### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction (	Guide explains how to con	nplete this form.	1 Filer ID (Ethics Commission 00068271	on Filers)	2 Total pages f	iled: 29
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	0==:0=	LIGE ONE Y
ľ	OFFICEHOLDER				IVII	OFFICE	USE ONLY
l	NAME	Mr.	Oscar L.			Date Received	
l						ELECTRONIC	ALLY FILED
l						07/01/2024	
l		NICKNAME	LAST		SUFFIX	07/01/2024	
l			Longoria		Jr.		
4	CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #· CIT	۸٠	ZIP CODE	Date Hand-delivered	or Date Postmarked
ľ	OFFICEHOLDER		11730HE#, CH	1,	ZII CODE		
	MAILING	P.O. Box 4224				Receipt #	Amount
l	ADDRESS					Rесеірі #	Amount
l	Change of Address	Mission, TX 78573					
l	Ш					Date Processed	
l							
l						Date Imaged	
l							
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
l	TREASURER	Mrs.	Jennifer R.				
l	NAME	IVII 3.	Jerminer IV.				
l							
l		NICKNAME	LAST		SUFFIX		
l			Longoria				
l							
6	CAMPAIGN	STREET ADDRESS (NO I	DO BOY DI EACE):	ADT /	SUITE#; CITY;	CT	ATE; ZIP CODE
ľ	TREASURER	·		APT/	3011E#, CITT,	31	ATE, ZIP CODE
l	ADDRESS	2028 E. Griffin Parkway	1				
l	(Decidence or Business)						
l	(Residence or Business)	Mission, TX 78573					
l							
l							
7	CAMPAIGN	AREA CODE PH	ONE NUMBER E	EXTENSION			
ľ	TREASURER		ONE NOMBER	ZAT ZINGIGIN			
l	PHONE	(956) 432-9819					
ᆫ							
8	REPORT	_	_			_	
l	TYPE	January 15	30th day before	election	unoff	15th day after ca appointment (off	ampaign treasurer
l		1.1.15	Oth day before			-	
l		X July 15	8th day before		exceeded modified	Final Report (Att	acn C/OH-FR)
L							
9	PERIOD	Month Day Yea	ır		Month Day	Year	
l	COVERED	01/01/2024	T⊦	IROUGH	06/30/202	4	
l							
10	ELECTION	ELECTION DATE	1		ELECTION TYPE		
ľ	LLLCTION	Month Day Yea	, l 🗀 🛚	rimary	Runoff	Other	
l		World Day 100	"   '	iiiiaiy	Italion	Other	
l				eneral	Special		
l					_		
11	OFFICE	OFFICE HELD (if any)	ı		12 OFFICE SOUGHT	(if known)	
┸	OFFICE		intrint OF	·			
l		State Representative D	ISTICT 35		State Representa	alive district 35	
Г		1		I I			
l							
			GO T	O PAGE 2			
ı							

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 29

13 C / OH NAME	Longoria Jr., Oscar L	(Mr.)	<b>14</b> Filer ID ( 00068271	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a dofficeholders are required to report this information	the 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	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	<b>\$</b> 63,710.50
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 35,752.48
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 259,666.95
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Mr. Os	scar L. Longoria Jr.	
			Candidate or Officehole	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subse	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

### SUBTOTALS - C/OH

### FORM C/OH COVER SHEET PG 3

					3 of 29
18 FILI	ER NAN	4E	19 Filer ID	(Eth	ics Commission Filers)
Lor	igoria .	Jr., Oscar L. (Mr.)	00068271		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	63,710.50
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS					35,752.48
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	_
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS					
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER					28.90

