CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to co	mplete this form.	1 Filer ID (Ethics Commi 00087960		2 Total pages filed: 22	
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE USE O	NI Y
	Ms.	Rosa M.				
NAME					Date Received	
					ELECTRONICALLY F	ILED
	NICKNAME	LAST		SUFFIX	02/26/2024	
	Rosie	Cuellar				
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivered or Date Post	tmarked
OFFICEHOLDER	718 Rubio Rd.					
MAILING ADDRESS	PO Box 451801				Receipt # Amoun	t
Change of Address	Laredo, TX 78045					
	Laredo, 1X 78045				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Ms.	Aida J.				
NAME						
	NICKNAME	LAST		SUFFIX		
		Martinez		301117		
		Martinez				
6 CAMPAIGN			4.0	T / SUITE #; CITY;	STATE;	ZIP CODE
TREASURER	STREET ADDRESS (NC	PO BOX PLEASE),	AP	TTSUITE#, CITT,	STATE,	ZIP CODE
ADDRESS	418 Northstar					
(Residence or Business)						
	Laredo, TX 78045					
7 CAMPAIGN	AREA CODE P	HONE NUMBER	EXTENSION			
TREASURER		NOME NOMBER	EXTENSION			
PHONE	(956) 898-4031					
8 REPORT						
TYPE	January 15	30th day befor	re election	Runoff	15th day after campaign tr	easurer
					appointment (officeholder	
	July 15	X 8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH	-FR)
9 PERIOD	Month Day Ye	ear		Month Day	Year	
COVERED	01/26/2024	Т	HROUGH	02/24/2024	4	
10 ELECTION	ELECTION DAT			ELECTION TYPE		
		ear X	Primary	Runoff	Other	
	03/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
				State Representa		
GO TO PAGE 2						
Forms provided by Te	xas Ethics Commission	www.e	thics.state.tx.u	S	Version V3.	5.1.9000c47

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 22

13 C / OH NAME	Cuellar, Rosa M. (Ms	.)	14 Filer ID (I 00087960	Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without th I officeholders are required to report this information	he candidate's or office	holder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	S		
16 CONTRIBUTION TOTALS	OR GUARANTE	ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00	
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 58,713.10	
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 15.98	
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 29,662.64	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 12,578.48	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 25,000.00	
17 AFFIDAVIT					
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.			
		Ms. F	Rosa M. Cuellar		
		Signature of C	Candidate or Officehold	der	
AFFIX NO	TARY STAMP / SEAL ABO	DVE			
Sworn to and subso	cribed before me, by the s	aid	, this the	day	
		ertify which, witness my hand and seal of office.			
Signature of offic	-	Printed name of officer administering		administering oath	

SUBTOTALS - C/OH	CC	FORM C/OH OVER SHEET PG 3 3 of 22
18 FILER NAME Cuellar, Rosa M. (Ms.)	19 Filer ID 00087960	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 9,350.00
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 49,363.10
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 29,662.64
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	9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/2 Rpt: 4/22 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Cuellar, Rosa M. (Ms.) 00087960 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/20/2024 Killam Development \$5,000.00 6 Contributor address; City; State; Zip Code laredo, TX 78042 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/30/2024 PEG Enterprises \$2,500.00 Contributor address; City; State; Zip Code Laredo, TX 78045 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/01/2024 \$1,000.00 Palos Garza, Mario Contributor address; City; State; Zip Code Laredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions) Freight Forwarder Self-Employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/01/2024 \$150.00 Rodriguez, Hector Contributor address; City; State; Zip Code Laredo, TX 78045 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Self Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ 02/01/2024 \$200.00 Rodriguez De La Garza, Eliza Contributor address; City; State; Zip Code Laredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions) Logistics Crane WorldWide

