

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|   |   |   |                                  |   |  |
|---|---|---|----------------------------------|---|--|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                               |   | <b>1 Filer ID</b><br>(Ethics Commission Filers)<br>00067837 | <b>2 Total pages filed:</b><br>6 |   |  |
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>  | MS / MRS / MR<br>The Honorable  | FIRST<br>Ruben  | MI<br>MI                         | <b>OFFICE USE ONLY</b>                      |  |
|   | NICKNAME  | LAST<br>Cortez  | SUFFIX<br>Jr.                    |   | Date Received<br><b>ELECTRONICALLY FILED</b><br>02/05/2024 |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b><br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>1875 Los Angeles Ct.<br><br>Brownsville, TX 78521   |   | ZIP CODE                         | Date Hand-delivered or Date Postmarked      |  |
|   |   |   |                                  | Receipt #                                   |  |
|   |   |   |                                  | Amount                                      |  |
|   |   |   |                                  | Date Processed                              |  |
|   |   |   |                                  | Date Imaged                                 |  |
| <b>5 CAMPAIGN TREASURER NAME</b>  | MS / MRS / MR<br>Mr.  | FIRST<br>Ruben  | MI<br>MI                         |   |  |
|   | NICKNAME  | LAST<br>Cortez  | SUFFIX<br>Jr.                    |   |  |
| <b>6 CAMPAIGN TREASURER ADDRESS</b><br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE);<br>1875 Los Angeles Ct.<br><br>Brownsville, TX 78521   |   | APT / SUITE #;                   | CITY;                                       |  |
|   |   |   | STATE;                           | ZIP CODE                                    |  |
| <b>7 CAMPAIGN TREASURER PHONE</b>   | AREA CODE   | PHONE NUMBER  | EXTENSION                        |   |  |
|   | (956)   | 639-9171  |                                  |   |  |
| <b>8 REPORT TYPE</b>  | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |   |                                  |   |  |
|   | <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)                         |   |                                  |   |  |
| <b>9 PERIOD COVERED</b>   | Month   | Day   | Year                             | THROUGH                                     |  |
|   | 01/01/2024  |   |                                  | 01/25/2024                                  |  |
| <b>10 ELECTION</b>  | ELECTION DATE   |   | ELECTION TYPE                    |   |  |
|   | Month   | Day   | Year                             | <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> Runoff                            |
|   | 03/05/2024  |   |                                  | <input type="checkbox"/> General            | <input type="checkbox"/> Other                             |
| <b>11 OFFICE</b>  | OFFICE HELD (if any)  |   |                                  | OFFICE SOUGHT (if known)                    |  |
|   | None  |   |                                  | State Representative District 37            |  |

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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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|   |   |
|---|---|
| <b>13 C / OH NAME</b> Cortez Jr., Ruben (The Honorable) | <b>14 Filer ID</b> (Ethics Commission Filers)<br>00067837 |
|---|---|

|   |  |  |                                  |                          |                                   |  |  |   |  |  |
|---|--|--|----------------------------------|--------------------------|-----------------------------------|--|--|---|--|--|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input type="checkbox"/> Additional Pages   | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |  |                                  |                          |                                   |  |  |   |  |  |
| <table border="1" style="width:100%"> <tr> <td style="width:25%;"><b>COMMITTEE TYPE</b></td> <td><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td><b>COMMITTEE ADDRESS</b></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td><b>COMMITTEE CAMPAIGN TREASURER NAME</b></td> </tr> <tr> <td></td> <td><b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b></td> </tr> </table> | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b>                    | <input type="checkbox"/> GENERAL | <b>COMMITTEE ADDRESS</b> | <input type="checkbox"/> SPECIFIC | <b>COMMITTEE CAMPAIGN TREASURER NAME</b> |  | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b> |  |  |
|   | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b>                    |                                  |                          |                                   |  |  |   |  |  |
|   | <input type="checkbox"/> GENERAL   | <b>COMMITTEE ADDRESS</b>                 |                                  |                          |                                   |  |  |   |  |  |
|   | <input type="checkbox"/> SPECIFIC  | <b>COMMITTEE CAMPAIGN TREASURER NAME</b> |                                  |                          |                                   |  |  |   |  |  |
|   | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  |  |                                  |                          |                                   |  |  |   |  |  |

|                                |   |    |           |
|--------------------------------|---|----|-----------|
| <b>16 CONTRIBUTION TOTALS</b>  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00      |
|                                | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   | \$ | 300.00    |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ | 0.00      |
|                                | 4. <b>TOTAL POLITICAL EXPENDITURES</b>  | \$ | 106.00    |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 11,276.30 |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 0.00      |