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/29	
2	FILER NAME Longoria Jr., Oscar L. (Mr.)		3	Filer ID (Ethics Commission Filers) 00068271		
4			7	Amount of Contribution (\$) \$960.50		
		Sommerville , MA 02144				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  05/01/2024 Ancira Strategies  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00		
	Principal occu	Austin , TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#:_ Border Health PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$10,000.00	
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/06/2024	Full name of contributor out-of-state PAC (ID#:_ Brentwood Public Affairs Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ Brentwood Public Affairs  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$) \$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 5/29		
2	FILER NAME Longoria Jr.,	Oscar L. (Mr.)		3	Filer ID (Ethics Commission 00068271	on Filers)	
4	Date   5 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00		
_	<u> </u>	Austin, TX 78767					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  01/05/2024 Choctaw Nations of Oklahoma  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00		
	Principal occu	Durant , OK 74702 pation / Job title (See Instructions)	Employer (See Instructions				
	Pilicipai occu	pation / Job title (See Instructions)	Employer (See Instructions	')			
	Date 01/19/2024	Full name of contributor X out-of-state PAC (ID#: COMCAST Corp. & NBC Universal PAC  Contributor address; City; State; Zip Code	000248716		Amount of Contribution (\$)	\$2,000.00	
	Principal occu	Philadelphia , PA 19103 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Date 03/13/2024	Full name of contributor X out-of-state PAC (ID#: CONTRIBUTION OF STATE OF	000354753		Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ Friends of Baylor Med  Contributor address; City; State; Zip Code  Houston, TX 77010			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 3/7 Rpt: 6/29	
2	P. FILER NAME  Longoria Jr., Oscar L. (Mr.)		3	Filer ID (Ethics Commission 00068271	on Filers)	
4			7	Amount of Contribution (\$)	\$2,500.00	
_		Austin, TX 78763				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date Full name of contributor out-of-state PAC (ID#:)  D5/01/2024 HCA Texas Good Government Fund  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
	Principal occu	Irving, TX 75039 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ Houston Retired Officers PAC Contributor address; City; State; Zip Code Houston, TX 77219	)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#: IBAT PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ K&L Gates LLP Contributor address; City; State; Zip Code  Dallas, TX 75201			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/29		
2	FILER NAME Longoria Jr., Oscar L. (Mr.)			3	Filer ID (Ethics Commission Fil 00068271	ers)	
4	Date  5 Full name of contributor x out-of-state PAC (ID#: C00225342 )  7 McGuire Woods PAC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	500.00		
0	Dringing oggu	Richmond, VA 23219 pation / Job title (See Instructions)	Employer (See Instructions				
0	Fillicipal occu	pation / Job title (See instructions)	e Employer (See instructions	,			
	Date Full name of contributor out-of-state PAC (ID#:) 01/24/2024 NCHA's Texas Events PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$2,	500.00		
		Fort Worth, TX 76107					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 02/06/2024	Full name of contributor X out-of-state PAC (ID#: C NRG Energy PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$2,	00.00	
		Princeton, NJ 08540					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_PAC of the Independent Insurance Agents of Text  Contributor address; City; State; Zip Code  Austin, TX 78768			Amount of Contribution (\$)	500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ Philips Uresit Meachum Partners  Contributor address; City; State; Zip Code  Austin, TX 78711	)		Amount of Contribution (\$)	500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/29		
2	FILER NAME Longoria Jr.,	Oscar L. (Mr.)			3	Filer ID (Ethics Commissi 00068271	on Filers)
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  7 Resnick, Stewart  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00		
	Dringing! agg.	Los Angeles, CA 90064	lo.	Employer (See Instructions			
8	business ow	pation / Job title (See Instructions) ner		Employer (See Instructions self	)		
	Date Full name of contributor out-of-state PAC (ID#:)  05/01/2024 TSAPAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00		
	Dringing! goog	Austin, TX 78701		Employer (See Instructions			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 03/05/2024	Full name of contributor our Texas Consumer Lenders PAC Contributor address; City; State; Zip	t-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$1,500.00
		Dallas, TX 75201					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 05/01/2024	Full name of contributor our Texas Dairymen PAC Contributor address; City; State; Zip Austin, TX 78711	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 05/01/2024	Full name of contributor our Texas Land Title Association PA Contributor address; City; State; Zip Austin, TX 78703				Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 9/29	
2	FILER NAME Longoria Jr.,	Oscar L. (Mr.)			3	Filer ID (Ethics Commission 00068271	on Filers)
4	Date 05/01/2024  5 Full name of contributor out-of-state PAC (ID#:) Texas Oil and Gas Association  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00		
_	Dringing! goog	Austin, TX 78701	ام	Employer (Coo Instructions			
ð	Principal occu	pation / Job title (See Instructions)	a	Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  Texas Sands PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$4,000.00		
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/05/2024 Texas Surplus Lines Association/PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00		
		Austin, TX 78766					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78767				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 01/24/2024	Full name of contributor X out-of-state PAC (ID)  The Chickasaw Nation  Contributor address; City; State; Zip Code  Ada, OK 74820	 p#: <u>C90</u>	0007923		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		