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/22
2 FILER NAME Cuellar, Rosa M. (Ms.)	3 Filer ID (Ethics Commission Filers) 00087960
 4 Date 5 Full name of contributorout-of-state PAC (ID#:) Rodriguez De La Garza, Eliza 6 Contributor address; City; State; Zip Code Laredo, TX 78041 	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Logistic Crane WorldWide)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 1/4 Rpt: 6/22
2 FILER NAME Cuellar, Rosa M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087960	
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 02/19/2024	6 Full name of contributor out-of-state PAC (ID#:) 024 Killam Development 7 Contributor address; City; State; Zip Code		8 Amount of 9 In-kind contribution contribution (\$) description \$3,400.00 I Digital Ads
10 Principal occu	laredo, TX 78042 upation / 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 contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 01/29/2024			Amount of In-kind contribution contribution (\$) description \$750.00 I Consulting
Laredo, TX 78043 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-		-JUDICIAL) (See instructions)	
Fincipal occu		Employer (FOR NON	
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title		Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL) Law firm of contribut		or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 02/05/2024	/05/2024 Texans for Henry Cuellar Congressional Campaign Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$367.66 I Texts
Principal occu	Laredo, TX 78043 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule TJUDICIAL) (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 contribute		or's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 2/4 Rpt: 7/22	
2 FILER NAME Cuellar, Rosa M. (Ms.)			3 Filer ID (Ethics Commission Filers) 00087960	
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date 02/05/2024			8 Amount of 9 In-kind contribution contribution (\$) description \$22,027.56 Mailers	
10 Principal occu	Laredo, TX 78043 upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. I-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) (FOR JUDICIAL)	
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I		
Date 01/30/2024	Full name of contributor out-of-state PAC (ID#:) 024 Texans for Henry Cuellar Congressional Campaign Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$3,676.16 Mailers	
Laredo, TX 78043 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON		Check if travel outside of Texas. Complete Schedule T. JUDICIAL) (See instructions)		
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title		(FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)		or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/09/2024	Full name of contributor Image: Out-of-state PAC (ID#:) Texans for Henry Cuellar Congressional Campaign Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$2,537.07 I Push Cards	
	Laredo, TX 78043		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDIC			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 contribute		or's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 3/4 Rpt: 8/22
2 FILER NAME Cuellar, Rosa M. (Ms.)			3 Filer ID (Ethics Commission Filers) 00087960
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 02/15/2024			8 Amount of 9 In-kind contribution contribution (\$) description \$8,356.00 I Digital Ad
10 Principal occu	Laredo, TX 78043 upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule TJUDICIAL) (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	r's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 02/14/2024	Full name of contributor out-of-state PAC (ID#:) D24 Texans for Henry Cuellar Congressional Campaign Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$6,000.00 I Digital Ads
