JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instructior	I Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00054938	,	2 Total pages	s filed: 20
3 CANDIDATE /	MS / MRS / MR	FIRST	1 2223.000	MI		
OFFICEHOLDER	Mr.	John L.				EUSE ONLY
NAME	1711.	JUHIT L.			Date Received	
					ELECTRONI	CALLY FILED
	NICKNAME	LAST		SUFFIX	02/26/2024	
	Roca	Shergold			1	
			5) (.	710 000-	Data Hand dalises	ed or Date Postmarked
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP	I/SUILE#; CI	ι Y ;	ZIP CODE	Date Hanu-delivere	or Date POSIMAIKED
MAILING	509 Morelos Ave.				L	
ADDRESS					Receipt #	Amount
Change of Address	Rancho Viejo, TX 78575				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Ms.	Maria C.				
NAME						
	NICKNAME	LAST			SUFFIX	
	Connie	Cruz				
		OTAL				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	Γ / SUITE #; CITY;	S	STATE; ZIP CODE
TREASURER	2717 N. Augusta Nationa	l Dr.				
ADDRESS						
(Residence or Business)						
	Harlingen, TX 78550					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER						
PHONE	(956) 454-2159					
8 REPORT						
TYPE	January 15	30th day befor	e election	Runoff		campaign treasurer
				L	appointment (officeholder only)
	July 15	X 8th day before	election	Exceeded modified	Final Report (/	Attach C/OH-FR)
	Ľ	_		reporting limit	-	
9 PERIOD	Month Day Year			Month Dav	Year	
9 PERIOD COVERED	-					
	01/26/2024	TI	HROUGH	02/24/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Drimon (Other	
	-	I X F	Primary	Runoff	Other	
	03/05/2024		General	Special		
				1		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	District Judge Place 445t	h Cameron		District Judge Di	strict 445	
				Ĭ		
		GO '	TO PAGE 2			
Forme provided by Ta	was Ethios Commission	1484841	thing state to	<u>_</u>	1/2	raion 1/2 = 1.0000-47
ronns provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	5	ve	ersion V3.5.1.9000c47

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 20

L

13 C / OH NAME	Shergold, John L. (M	r.)	14 Filer ID 00054938	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this informatio	the candidate's or offic	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS		I. IZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
		ICAL CONTRIBUTIONS		\$	20,950.00
		PLEDGES, LOANS, OR GUARANTEES OF LOAN ZED POLITICAL EXPENDITURES	IS)		
TOTALS				\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	22,181.50
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	1,767.86
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	11,021.81
17 AFFIDAVIT					
		l swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		Mr.	John L. Shergold		
		Signature o	f Candidate or Officeho	older	
AFFIX NC)TARY STAMP / SEAL AB	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of off	icer administering oath	Printed name of officer administering oath	Title of office	er administer	ing oath
Forms provided by Te	exas Ethics Commissior	www.ethics.state.tx.us		Version V	3.5.1.9000c47

FORM JC/OH SUBTOTALS - JC/OH **COVER SHEET PG 3** 3 of 20 18 FILER NAME 19 Filer ID (Ethics Commission Filers) Shergold, John L. (Mr.) 00054938 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) 1. \$ 20,950.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ З. 4. SCHEDULE E(J): LOANS (JUDICIAL) \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 21,201.50 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ Х SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 980.00 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 1/8 Rpt: 4/20
2 FILER NAME Shergold, Jo	hn L. (Mr.)	3 Filer ID (Ethics Commission Filers) 00054938	
4 Date 02/17/2024	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$200.00
	Brownsville, TX 78521		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	•
Retired		Retired	
10 Contributor's e Retired	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of Contribution (\$)
01/26/2024	Cornejo Lopez, Elia L.		\$500.00
	Contributor address; City; State; Zip Code		
Contributorio	Brownsville, TX 78520	Contributorio Job Title	
Attorney	Principal Occupation	Contributor's Job Title Attorney	
	employer/law firm	Law firm of contributor's s	pouse (if any)
	f Elia L. Cornejo Lopez		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of Contribution (\$)
02/03/2024	Cowen, Phillip T.		\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Attorney Attorney			
Contributor's employer/law firm Law firm of contributor's s		pouse (if any)	
Cowen Rodr	iguez		
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.eth	nics state tx us	Version V3 5 1 9000c47