	MONETA	ARY POLITICAL CONTRIBUTION		SCHEDU	LE A1	
	The Instruc	tion Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/7 Rpt: 10/29	
2	FILER NAME Longoria Jr., Oscar L. (Mr.)				Filer ID (Ethics Commissi 00068271	on Filers)
4	Date !	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,500.00
		Washington, DC 20005	O. Frankrija (O. a. katawati a			
8	Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	IS)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occup	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	ls)		
	Date 03/13/2024	Full name of contributor out-of-state PAC (ID#:_Zacopac  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occup	San Antonio , TX 78265 pation / Job title (See Instructions)	Employer (See Instructions	ıs)		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/18 Rpt: 11/29	Longoria Jr., Oscar L. (Mr.)
4	Date	5 Payee name
	06/20/2024	913 Sports
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	3221 N 38th St
		McAllen, TX 78501
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/24/2024	Act Blue
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	366 Summer St.
		Somerville, MA 02144
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Booth fee for Cameron County event
		Booth lee for Gameron Goding event
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
F	Date	Payee name
	02/09/2024	Castro, Celina
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1120 Palm Parkway
		Weslaco, TX 78596
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		donation
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages  The Instruction Guide explains how to complete	Se Travel Out of District 6/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/18 Rpt: 12/29	Longoria Jr., Oscar L. (Mr.)	00068271
4	Date	Payee name	
	02/06/2024	Deluxe Business System Business Products	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$204.47	3680 Victoria Street	
		Shoreview, MN 55126	
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense check fees
			CHECK ICCS
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	01/11/2024	Ebrom, Isaac	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$900.00	4106 N. Doolittle Rd.	
		Edinburg, TX 78542	
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense campaign work
			campagn work
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Ç.	
	Date	Payee name	
	06/20/2024	Ebrom, Isaac	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	4106 N. Doolittle Rd.	
		Edinburg, TX 78542	
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense campaign work
			oampagn won
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

#### SCHEDULE F1

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

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

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

	The Instruction Guide explains how to co	omplete this f	form.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 3/18 Rpt: 13/29	Longoria Jr., Oscar L. (Mr.)			00068271	
4 Date	5 Payee name		<u> </u>		
05/01/2024	Embassy Suites				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$340.00	300 S Congress Ave.				
	Austin, TX 78704				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descri	ption		
OF EXPENDITURE	Travel Out of District	I — ·	•	de of Texas. Com	plete Schedule T.
LAFENDITORE		. —		officeholder living	
		noteri	for perform	ing legislati	ve duties in Austin
O Commission ONLY if direct	Canadidate/Office had day name			Office by	-1.d
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	agnı		Office he	eiu
Date	Payee name				
05/29/2024	Embassy Suites				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$28.90	300 S Congress Ave.				
	Austin, TX 78704				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descri			
OF EXPENDITURE	Fees			de of Texas. Com officeholder living	plete Schedule T.
		. —			June 11, 2024)
			(		
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ught		Office he	eld
expenditure to benefit C/O		J			
Date	Payee name				
05/23/2024	Epic Sports				
Amount (\$)	Payee address; City; State; Zip Co	nde			
\$1,083.02	9750 East 53rd St N, Bel Aire	ouc			
<b>41,000.01</b>	0700 Zaot 0014 0t 14, 2017 iii 0				
	Bel Aire, KS 67226				
DUDDOCE		(b) 5 ·			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By	(b) Descri		de of Texas Com	plete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee			officeholder living	•
				t balls to Mis	ssion Veteran High
		School	ol camp		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office he	eld
expenditure to benefit C/O	Н				