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

\_\_\_\_\_  
 The Honorable Ruben Cortez Jr.  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_ Signature of officer administering     
 \_\_\_\_\_ Printed name of officer administering     
 \_\_\_\_\_ Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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|   |   |
|---|---|
| <b>18 FILER NAME</b><br>Cortez Jr., Ruben (The Honorable) | <b>19 Filer ID</b> (Ethics Commission Filers)<br>00067837 |
|---|---|

| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE  | SUBTOTAL AMOUNT |
|---|-----------------|
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                            | \$ 0.00         |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS              | \$ 300.00       |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS   | \$              |
| 4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS  | \$ 0.00         |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS         | \$ 106.00       |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  | \$              |
| 7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS        | \$ 0.00         |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                       | \$              |
| 9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                              | \$              |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$              |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$              |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$              |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|   |  |   |  |
|---|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>            |  | 1 Total pages Schedule A2:<br>Sch: 1/1 Rpt: 4/6                                 |  |
| 2 FILER NAME<br>Cortez Jr., Ruben (The Honorable)                           |  | 3 Filer ID (Ethics Commission Filers)<br>00067837                               |  |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |  | \$  |  |
| 5 Date<br>01/01/2024  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Offices of Robert Flores PC | 8 Amount of contribution (\$)<br>\$300.00                                       | 9 In-kind contribution description<br>office space |
|   | 7 Contributor address; City; State; Zip Code<br><br>Raymondville, TX 78580   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   |  | 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 contributor's spouse (if any) (FOR JUDICIAL)                     |  |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |  |   |  |

# LOANS

# SCHEDULE E

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 5/6  |
| <b>2</b> FILER NAME<br>Cortez Jr., Ruben (The Honorable)                   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00067837   |
| <b>4</b> TOTAL OF UNITEMIZED LOANS   |  | <b>\$</b> 0.00   |
| <b>5</b> Date of loan  | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | <b>9</b> Loan Amount (\$)  |
| <b>6</b> Is lender a financial institution?                                | <b>8</b> Lender address; City; State; Zip Code                                 | <b>10</b> Interest Rate  |
|  |  | <b>11</b> Maturity Date  |
| <b>12</b> Principal occupation / Job title (See Instructions)              |  | <b>13</b> Employer (See Instructions)  |
| <b>14</b> Description of Collateral<br><input type="checkbox"/> None       |  | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><input type="checkbox"/> not applicable | <b>17</b> Name of guarantor  | <b>19</b> Amount Guaranteed (\$)   |
|  | <b>18</b> Guarantor address; City; State; Zip Code                             |  |
| <b>20</b> Principal occupation   |  | <b>21</b> Employer (See Instructions)  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/1 Rpt: 6/6 | <b>2</b> FILER NAME<br>Cortez Jr., Ruben (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00067837 |
|--|--|--|

|                             |                                 |
|-----------------------------|---------------------------------|
| <b>4</b> Date<br>01/02/2024 | <b>5</b> Payee name<br>Facebook |
|-----------------------------|---------------------------------|

|                                  |  |
|----------------------------------|--|
| <b>6</b> Amount (\$)<br>\$100.00 | <b>7</b> Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo, CA 94025 |
|----------------------------------|--|

|                                 |  |  |
|---------------------------------|--|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ad |
|---------------------------------|--|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                                       |
|--------------------|---------------------------------------|
| Date<br>01/12/2024 | Payee name<br>Lone Star National Bank |
|--------------------|---------------------------------------|

|                       |  |
|-----------------------|--|
| Amount (\$)<br>\$6.00 | Payee address; City; State; Zip Code<br>PO Box 1127<br><br>Pharr, TX 78577 |
|-----------------------|--|

|                               |   |  |
|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fees |
|-------------------------------|---|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|