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 2/8 Rpt: 5/20
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Shergold, Jo	hn L. (Mr.)		00054938
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/02/2024	Diez, Jaime Andres		\$200.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Self Employe	ed	Engnieer	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Self Employe	ed		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/16/2024	Flores, Maria T.	······································	\$100.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Administrato	r	Administrator	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Self Employe	ed		
If contributor is	s a child, law firm of parent(s) (if any)	1	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/06/2024	Green Holding & Real Estate Investments, L.P.		\$2,500.00
	Contributor address; City; State; Zip Code		
	Brownsville , TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 3/8 Rpt: 6/20
		3 Filer ID (Ethics Commission Filers)	
Shergold, Jo	hn L. (Mr.)		00054938
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/26/2024	Green, Jorge A.		\$2,500.00
	6 Contributor address; City; State; Zip Code		
0 Constributoria	Brownsville, TX 78521	Contributorio Joh Title	
Attorney	Principal Occupation	9 Contributor's Job Title Attorney	
10 Contributor's e	pmplovor/low firm	11 Law firm of contributor's sp	pource (if any)
	aw Firm, P.C.	II Law Infin of contributors sp	
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:,)	Amount of Contribution (\$)
02/02/2024	Guillen Lopez, Graciela)	\$800.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78526		
Contributor's F	I Principal Occupation	Contributor's Job Title	I
Retired		Retired	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Retired			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/13/2024	Haywood, John		\$100.00
	Contributor address; City; State; Zip Code		
	Port Isabel, TX 78578		
	Principal Occupation	Contributor's Job Title	
Attorney Attorney			
Contributor's employer/law firm		oouse (if any)	
	f John Haywood		
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.9000c471

The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/8 Rpt: 7/20
2 FILER NAME Shergold, John L. (Mr.)			3 Filer ID (Ethics Commission Filers) 00054938
4 Date 02/03/2024	D3/2024 Hemphill, Paul		7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Brownsville, TX 78520		
9 Contributor's [Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	emplover/law firm	11 Law firm of contributor's sp	house (if any)
Paul Hemphi			
-	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/29/2024	Hernandez, Jr., Carlos E.		\$500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Law Offices	of Jose G. Gonzalez		
If contributor is	s a child, law firm of parent(s) (if any)	-	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/19/2024	Imperial, M.D., Henry L.		\$200.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78523		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Medical Physician Medical Physician			
	employer/law firm	Law firm of contributor's sp	bouse (if any)
Dr. Henry Im	perial, MD		
If contributor is	s a child, law firm of parent(s) (if any)		
	hy Texas Ethics Commission www.ethic	es state ty us	Version V3 5 1 9000c471

The Instru	ction Guide explains how to complete this t	orm.	1 Total pages Schedule A(J)1: Sch: 5/8 Rpt: 8/20
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Shergold, John L. (Mr.)			00054938
4 Date			7 Amount of Contribution (\$)
4 Date 02/06/2024	5 Full name of contributor out-of-state PAC (ID#: Jorge Green, LLC)	\$2,500.00
02/00/2024			
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
	and the set form		
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor i	a a shild low firm of parant(a) (if any)		
	s a child, law firm of parent(s) (if any)		
Date	—)	Amount of Contribution (\$)
01/26/2024	Law Office of Jerry Murad		\$50.00
	Contributor address; City; State; Zip Code		
	Fort Worth, TX 79147	1	
Contributor's	Principal Occupation	Contributor's Job Title	
O a staile standa	and the set form	l finne af a suddhu daula an	
Contributors	employer/law firm	Law firm of contributor's sp	oouse (if any)
lf contributor i	a a shild low firm of parant(a) (if any)		
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/20/2024	Law Office of Tony Torres, PLLC		\$500.00
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's	Principal Occupation	Contributor's Job Title	
Contributor's	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor i	s a child, law firm of parent(s) (if any)		