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services	Polling Ex nse Printing E Salaries/V	xpense Expens Wages	se //Contract Labor		Travel in Distric		
L	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2 FILER NA					3	Filer ID	(Ethics Commission Filers	)
	Sch: 4/18 Rpt: 14/29	Longoria	a Jr., Oscar L. (Mr.)					00068271		
4	Date	5 Payee na	me				_			
	06/07/2024	Epic Spo								
6	Amount (\$)	<b>7</b> Payee ad	ldress; City;	State; Zip Co						
	\$204.27	1	ast 53rd St N, Bel Aire	p 0\						
	<del></del>		2012 2013, 2011 110							
		Bel Aire,	KS 67226							
8	PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Contribu	tions/Donations Made &	Ву		_			mplete Schedule T.	
		Candida	te/Officeholder/Political	Committee		Check if Austin		, officeholder livi needed for		
						additional Itel	د،،،	ucu IUI	Jones ourip	
_	Complete ONLY if allow-	Condidate	Officeholder name	O#icc	lapt			O#: '	aeld	
9	Complete ONLY if direct expenditure to benefit C/OF		Officeholder name	Office sou	uynt			Office I	ıcıu	
	Date	Payee na	me							
	05/28/2024	Flores, I	talia							
	Amount (\$)	Payee ad	ldress; City;	State; Zip Co	ode					
	\$1,000.00	415 N. Ir	nspiration Blvd.	•						
		Alton, T								
	PURPOSE OF		(See Categories listed at the top		(b)	Description				
	OF EXPENDITURE		tions/Donations Made I te/Officeholder/Political			<b>=</b>		ide of Texas. Co , officeholder livii	mplete Schedule T.	
		Candida	te/Onicenolaer/Political	Committee		donation for s			.g onpolioc	
_	Complete ONLY if direct	Candidate/	Officeholder name	Office sou	laht			Office h	neld	
	expenditure to benefit C/OF		sactor name	J.1100 300	ىى			J.110C 1	-	
_	Data									
	Date	Payee na								
	02/02/2024	Garcia, 2								
	Amount (\$)	Payee ad		State; Zip Co	ode					
	\$600.00	1201 Te	xas St.							
		La Feria	, TX 78559							
	PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Contribu	tions/Donations Made I	Ву		ш			mplete Schedule T.	
	EMPHORE	Candida	te/Officeholder/Political	Committee		_		, officeholder livi	ng expense	
						donation for b	Jas	enali team		
	0 1: -:		Off. 1 1:		<u> </u>					
	Complete ONLY if direct expenditure to benefit C/OH		Officeholder name	Office sou	ıght			Office h	neld	
		•								

#### SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/18 Rpt: 15/29	Longoria Jr., Oscar L. (Mr.)
4	Date	5 Payee name
	05/23/2024	Gateway Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,459.54	315 S Closner Blvd.
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
		Check if Austin, TX, officeholder living expense celebratory certificates for High School graduates
		colesiatory continuates for riight correct graduates
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/10/2024	Got Game
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	605 W. Ridge Dr.
		Edinburg, TX 78539
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		donation of T-shirts for Santa Rosa ISD summer
		camp
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/24/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$101.11	820 S Conway Ave.
		Mission, TX 78572
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense food for donation to Emily's Meals
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ry not listed above)
Ļ		· · · · · · · · · · · · · · · · · · ·	
1	Total pages Schedule F1:		cs Commission Filers)
_	Sch: 6/18 Rpt: 16/29	Longoria Jr., Oscar L. (Mr.) 00068271	
4	Date	5 Payee name	
L	05/06/2024	InstaCart	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$56.30	50 Beale St #600	
		San Francisco, CA 94016	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Si	chedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expen	se
		drinks for school field trip to the C	Capitol
L			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH	
	Date	Payee name	
	02/27/2024	Juan Diego Academy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	5208 South FM 494	
		Mission, TX 78572	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expendence control of the committee Check if Austin, TX, officeholder living expendence control of the committee control of the control of the committee control of the control o	se
		donation for event	
_	Complete ONLY if alice -t	Condidate/Officeholder name	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held  Office held	
L			
	Date	Payee name	
	04/19/2024	Lara, Javier	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	504 E. 11th St.	
		San Juan, TX 78516	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	Za Enditone	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expen	se
		donation	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
	•		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/18 Rpt: 17/29	Longoria Jr., Oscar L. (Mr.) 00068271
4	Date	5 Payee name
	01/29/2024	Lopez, Andres
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	911 W. 21st Apt#1405
		Austin, TX 78705
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Salary
		Salary
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/06/2024	Lopez, Andres
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	911 W. 21st Apt#1405
	•	· ·
		Austin, TX 78705
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/30/2024	Lopez, Andres
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	911 W. 21st Apt#1405
		Austin, TX 78705
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Salary
		Suita y
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