Laredo, TX 78043		Check if travel outside of Texas. Complete Schedule T.	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title		Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL) Law firm of contribut		r's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 02/05/2024	Full name of contributor		Amount of In-kind contribution contribution (\$) description \$376.00 Field Work
	Laredo, TX 78043		I Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-			-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 contributo		r's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

			-		
The Instruction Guide explains how to complete this form.			Total pages Schedule A2: Sch: 4/4 Rpt: 9/22		
2 FILER NAME		3	Filer ID (Ethics Commission Filers)		
Cuellar, Rosa M. (Ms.)			00087960		
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date	6 Full name of contributor out-of-state PAC (ID#:)		Amount of 9 In-kind contribution	
02/21/2024	Texans for Henry Cuellar Congressional Campa	ign		contribution (\$)¦ description \$568.00 I Field Work	
	7 Contributor address; City; State; Zip Code				
				1	
			Ι.	_	
	Laredo, TX 78043	i 		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	1-JU[DICIAL) (See instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOI	R JUDICIAL) (See instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's s	pouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of I In-kind contribution	
02/23/2024	Texans for Henry Cuellar Congressional Campa	ian		contribution (\$) description	
	Contributor address; City; State; Zip Code	.9	·	\$1,304.65 I Digital	
	Laredo, TX 78043		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	1-JU[DICIAL) (See instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	e (FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr By - Gift/Awards/Memorials Expense Printing Expense Tr					Travel in District Travel Out of Distric	pment & Related Expense	
1	Total pages Schedule F1:	2 FIL	ER NAME				3	Filer ID (E	Ethics Commission Filers)
	Sch: 1/13 Rpt: 10/22		ellar, Rosa M. (Ms.)					00087960	,
4	Date 02/13/2024		vee name Eleven						
6	Amount (\$) \$46.88	76	vee address; City; 15 McPherson Rd redo, TX 78041	State;	; Zip Coo	le			
8	PURPOSE OF EXPENDITURE	Tra	tegory (See Categories listed at the t ansportation Equipment & F pense		edule)			de of Texas. Complet officeholder living ex	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	C	Office soug	ht		Office held	
	Date	Pa	/ee name						
	02/20/2024	7/E	leven						
	Amount (\$) \$70.13	76	vee address; City; 15 McPherson Rd redo, TX 78041	State;	; Zip Coo	le			
	PURPOSE OF EXPENDITURE	Tra	tegory (See Categories listed at the t ansportation Equipment & F pense		edule)			de of Texas. Complet officeholder living ex	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	C	Office soug	ht		Office held	
	Date	Pa	/ee name						
	02/23/2024		leven						
	Amount (\$) \$69.90		vee address; City; 15 McPherson Rd	State;	; Zip Coo	le			
		La	redo, TX 78041						
	PURPOSE OF EXPENDITURE	Tra	egory (See Categories listed at the t ansportation Equipment & F pense	•	edule)			de of Texas. Complet officeholder living ex	
	Complete ONLY if direct expenditure to benefit C/OF		didate/Officeholder name	C	Office soug	ht		Office held	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPEN	DITURE CATEGOR	RIES FOR	BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loan Repayment/Reimursement Solicitation/Fun Fees Office Overhead/Rental Expense Transportation 1 Food/Beverage Expense Polling Expense Travel in Distric y - Gift/Awards/Memorials Expense Printing Expense Travel Out of Di				Travel in District Travel Out of Distric	ipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 2/13 Rpt: 11/22		Cuellar, Rosa M. (Ms.)				00087960	
4	Date	5	Payee name						
	02/23/2024		Atascosa Country Ra	dio					
6	Amount (\$)	7	Payee address; City	: State:	Zip Co	de			
	\$745.00	ľ	2170 Thousand Oaks						
				C C					
			San Antonio, TX 7823	2					
8	PURPOSE	(2)				(b) Decerintian			
0	OF	(a)	Category (See Categories li Advertising Expense	sted at the top of this sch	edule)	(b) Description	outsi	ide of Texas. Comple	te Schedule T.