The Instrue	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 6/8 Rpt: 9/20
2 FILER NAME Shergold, John L. (Mr.)			3 Filer ID (Ethics Commission Filers) 00054938
4 Date 01/31/2024	5 Full name of contributor		7 Amount of Contribution (\$)\$400.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
8 Contributor's F Retired	Principal Occupation	9 Contributor's Job Title Retired	
10 Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor 🔲 out-of-state PAC (ID)#:)	Amount of Contribution (\$)
02/06/2024			\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's s	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	1	
Date	Full name of contributor out-of-state PAC (IE)#:)	Amount of Contribution (\$)
02/12/2024	Shergold, John		\$3,000.00
	Contributor address; City; State; Zip Code		
	Rancho Viejo, TX 78575		
	Principal Occupation	Contributor's Job Title	
Attorney	employer/law firm	Attorney Law firm of contributor's s	nouse (if any)
Contributor's employer/law firm Law firm of contributor's s Hodge & Shergold LLP			
If contributor is	s a child, law firm of parent(s) (if any)	1	
Forms provided	hy Texas Ethics Commission www.eth	nics state tx us	Version V3 5 1 9000c471

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 7/8 Rpt: 10/20
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Shergold, Jo	hn L. (Mr.)		00054938
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/16/2024	Shergold, John		\$2,000.00
	6 Contributor address; City; State; Zip Code		
	Rancho Viejo, TX 78575		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Hodge & She			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/23/2024	Shergold, John		\$500.00
	Contributor address; City; State; Zip Code		
	Rancho Viejo, TX 78575		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Hodge & She	ergold LLP		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/23/2024	Shergold, John		\$3,000.00
	Contributor address; City; State; Zip Code		
	Rancho Viejo, TX 78575		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney Attorney			
Contributor's employer/law firm Law firm of contributor's s		oouse (if any)	
Hodge & She	ergold, LLP		
If contributor is	s a child, law firm of parent(s) (if any)	•	
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.9000c471

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 **1** Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 8/8 Rpt: 11/20 2 FILER NAME **3** Filer ID (Ethics Commission Filers) Shergold, John L. (Mr.) 00054938 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 01/26/2024 \$250.00 Tharpe, R. Bruce 6 Contributor address; City; State; Zip Code Olmito, TX 78575 Contributor's Principal Occupation 9 Contributor's Job Title 8 Attorney Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Bruce Tharpe Law Firm 12 If contributor is a child, law firm of parent(s) (if any)