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

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

The Instruction Guide explains how to co	mplete	this form.		
2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Longoria Jr., Oscar L. (Mr.)			00068271	
5 Payee name		'		
MailChimp				
7 Payee address; City; State; Zip Co.	ode			
675 Ponce de Leon Ave. Suite 5000				
Atlanta, GA 30308				
(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> D	escription		
Office Overhead/Rental Expense		_ `	de of Texas. Com	plete Schedule T.
·		<b>⊣</b>	officeholder living	expense
	W	ebhosting		
	<u>                                     </u>		055	
	ight		Office he	eld
Payee name				
·				
	ode			
675 Ponce de Leon Ave. Suite 5000				
Atlanta, GA 30308				
(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> D	escription		
Office Overhead/Rental Expense	I⊑			
	L		onicendider living	expense
Candidate/Officeholder name Office sou	<u>I</u> ight		Office he	eld
	Ü			
Pavee name				
	nde			
l ayou address, Sky, Skats, Zip So.				
675 Ponce de Leon Ave. Suite 5000				
675 Ponce de Leon Ave. Suite 5000				
Atlanta, GA 30308				
Atlanta, GA 30308  (a) Category (See Categories listed at the top of this schedule)		escription 7 Check if travel outsi	de of Texas. Com	plete Schedule T.
Atlanta, GA 30308		escription   Check if travel outsi   Check if Austin, TX,		
Atlanta, GA 30308  (a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> D	Check if travel outsi		
Atlanta, GA 30308  (a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> D:	Check if travel outsing Check if Austin, TX,		
Atlanta, GA 30308  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office Sou	(b) Do	Check if travel outsing Check if Austin, TX,		expense
Atlanta, GA 30308  (a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense	(b) Do	Check if travel outsing Check if Austin, TX,	officeholder living	expense
Atlanta, GA 30308  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office Sou	(b) Do	Check if travel outsing Check if Austin, TX,	officeholder living	expense
	Longoria Jr., Oscar L. (Mr.)  5  Payee name   MailChimp  7  Payee address; City; State; Zip Co   675 Ponce de Leon Ave. Suite 5000  Atlanta, GA 30308  (a) Category (See Categories listed at the top of this schedule)   Office Overhead/Rental Expense  Candidate/Officeholder name	Longoria Jr., Oscar L. (Mr.)  5  Payee name   MailChimp  7  Payee address; City; State; Zip Code   675 Ponce de Leon Ave. Suite 5000  Atlanta, GA 30308  (a) Category (see Categories listed at the top of this schedule)   Office Overhead/Rental Expense  Candidate/Officeholder name   MailChimp  Payee name   MailChimp  Payee address; City; State; Zip Code   675 Ponce de Leon Ave. Suite 5000  Atlanta, GA 30308  (a) Category (see Categories listed at the top of this schedule)   Office Overhead/Rental Expense  Candidate/Officeholder name   Office sought  Payee name  Candidate/Officeholder name  Payee name	Longoria Jr., Oscar L. (Mr.)  5  Payee name     MailChimp  7  Payee address; City; State; Zip Code     675 Ponce de Leon Ave. Suite 5000  Atlanta, GA 30308  (a) Category (see Categories listed at the top of this schedule)     Office Overhead/Rental Expense  Candidate/Officeholder name     Office sought  Payee name     MailChimp  Payee address; City; State; Zip Code     675 Ponce de Leon Ave. Suite 5000  Atlanta, GA 30308  (a) Category (see Categories listed at the top of this schedule)     Office Overhead/Rental Expense  (b) Description     Check if ravel outsi     Check if ravel outsi     Check if ravel outsi     Check if valotin, TX, webhosting  Candidate/Officeholder name     Office sought  Payee name     MailChimp  Candidate/Officeholder name     Office sought	Longoria Jr., Oscar L. (Mr.)  5  Payee name       MailChimp  7  Payee address; City; State; Zip Code       675 Ponce de Leon Ave. Suite 5000  Atlanta, GA 30308  (a) Category (see Categories listed at the top of this schedule)       Office Overhead/Rental Expense    Candidate/Officeholder name  Office sought  Office he    Payee name   MailChimp  Payee address; City; State; Zip Code   675 Ponce de Leon Ave. Suite 5000  Atlanta, GA 30308  (a) Category (see Categories listed at the top of this schedule)   Office Overhead/Rental Expense    (b) Description   Check if ravel outside of Texas. Com   Check if Austin, TX, officeholder living   Webhosting    Check if varel outside of Texas. Com   Check if varel outside of Texas. Com   Check if varel outside of Texas. Com   Check if Austin, TX, officeholder living   Webhosting    Candidate/Officeholder name  Office sought  Office he   Payee name   MailChimp

#### SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	nter a category not listed above)
1	Total pages Schedule F1:		(Ethics Commission Filers)
	Sch: 9/18 Rpt: 19/29	Longoria Jr., Oscar L. (Mr.)	71
4	Date	5 Payee name	
	04/23/2024	MailChimp	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$33.05	675 Ponce de Leon Ave. Suite 5000	
		Atlanta, GA 30308	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	LXI LINDITORL	Check if Austin, TX, officeholder	living expense
		webhosting	
_	0 1 0 0 1 1 1 1		
9	Complete ONLY if direct expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·	ce held
_			
	Date	Payee name	
	05/23/2024	MailChimp	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.05	675 Ponce de Leon Ave. Suite 5000	
		Atlanta, GA 30308	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder  webhosting	living expense
		Webnesting	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	ce held
	expenditure to benefit C/O		io nota
	Date	Pausa vana	
	06/24/2024	Payee name MailChimp	
		·	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.05	675 Ponce de Leon Ave. Suite 5000	
		All All CA COCC	
		Atlanta, GA 30308	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	Occupate Calculate T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas.	
		webhosting	Timing expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	ce held
	expenditure to benefit C/O		
_			

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/18 Rpt: 20/29	Longoria Jr., Oscar L. (Mr.)
4	Date	5 Payee name
	02/06/2024	McAllen Fierce VB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	2420 Pebble Drive
		Mission, TX 78573
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		GO. Mailon.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
$\vdash$	Date	Payee name
	03/08/2024	Morales, Daniel
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	7605 W. Bus 83
		Mission, TX 78572
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  campaign work
		Campaign work
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 06/20/2024	Payee name
		Morales, Daniel
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	7605 W. Bus 83
		Mission, TX 78572
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		campaign work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