	EXPENDITURE							, officeholder living ex	
						Radio			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder na	ime C	Office sou	ght		Office held	1
	Date		Payee name						
	02/12/2024		BIG's 301						
	Amount (\$)		Payee address; City	; State;	Zip Co	de			
	\$38.03		1162 FM468						
			Cotulla, TX 78014						
	PURPOSE OF	(a)	Category (See Categories li		edule)	(b) Description			
	EXPENDITURE		Transportation Equipr	nent & Related				ide of Texas. Comple , officeholder living ex	
			Expense			Gas	, 17,	, oncentrater inving ex	(pense
						Cuo			
	Complete ONLY if direct		Candidate/Officeholder na	ime C	Office sou	aht		Office held	1
	expenditure to benefit C/OI					9			
	Date		Payee name						
	02/12/2024		BIG's 301						
	Amount (\$)		Payee address; City	· State:	Zip Co	de			
	\$17.04		1162 FM468	, State,	Zip Cu	ue			
	φ17.04		1102 FIVI400						
			Cotulla, TX 78014						
	PURPOSE	(a)	Category (See Categories li	sted at the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expen	ise				ide of Texas. Comple	
							, TX,	, officeholder living ex	kpense
						Breakfast			
		L			D.ff: -			<u> </u>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder na	ime C	Office sou	gnt		Office held	1

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Transportation Equi Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 3/13 Rpt: 12/22		Cuellar, Rosa M. (Ms.)					00087960		
4	Date	5	Payee name							
	02/23/2024		Chick-fil-a							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le				
	\$31.45		1916 Bob Bullock							
	Laredo, TX 78045									
8	PURPOSE	(a)				(b) Description				
	OF	(",	Category (See Categories listed at the top of Food/Beverage Expense	this sche	edule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE							, officeholder living expense		
						Food				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	С	Office sou	ht		Office held		
	Date		Payee name							
	01/29/2024		Danny's Restaurant							
Amount (\$) Payee address; City;				State;	Zip Co	le				
	\$36.69		7511 Mcpherson		•					
			Laredo, TX 78043							
	PURPOSE OF	(a)	Category (See Categories listed at the top of	this sche	edule)	(b) Description				
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
						Breakfast	i, i <i>x</i> ,	, oncertoider nonig expense		
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	iht		Office held		
expenditure to benefit C/O								0		
	Data	<u> </u>	D							
	Date 02/20/2024		Payee name							
			Danny's Restaurant			-				
	Amount (\$)		Payee address; City;	State;	Zip Co	le				
	\$38.70		7511 Mcpherson							
			Laredo, TX 78043							
	PURPOSE	(a)	Category (See Categories listed at the top of	this sche	edule)	(b) Description				
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.		
							ι, TΧ,	, officeholder living expense		
						Breakfast				
	0 1/ 0 1/ 1/ 1/									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	С	Office sou	Int		Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)												
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Trat Food/Beverage Expense Polling Expense Trat y - Gift/Awards/Memorials Expense Printing Expense Trat				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 4/13 Rpt: 13/22		Cuellar, Rosa M. (Ms.)					00087960				
4	Date	5	Payee name									
	02/15/2024		De Hoyos Signs									
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de						
	\$779.40		901 Clark Blvd Suite B									
			Laredo, TX 78040									
8	PURPOSE	(a)	Category (See Categories listed at the	top of this only	adula)	(b) Description						
-	OF		Advertising Expense	top of this sche	edule)		outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE		5 5 5 5			Check if Austin	, TX,	, officeholder living expense				
				Sigi				Signs				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	yht		Office held				
	Date		Payee name									
	02/16/2024		Dr. Ikes									
	Amount (\$)		Payee address; City;	State;	Zip Co	de						
	\$29.73		3710 Tx-20 Loop									
			Laredo, TX 78043									
	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Office Overhead/Rental Expe	ense				ide of Texas. Complete Schedule T.				