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitl/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 1/7 Rpt: 12/20	Shergold, John L. (Mr.)	00054938				
4	Date 02/23/2024	Payee name AIM Media					
6	Amount (\$) \$980.00	Payee address; City; State; Zip Code 1906 E. Tyler Ave. Harlingen , TX 78550					
8	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Campaign AD				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/09/2024	American Headshots					
	Amount (\$) \$487.00	Payee address; City; State; Zip Code 1805 Ruben Torres Blvd., Suite A9 Brownsville, TX 78526					
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Photograph				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/27/2024	BETANCOURT, ABEL					
	Amount (\$) \$125.00	Payee address; City; State; Zip Code 1763 VILLANOVA AVENUE					
		BROWNSVILLE, TX 78520					
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense bor-Sign Placements				
	Complete ONLY 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	Inting/Banking Fees Office Overhead/Rental Expense Jiting Expense Food/Beverage Expense Polling Expense butions/ Donations Made By - nidiate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FILER	NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 2/7 Rpt: 13/20		old, John L. (Mr.)					00054938
4	Date 01/30/2024	Payee Diaz, I	name Bernardo					
6	Amount (\$) \$840.00	2312 \$	address; City; S. Tourist Dr. urg, TX 78539	State;	; Zip Coc	e		
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Signs & Push Cards 						, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Office soug	ht		Office held
	Date	Payee	name					
	02/05/2024	Diaz, I	Bernardo					
	Amount (\$) \$430.00	2312 \$	address; City; S. Tourist Dr. urg, TX 78539	State;	; Zip Coc	e		
	PURPOSE OF EXPENDITURE		ITY (See Categories listed at the t tising Expense	op of this sch	edule)		n, TX,	side of Texas. Complete Schedule T. 4. officeholder living expense Cards
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Office soug	ht		Office held
	Date	Payee	name					
	02/12/2024	Diaz, I	Bernardo					
	Amount (\$) \$4,179.00		address; City; S. Tourist Dr.	State;	; Zip Coc	e		
		Edinb	urg, TX 78539					
	PURPOSE OF EXPENDITURE		ντΥ (See Categories listed at the t tising Expense	op of this sch	edule)		n, TX,	side of Texas. Complete Schedule T. K, officeholder living expense Er
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Office soug	ht		Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						head/Rental Expense ense bense ages/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 3/7 Rpt: 14/20		Shergold, John L. (Mr.)					00054938	
4	Date	5	Payee name						
	02/12/2024		Diaz, Bernardo						
6	Amount (\$)	7	7 Payee address; City; State; Zip Code						
	\$4,179.00		2312 S. Tourist Dr.						
			Edinburg, TX 78539						
8	PURPOSE	(a)	Category (See Categories listed at	the top of this sch	odulo)	b) Description			
-	OF		Advertising Expense	the top of this sche	edule)		outsi	ide of Texas. Comp	lete Schedule T.
	EXPENDITURE		· · · · · · · · · · · · · · · · · · ·					, officeholder living	expense
						Campaign M	aile	er	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office he	ld
	Date		Payee name						
02/19/2024 Fiesta Graphics									
Amount (\$) Payee address; City; State; Zip Code									
	\$108.25 205 Paredes Line Rd.								
			Brownsville, TX 78521						
	PURPOSE	(a)	Category (See Categories listed at	the top of this sche	edule)	b) Description			
	OF Advertising Expense Check if travel outside of Texas. Complete Schedule T.								
	Check if Austin, 1X, officenoider living expense				expense				
						Wires for Ca	mpa	aign Signs	
								011	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	nt		Office he	IQ
		<u> </u>							
	Date		Payee name						
	02/19/2024		Fiesta Graphics						
	Amount (\$)		Payee address; City;	State;	Zip Coo	le			
	\$108.25		205 Paredes Line Rd.						
			Brownsville, TX 78521						
	PURPOSE	(a)	Category (See Categories listed at	the top of this sche	edule)	b) Description			
	OF EXPENDITURE		Advertising Expense					ide of Texas. Comp	
	EXPENDITORE							, officeholder living	expense
						Wires for Ca	mpa	aign Signs	
						-			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office he	ld
	onponditore 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	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)			
1	Total pages Schedule F1:	2 FIL	ER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 4/7 Rpt: 15/20		ergold, John L. (Mr.)					00054938
4	Date 02/01/2024		/ee name rcia, Ramon					
6	Amount (\$) \$1,000.00	 7 Payee address; City; State; Zip Code 214 E. Hurst Harlingen, TX 78550 						
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Office sou	ıht		Office held
	Date	Pa	vee name					
	02/01/2024	Ma	res, San Juanita					
	Amount (\$)	Pa	/ee address; City;	State	; Zip Co	le		
	\$1,000.00		529 W. Clark Rd. Feria, TX 78559					
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the laries/Wages/Contract Lab		nedule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	(Office sou	Jht		Office held
	Date	Pa	/ee name					
	02/01/2024		ntoya, Juan					
	Amount (\$) \$250.00		vee address; City; D1 Old Port Isabel Rd., #18		; Zip Co	le		
		Br	ownsville, TX 78521					
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the vertising Expense	top of this sch	iedule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense ertising
	Complete ONLY if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Dffice sou	ıht		Office held