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

Fees Office Overhead/r
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/C

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/18 Rpt: 21/29	Longoria Jr., Oscar L. (Mr.)
4	Date	5 Payee name
	06/03/2024	Ninja Transfers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$166.68	2727 Commerce Way
		Philadelphia, PA 19154
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense labels for donated school camp items
		labels for donated serious early items
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/06/2024	OMS Custom Printing
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	201 Ebano Circle
		La Joya, TX 78560
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		domaion for oddio2 2moon might ochoor of mic
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	03/26/2024	Palmview High School
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	3901 N La Homa Rd.
		Palmview, TX 78574
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	_,, _,,,,,,	Candidate/Officeholder/Political Committee
		Donation for National Honor Society
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
ı		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 12/18 Rpt: 22/29	Longoria Jr., Oscar L. (Mr.)			
4	Date	5 Payee name			
	05/06/2024	RGV Designs			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$505.00	4300 W Expy 83			
		Palmview, TX 78574			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense			
		sponsorship of shirts for community walk			
Ļ	Commiste ONII V if disport	Condidate/Office holds			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	02/07/2024	Sam's Club			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$149.02	7601 N 10th St, McAllen			
		McAllen, TX 78501			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.			
		Candidate/Officeholder/Political Committee			
		donation of shacks to South Texas oil Scout Office			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
_	Date	Dove name			
	02/26/2024	Payee name Sanchez, Francisco			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$350.00	113 Sunset Boulevard			
		D TV 70707			
		Donna, TX 78537			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description			
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		campaign work			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
l					

#### SCHEDULE F1

Advertising Expense Event
Accounting/Banking Fees
Consulting Expense Food/it
Contributions/ Donations Made By Gift/Au
Candidate/Officeholder/Political Committee Legal

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

	Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/18 Rpt: 23/29	Longoria Jr., Oscar L. (Mr.)
4	Date	5 Payee name
	05/08/2024	Sanchez, Francisco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8,400.00	113 Sunset Boulevard
		Donna, TX 78537
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  salary supplement
		Sultry Supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	н
F	Date	Payee name
	04/23/2024	Star Gala
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	P.O. Box 1939
		Edinburg, TX 78540
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		donation for fundraiser
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	05/01/2024	Starbucks
H	Amount (\$)	Payee address; City; State; Zip Code
	\$38.37	19140 Interstate 35 Frontage Rd
		Kyle, TX 78640
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Coffee for legislative staff
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
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#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1: Sch: 14/18 Rpt: 24/29	2 FILER NAME Longoria Jr., Oscar L. (Mr.)	3 Filer ID (Ethics Commission Filers) 00068271
4	Date 04/29/2024	5 Payee name Tex Best Travel	
6	Amount (\$) \$25.08	7 Payee address; City; State; Zip Code 100 S Nueces St. George West, TX 78022	
8	PURPOSE OF EXPENDITURE	-	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fuel for travel to Austin for legislative duties
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 04/30/2024	Payee name Tex Best Travel	
	Amount (\$) \$28.22	Payee address; City; State; Zip Code 100 S Nueces St.  George West, TX 78022	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for travel from Austin from performing legislative duties
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 01/08/2024	Payee name Texas Citrus Fiesta	
	Amount (\$) \$400.00	Payee address; City; State; Zip Code 220 E. 9th St.	
		Mission, TX 78572	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ad in program book
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mei