	-					Keys	, TX,	, officeholder living expense				
						iteys						
	Complete ONLY if direct		Candidate/Officeholder name		Office soug	nht		Office held				
	expenditure to benefit C/Oł					jiit						
	Date	I	Payee name									
	01/29/2024		El Herradero de Uvalde									
	Amount (\$)		Payee address; City;	Stato:	Zip Co	10						
	\$120.00		1408 N Getty ST	Siale,								
	φ120.00		1400 N Octy 31									
			Uvalde, TX 78801									
	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Description						
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T. , officeholder living expense				
						Lunch	, 17,					
						-						
-	Complete ONLY if direct	L(Candidate/Officeholder name	C	Office soug	aht		Office held				
	expenditure to benefit C/OF					•						
-												

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE C	ATEGOR	IES FOR	BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 5/13 Rpt: 14/22		Cuellar, Rosa M. (Ms.)					00087960		
4	Date 02/15/2024	5	Payee name Entravision							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	е				
	\$9,198.75		222 Bob Bullock Loop Laredo, TX 78043							
8	PURPOSE	(a)	Catagony in a sub-			b) Description				
Ū	OF		Category (See Categories listed at the top Advertising Expense	of this sche	dule)	Check if travel		ide of Texas. Complete Schedule T. , officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Ot	ffice sou	ht		Office held		
	Date		Payee name							
	02/12/2024		Evetts BBQ							
Amount (\$)			Payee address; City; State; Zip Code							
	\$59.19		301 E. Main St Uvalde, TX 78801							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Food/Beverage Expense	of this sche	dule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		candidate/Officeholder name	Ot	ffice souc	ht		Office held		
	Date		Payee name							
	02/06/2024		Figueroa, Frida							
	Amount (\$) \$225.00		Payee address; City; 2319 1/2 Rosario St	State;	Zip Coo	e				
			Laredo, TX 78043							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Salaries/Wages/Contract Labor		dule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht		Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Tran Food/Beverage Expense Polling Expense Trav y - Gift/Awards/Memorials Expense Printing Expense Trav				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 6/13 Rpt: 15/22		Cuellar, Rosa M. (Ms.)				00087960		
4	Date 02/05/2024	5	Payee name GO DADDY						
6	Amount (\$) \$10.13	7	Payee address; City; State; 2155 L. GoDaddy Way Tempe, AZ 85284	Zip Co	le				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed Advertising Expense			Category (See Categories listed at the top of this sche Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held		
	Date		Payee name						
	01/30/2024		Garza, Jesus						
	Amount (\$) \$500.00		Payee address; City; State; 709 E. Calton Rd Laredo, TX 78043	Zip Co	le				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Advertising Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name Office sought Office held						
	Date		Payee name						
	02/23/2024		Guerra Communications						
	Amount (\$) \$1,998.68		Payee address; City; State; 6402 N Barlette	Zip Co	le				
			Laredo, TX 78041						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Advertising Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C)ffice sou	ht		Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment									Travel in District Travel Out of Distric	ipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID (I	Ethics Commission Filers)		
	Sch: 7/13 Rpt: 16/22			Cuellar, Rosa M. (Ms.) 00087960								
4	Date 02/20/2024	5	Payee name HEB	•								
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	le					
	\$312.99		210 W Del Laredo, TX									
8	PURPOSE	(a)	Category (S	See Categories listed a	t the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense										
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	Date		Payee name	•								
02/20/2024 HEB												
Amount (\$) Payee address; City; State; Zip Code												
	\$43.04	43.04 210 W Del Mar Blvd Laredo, TX 78045										
PURPOSE OF EXPENDITURE									side of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H					ht	Office held				
	Date		Payee name)								
	01/29/2024		Highway O									
	Amount (\$)		Payee addre	ess; City;	State;	; Zip Co	le					
	\$36.26		265 Saint L	ouis Ave								
			Charlotte, T	FX 78011		i						
	PURPOSE OF			See Categories listed a		nedule)	(b) Description		de ef Teure Contra			
	EXPENDITURE		Transporta Expense	tion Equipment	& Related				de of Texas. Complet officeholder living ex			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Dffice sou	ht		Office held			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr By - Gift/Awards/Memorials Expense Printing Expense Tr					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FIL	ER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 8/13 Rpt: 17/22		Cuellar, Rosa M. (Ms.) 00087960								
4	Date 02/01/2024		vee name apenos								
6	Amount (\$)	7 Pa	vee address; City;	State;	; Zip Coo	le					
	\$216.00		3502 Clark Suite 103 Laredo, TX 78043								
8	PURPOSE OF EXPENDITURE	OF Food/Beverage Expense							e of Texas. Complete Schedule T. Ifficeholder living expense		
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									eld		
	Date	Pa	vee name								
	02/22/2024	KG	NS								
Amount (\$) Payee address; City; State; Zip Code											
	\$10,489.00		2 Bob Bullock Loop redo, TX 78041								
	PURPOSE OF EXPENDITURE						tion < if travel outside of Texas. Complete Schedule T. < if Austin, TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Office soug	ht		Office he	eld		
	Date	Pa	vee name								
	01/29/2024		T Classified								
	Amount (\$) Payee address; City; State; Zip Code \$500.00 McPherson Rd Suite 203A										
		La	redo, TX 78041								
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the vertising Expense	top of this sch	edule)		ı, ТХ,	de of Texas. Com officeholder living			
	Complete ONLY if direct expenditure to benefit C/O		lidate/Officeholder name	C	Dffice soug	ht		Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Fees Office Overhead/Rental Expense Till Food/Beverage Expense Polling Expense Till Gift/Awards/Memorials Expense Printing Expense Till						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)	
	Sch: 9/13 Rpt: 18/22		Cuellar, Ros	a M. (Ms.)						00087960			
4	Date	5	Payee name										
	02/16/2024		LMT Classifi	ed									
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de						
	\$500.00		McPherson	Rd Suite 203A	Ą								
			Laredo, TX	78041									
8	PURPOSE	(a)	Category (Se	e Categories listed a	t the top of this sch	edule)	(b)	Description					
	OF	ľ	Advertising I			culley	Ì		outsid	de of Texas. Com	plete Schedule T.		
