
l		
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/O	
F	Date	Payee name
l	01/02/2024	Target.com
\vdash	Amount (\$)	Payee address; City; State; Zip Code
l	\$100.00	1000 Nicollet Mall
l		
l		Minneapolis, MN 75150
┝	PURPOSE	To a second seco
l	OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		End of year gift for staff
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experientare to beliefft G/O	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/17 Rpt: 36/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
	01/02/2024	Target.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	1000 Nicollet Mall
		Minneapolis, MN 75150
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		End of year gift for staff
_	0 1: 01:14 7 1	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	01/02/2024	Target.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1000 Nicollet Mall
		Minneapolis, MN 75150
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense End of year gift for staff
		Zina or your girt for otall
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/02/2024	Target.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1000 Nicollet Mall
	Ψ00.00	1000 Modified Mail
		Minneapolis, MN 75150
	DUDDOOF	· ·
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		End of year gift for staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	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: 14/17 Rpt: 37/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
	01/22/2024	Tom Thumb
6	Amount (\$) \$28.39	7 Payee address; City; State; Zip Code 925 Northwest Hwy Garland, TX 75041
8	PURPOSE	
0	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 T. Check if Austin, TX, officeholder living expense Food for campaign office
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/12/2024	Two Cups Coffee & Cafe
	Amount (\$) \$12.51	Payee address; City; State; Zip Code 1925 Towne Centre Dr Suite 102 Mesquite, TX 75150
	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 T. Check if Austin, TX, officeholder living expense Coffee for campaign meeting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/05/2024	Uber One
	Amount (\$) \$9.00	Payee address; City; State; Zip Code 1455 Market St. #400 San Francisco, CA 94103
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ground transportation membership
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
_	Sch: 15/17 Rpt: 38/40	Neave Criado, Victoria (The Honorable) 00080065
4	Date	5 Payee name
	01/11/2024	WAL-MART
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$32.96	1801 Marketplace Dr
		Garland, TX 75041
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
		Food for campaign office
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experioration benefit C/O	1
	Date	Payee name
	01/12/2024	WAL-MART
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.72	1801 Marketplace Dr
		Garland, TX 75041
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE		Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Supplies for campaign office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name WAL-MART
	01/22/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$88.86	1801 Marketplace Dr
		Garland, TX 75041
	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 and drinks for campaign office
		1 ood and drinks for eampaight office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 16/17 Rpt: 39/40	Neave Criado, Victoria (The Honorable) 00080065						
4	Date	5 Payee name						
	01/19/2024	WAL-MART						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$39.73	1801 Marketplace Dr						
		Garland, TX 75041						
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 Food and drinks for campaign office						
		1 ood and drinks for campaign office						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH								
H	Date	Payee name						
	01/06/2024	WALMART.COM						
┝	Amount (\$)	Payee address; City; State; Zip Code						
	\$184.55	702 S.W. 8th St.						
	Ψ104.55	702 3.W. 0til 3t.						
		Bentonville, AK 72716						
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Food/Beverage Expense						
EXPENDITURE		Check if Austin, TX, officeholder living expense						
		Food for campaign office						
L								
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
L								
	Date	Payee name						
	01/22/2024	WALMART.COM						
	Amount (\$)	Payee address; City; State; Zip Code						
\$38.94 702 S.W. 8th St.								
		Bentonville, AK 72716						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Supplies for campaign office						
		Supplies for campaign office						
\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

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		mmittee	Legal Services	emorials Expense		Expens /Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		above)
1	Total pages Schedule F1: Sch: 17/17 Rpt: 40/40	2	FILER NAME Neave Criado, Victoria (The Honorable)							Filer ID 00080065	(Ethics Commission Filers)	
	Date 01/01/2024	5	Payee name Zoom						<u> </u>			
6	Amount (\$) \$17.05	7	Payee addre 55 Almade #400 San Jose,	n Blvd	r; Stá	ate; Zip C	ode					
8	PURPOSE OF EXPENDITURE	(a)			isted at the top of this tal Expense	schedule)	(b)	_	n, TX,	de of Texas. Com officeholder living subscription		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	ficeholder na	ame	Office so	ught			Office he	eld	