## STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT

## FORM SC C/OH COVER SHEET PG 1

The SC C/OH Instruction C	this form.	is form. Filer ID (Ethics Commission Filers) 00086324		2 Total pages filed: 6		
3 CANDIDATE NAME	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
	Mrs.	Sandragrace	<del>)</del>		Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	02/05/2024	
		Martinez				
					Date Hand-delivered	or Date Postmarked
4 CANDIDATE	ADDRESS / PO BOX; APT	/ SUITE #; C	CITY; STATE	; ZIP CODE		
ADDRESS	115 Encino Grande				Receipt #	Amount
Change of Address	San Antonio, TX 78232				Date Processed	
					Data Imagod	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			 MI	
TREASURER		Sonya				
NAME		,				
	NICKNAME	LAST			SUFFIX	
		De La Garza	a Walker			
6 CAMPAIGN	STREET ADDRESS (NO PC		)· APT/SUIT	TE #; CITY;	STATE;	ZIP CODE
TREASURER	346 Senova Dr.		), / ( 1 / 001		Share,	
ADDRESS						
(Residence or Business)	San Antonio, TX 78216					
7 CAMPAIGN	AREA CODE		NUMBER		EXTENSION	
TREASURER	(210) 663-9706	FIIONEI	NOWBER		EXTENSION	
PHONE	(210) 000 0700					
8 REPORT TYPE	January 15	X 30th da	y before conve	ntion / election	Runoff	
		_				
	July 15	8th day	before conven	tion / election	Final report	(Attach SC C/OH-FR)
9 PERIOD	Month Day V	ear			Month	Day Year
COVERED	Month Day Y 01/01/2024	eai	THR	OUGH	Month	Day Year 25/2024
	01/01/2024			00011	01/	23/2024
10 CONVENTION /	Month Day Y	ear	1	1 OFFICE		AIR
ELECTION DATE	03/05/2024			SOUGHT		
					X COUNTY C	
12 POLITICAL	Democrat			COUNTY (If Appl	icable)	
PARTY				Bexar		
GO TO PAGE 2						
Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.9000c47f						

#### STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT: SUPPORT & TOTALS

# FORM SC C/OH COVER SHEET PG 2

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13 CANDIDATE NAME Martinez, Sandragrace (Mrs.)			14 Filer ID 00086324	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)		olitical expenditures by political commit andidate's knowledge or consent. Cand penditures.		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURE	ER NAME	
		COMMITTEE CAMPAIGN TREASURE	ER ADDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (O ES OF LOANS, OR CONTRIBUTIONS		\$ 0.00
		AL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 250.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS	S OF THE LAST DAY OF THE	<b>\$</b> 100.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 0.00
17 AFFADAVIT	•			-
			nder penalty of perjury, that the act d includes all information required t tion Code.	
			Mrs. Sandragrace Martinez	
			Signature of Candidate	
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subscribed before me, by the said day				
of	, 20, to c	rtify which, witness my hand and seal o	of office.	
Signature of offi	cer administering oath	Printed name of officer administer	ing oath Title of office	r administering oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.9000c47

### SUBTOTALS - SC C/OH

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					0.010
18 CANDIDATE NAME19 Filer IDMartinez, Sandragrace (Mrs.)00086324					Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE					BTOTAL AMOUNT
1.	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$	0.00
2.	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$	0.00
3.	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	0.00
4.	4. X SCHEDULE E: LOANS			\$	0.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	0.00
6.	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$	0.00
7.	7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	0.00	
8.	8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
9.	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	250.00	
10.	10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$	
11.	11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

# **PLEDGED CONTRIBUTIONS** SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/6 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Martinez, Sandragrace (Mrs.) 00086324 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) ..... 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

LOANS		SCHEDUL	ΕE	
The Instruction Guide explains how to complete this form.	1	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/6		
2 FILER NAME Martinez, Sandragrace (Mrs.)		(Ethics Commission F	ilers)	
<sup>4</sup> TOTAL OF UNITEMIZED LOANS		\$	0.00	
5 Date of loan 7 Name of lender out-of-state PAC (ID#:	)	9 Loan Amount (\$)		
6     Is lender a financial institution?     8     Lender address;     City;     State;     Zip Code		<ul><li>10 Interest Rate</li><li>11 Maturity Date</li></ul>		
12 Principal occupation / Job title (See Instructions)       13 Employer (See Instructions)	5)			
14 Description of Collateral       15 Check if personal funds we         None	15 Check if personal funds were deposited into political account (See Instructions)			
16 GUARANTOR     17 Name of guarantor       INFORMATION		19 Amount Guarantee	ed (\$)	
not applicable <b>18</b> Guarantor address; City; State; Zip Code				
20 Principal occupation     21 Employer (See Instructions)	6)			

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX           Event Expense         Loan Repayment/R           Fees         Office Overhead/Re           Food/Beverage Expense         Polling Expense           y -         Gift/Awards/Memorials Expense           al Committee         Legal Services           Salaries/Wages/Co           The Instruction Guide explains how to complete	Reimbursement Solicitation/Fundraising Expense ental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District ontract Labor OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 1/1 Rpt: 6/6	2 FILER NAME Martinez, Sandragrace (Mrs.)	3 Filer ID (Ethics Commission Filers) 00086324		
4	Date 01/12/2024	5 Payee name Bexar County, Tx.	I		
6	Amount (\$) \$250.00 X Reimbursement from political contributions intended	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>100 Dolorosa</li> <li>#311</li> <li>San Antonio, TX 78205</li> </ul>			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)       (b) De         Event Expense       Venue	Check if travel outside of Texas. Complete Schedule T.		
9	Complete <u>ONLY</u> if direct of expenditure to benefit C/OH	Candidate/Officeholder name Off	fice sought Office held		