	EXPENDITURE		5	·			ĺ	Check if Austin,	, TX,	officeholder living	j expense		
								Ads					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	С	Office sou	ght			Office he	eld		
	Date		Payee name										
	02/01/2024		La Muzika S	tudios									
	Amount (\$)	\vdash	Payee addres	s; City;	State:	Zip Co	de						
	\$300.00 1812 Commerce Dr												
	\$000.00		1012 00000										
			Laredo, TX	78041									
	PURPOSE OF	(a)	Category (Se	e Categories listed a	t the top of this sch	edule)	(b)	Description					
	EXPENDITURE		Advertising I	Expense						de of Texas. Com officeholder living	plete Schedule T.		
								Voiceover	, 1,,				
								VOICEOVEI					
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	aht			Office he	ald		
	expenditure to benefit C/Oł		Sundiducionic				gin			Office In			
	Data	_											
	Date		Payee name										
	02/05/2024		McDonalds										
	Amount (\$)		Payee addres		State;	Zip Co	de						
	\$24.00		102 W Del N	lar									
			Laredo, TX	78045									
	PURPOSE	(a)	Category (Se	e Categories listed a	t the top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Food/Bevera	age Expense							plete Schedule T.		
									, TX,	officeholder living	J expense		
								Breakfast					
	-												
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	ght			Office he	eld		
	onponantire to benefit 0/01	•											

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)								
-	Sch: 10/13 Rpt: 19/22	Cuellar, Rosa M. (Ms.)	00087960								
4	Date 02/12/2024	Payee name McDonalds									
6	Amount (\$) \$12.33	7 Payee address; City; State; Zip Code 3 102 W Del Mar Laredo, TX 78045									
8	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 Breakfast 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	02/15/2024	Mundo Publications									
	Amount (\$)Payee address;City;State;Zip Code\$1,000.001001 Market										
		Laredo, TX 78040									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	02/02/2024	NGP VAN INC MOTO									
	Amount (\$) \$800.00	Payee address;City;State; Zip Code655 15th Street Suit650									
		Washington, DC 20005									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense T Gift/Awards/Memorials Expense Printing Expense T					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
				uide explains	how to cor	nplete this form.	_				
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 11/13 Rpt: 20/22		Cuellar, Rosa M. (Ms.)					00087960			
4	Date	5 F	Payee name								
	02/05/2024	F	Peak Point								
6	Amount (\$)	7 F	Payee address; City;	State;	; Zip Co	le					
	\$93.90	g	9110 Tx-16								
			Poteet, TX 78065								
_						(L)					
8	PURPOSE OF		Category (See Categories listed at		edule)	(b) Description	outei	de of Texas. Compl	ate Schedule T		
	EXPENDITURE		Fransportation Equipment	& Related				officeholder living e			
		-				Gas					
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ıht		Office hel	d		
	Date	F	Payee name								
	02/20/2024	5	Sam's Club								
Amount (\$) Payee address; City; State; Zip Code											
\$67.90 4810 San Bernardo											
		L	aredo, TX 78041								
	PURPOSE OF	(a) (Category (See Categories listed at	the top of this sch	edule)	(b) Description					
	EXPENDITURE	F	-ood/Beverage Expense					de of Texas. Compl officeholder living e			
					Food	, 17,	onicentitider inning e	skpense			