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
Ļ	<b>T 5.</b>					
1	Total pages Schedule F1:					
	Sch: 15/18 Rpt: 25/29	Longoria Jr., Oscar L. (Mr.) 00068271				
4	Date	5 Payee name				
	02/16/2024	The Griffin Grill				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$71.47	906 E Griffin Pkwy				
		Mission, TX 78572				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Food/Beverage Expense				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		lunch for constituents				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/Oi	1				
	Date	Payee name				
	05/03/2024	Tiff's Treats				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$115.50	1806 Nueces St.				
		Austin, TX 78701				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense				
		cookies for school field trip to the Capitol				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold				
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
	Data					
	Date 05/09/2024	Payee name				
	05/08/2024	Veterans Memorial High School				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$300.00	700 E. Mile 2 Rd.				
		Mission, TX 78574				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Contributions/Donations Made By				
		Candidate/Officeholder/Political Committee				
		Cheerleading Sponsorship				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions: Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)					
Ļ					ilue explains not	w to con	пріс	te tilis lottii.	_			\
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)
	Sch: 16/18 Rpt: 26/29		Longoria Jr.	, Oscar L. (Mr.)						00068271		
4	Date	5	Payee name									
	02/07/2024		Wal-Mart									
6	Amount (\$)	7	Payee addres	ss; City;	State; 2	7in Cor	40					
١	Amount (\$)	ľ	•	•	State, 2	zip Cot	ue					
	\$53.91		2410 E Exp	ressway 83								
			Mission, TX	78572-7425								
8	PURPOSE	(a)	Category (Se	e Categories listed at the	ne ton of this schedu	ıle)	(b)	Description				
	OF	<u> </u> `	a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By				Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE				Check if Austin,	, TX, officeholder living expense						
								donation to H	ida	lgo County	community service	e
								agency				
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Offic	ce souc	tht			Office h	eld	
ľ	expenditure to benefit C/O						,			200 1		
-		_										
	Date		Payee name									
	03/13/2024		Wal-Mart									
	Amount (\$)		Payee address	ss; City;	State; Z	Zip Cod	de					
	\$200.00		2410 E Exp	ressway 83								
			Mission TX	78572-7425								
_	DUDDOCE	(0)					(h)	<b>.</b>				
	PURPOSE OF	(a)		e Categories listed at th		ıle)	(D)	Description	outoi	do of Toyon Cor	nplete Schedule T.	
EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee					<b>=</b>		officeholder livin			
			Candidate/Officeriolder/1 official Committee				\$200 dollar gift Card for Precinct 4 Cameron County					
								Easter Event		Juliu 101 1 10		- C - C - C - C - C - C - C - C - C - C
_	Complete ONLY if direct	Ц,	Candidato/Offi	soholder name	Offic	ico collo	thr			Office h	old	
Complete ONLY if direct Candidate/Officeholder name Office sou expenditure to benefit C/OH				ce soug	JIIL			Office i	leiu			
	·	_										
	Date		Payee name									
	03/26/2024		Weslaco Pri	de Football								
	Amount (\$)		Payee addres	ss; City;	State; 2	Zip Cod	de					
	\$296.50		PO Box 126	1								
			Modes T	/ 70E00								
			Weslaco, T	. 78599								
	PURPOSE OF	(a)		e Categories listed at th		ıle)	(b)	Description				
	EXPENDITURE			s/Donations Ma				ш			nplete Schedule T.	
			Candidate/C	Officeholder/Poli	ticai Committe	ee		donation for y		officeholder livin		
								donation for y	, ou	iii iootbaii t	cam	
	0 1. 0		0 11 1 1 =									
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	,											

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 17/18 Rpt: 27/29	Longoria Jr., Oscar L. (Mr.)	00068271
4	Date	5 Payee name	
	01/16/2024	WiredTree	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$102.87	53 W Jackson Blvd Ste 1734	
		Chicago II 60604	
Ļ	DUDDOCE	Chicago, IL 60604	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		l v	webhosting for website
Ļ	Operation ONLY if dispose	Out distant Office had a second	Office hold
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
_	Data	David and a	
	Date 02/15/2024	Payee name WiredTree	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$102.87	53 W Jackson Blvd Ste 1734	
		Chicago, IL 60604	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Webhosting for website
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	
	Date	Payee name	
	03/18/2024	WiredTree	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$102.87	53 W Jackson Blvd Ste 1734	
		Chicago, IL 60604	
	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
		V	webhosting for website
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
_			

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 18/18 Rpt: 28/29	Longoria Jr., Oscar L. (Mr.)
4	Date	5 Payee name
	04/16/2024	WiredTree
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$106.07	53 W Jackson Blvd Ste 1734
		Chicago, IL 60604
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE		Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		webhosting for website
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/16/2024	WiredTree
	Amount (\$)	Payee address; City; State; Zip Code
	\$106.07	53 W Jackson Blvd Ste 1734
		Chicago, IL 60604
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  webhosting for website
		webliosting for website
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/17/2024	Payee name WiredTree
	Amount (\$) \$106.07	Payee address; City; State; Zip Code 53 W Jackson Blvd Ste 1734
	\$100.07	33 W Jacksoff Bivd Ste 1734
		Chicago II COCOA
		Chicago, IL 60604
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		webhosting for website
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 29/29 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Longoria Jr., Oscar L. (Mr.) 00068271 5 Name of person from whom amount is received 8 Amount (\$) Date 06/11/2024 \$28.90 **Embassy Suites** 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78704 7 Purpose for which amount is received Check if political contribution returned to filer fee reimburse