	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:	2 FILER NAME	B Filer ID (Ethics Commission Filers)				
	Sch: 5/7 Rpt: 16/20	Shergold, John L. (Mr.)	00054938				
4	Date 02/02/2024	Payee name Pena, Irma					
6	Amount (\$) \$1,600.00	7 Payee address; City; State; Zip Code 10 2778 Pompeii St. Brownsville, TX 78521					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor-Blockwalk					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/09/2024 Pena, Irma						
	Amount (\$) \$1,280.00	Payee address; City; State; Zip Code 2778 Pompeii St.					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense -Blockwalk				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/16/2024	Pena, Irma					
	Amount (\$) \$1,120.00	Payee address;City;State;Zip Code2778 Pompeii St.					
		Brownsville, TX 78521					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense r-Phonebank				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 6/7 Rpt: 17/20	Shergold, John L. (Mr.)	00054938				
4	Date 02/23/2024	5 Payee name Pena, Irma					
6	Amount (\$) \$1,120.00	7 Payee address; City; State; Zip Code 00 2778 Pompeii St. Brownsville, TX 78521					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor-Phonebank					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
02/02/2024 Pena, Lisandro							
	Amount (\$) \$660.00	Payee address; City; State; Zip Code 2778 Pompeii St. Brownsville, TX 78521					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T. IX, officeholder living expense r-Signs				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/16/2024	Pena, Lisandro					
	Amount (\$) \$385.00	Payee address; City; State; Zip Code 2778 Pompeii St.					
		Brownsville, TX 78521					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. FX, officeholder living expense r-Signs				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Transportation E Travel in District Travel Out of Dis	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
-	Tatal pages Cabadula E1.						(Ethias Commission Filors)		
1	Total pages Schedule F1: Sch: 7/7 Rpt: 18/20		⊨ John L. (Mr.)			3 Filer ID00054938	(Ethics Commission Filers)		
1	Date	5 Payee name	2						
-	02/23/2024	Pena, Lisa							
6	Amount (\$) \$1,350.00	7 Payee addr 2778 Pom	peii St.	e; Zip Code					
		Brownsville	e, TX 78521						
8	PURPOSE OF EXPENDITURE		See Categories listed at the top of this s /ages/Contract Labor	chedule) (b)	Check if Austin,	nutside of Texas. Com TX, officeholder living Dr-Sign Placem	expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sought		Office he	eld		

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement verhead/Rental Expense Expense Expense /Wages/Contract Labor	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 G: Sch: 1/1 Rpt: 19/20	2 FILER NAME Shergold, John L. (Mr.)		3 Filer ID (Ethics Commission Filers) 00054938			
4	Date 02/16/2024	5 Payee name Valley Morning Star					
6	Amount (\$) \$980.00	 7 Payee address; City; State; Zip C 1906 E. Tyler Ave. 	Code				
	political contributions intended	Harlingen , TX 78550					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			

	OUTSTAN	IDING LOANS		SCHEDULE L		
	The Instruction	on Guide explains how to complete this form.	1	Total pages Schedule L: Sch: 1/1 Rpt: 20/20		
2	FILER NAME Shergold, John	L. (Mr.)	3	Filer ID (Ethics Commission Filers) 00054938		
	LENDER INFORMATION	 4 Name of lender Shergold, John 5 Lender address; City; State; Zip Code 				
	GUARANTOR INFORMATION	Rancho Viejo, TX 78575 6 Name of guarantor				
	X not applicable	7 Guarantor address; City; State; Zip Code				