	Complete ONLY if direct		andidate/Officeholder name		Office sou	uht		Office hel	d		
	expenditure to benefit C/OF					jiit		onice ner	u		
	Date		Payee name								
	02/23/2024		Sam's Club								
	Amount (\$)		Payee address; City;	State;	; Zip Co	le					
	\$171.43	4	1810 San Bernardo								
		L	aredo, TX 78041								
	PURPOSE	(a) (Category (See Categories listed at	the top of this sch	iedule)	(b) Description					
	OF EXPENDITURE	F	Food/Beverage Expense					de of Texas. Compl			
							ι, TΧ,	officeholder living e	expense		
						food					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	Jht		Office hel	d		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tr. Food/Beverage Expense Polling Expense Tr. By - Gift/Awards/Memorials Expense Printing Expense Tr.						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 12/13 Rpt: 21/22		Cuellar, Rosa M. (Ms.) 00087960							
4	Date	5	Payee name							
	01/29/2024		Stripes							
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode					
	\$77.43		2525 US-83							
			Carrizo Springs, TX 78834							
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Transportation Equipment & Related					de of Texas. Comp		
			Expense			Gas	, IX,	officeholder living	expense	
						Gas				
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l Jght			Office he	ld	
	expenditure to benefit C/OI				5					
	Date		Payee name							
	02/05/2024	Taco Jalisco								
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode					
	\$42.68		488 Hindes Ave	-, _, _,						
			Charlotte, TX 78011							
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Comp		
							, IX,	officeholder living	expense	
						Lunch				
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l Jght			Office he	ld	
	expenditure to benefit C/OI	Н			0					
	Date		Payee name							
	02/12/2024		Universal Media Connections							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode					
	\$800.00		725 Main st Suite c							
			Eagle Pass, TX 78852							
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Advertising Expense	,		Check if travel	outsi	de of Texas. Comp	blete Schedule T.	
	EXPENDITORE						, TX,	officeholder living	expense	
						Radio				
	Complete ONIL V if direct	Ļ	andidate/Officeholder name	Office act				Office he	Id	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ignt			Onice he	iu	

			EXPENDITU	RE CATEGOF	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Legal Services	nse Is Expense	Loan Repay Office Overh Polling Expe Printing Exp Salaries/Wa	ment/Reimbursement ead/Rental Expense nse ense ges/Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	ent & Related Expense
	-		The Instruction C	Guide explains l	how to com	plete this form.	-	
1	Total pages Schedule F1:	2 FILEI	R NAME				3 Filer ID (Ethi	ics Commission Filers)
	Sch: 13/13 Rpt: 22/22	Cuel	lar, Rosa M. (Ms.)				00087960	
1	Date	5 Paye	0 00000					
1	02/16/2024							
	02/10/2024		b County Elections					
6	Amount (\$)	7 Paye	e address; City;	State;	Zip Cod	е		
	\$145.00	1110	Washington					
		Laro	do, TX 78040					
8	PURPOSE	(a) Cate	OORY (See Categories listed at	the top of this sche	edule) (b) Description		
	OF EXPENDITURE	Polli	ng Expense				outside of Texas. Complete Se	
	_/						, TX, officeholder living expension	se
						Voter Lists		
9	Complete ONLY if direct		late/Officeholder name	C	Office soug	nt	Office held	
	expenditure to benefit C/OF	Н						