# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Comm 00041097		2 Total pages	filed: 5	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICF	USE ONLY	
OFFICEHOLDER NAME	The Honorable	Eduardo R.			Date Received		
						CALLY FILED	
	NICKNAME	LAST		SUFFIX	06/10/2024		
	Eddie	Rodriguez					
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	ſY;	ZIP CODE	Date Hand-delivered	d or Date Postmarked	
OFFICEHOLDER	P.O. Box 2436						
MAILING ADDRESS					Receipt #	Amount	
Change of Address	Austin TV 70760						
	Austin, TX 78768				Date Processed		
					Date Imaged		
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI			
NAME	Mrs.	Gigi E.					
	NICKNAME	LAST		SUFFIX			
		Bryant					
6 CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE);	AP	T / SUITE #; CITY;	S	TATE; ZIP CODE	
TREASURER	11023 Pencewood Court						
ADDRESS							
(Residence or Business)	Austin TX 79750						
	Austin, TX 78750						
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION				
TREASURER	(512) 845-0326						
PHONE							
8 REPORT							
TYPE	X January 15	30th day before	e election	Runoff		campaign treasurer	
		_			_	officeholder only)	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	Attach C/OH-FR)	
9 PERIOD COVERED	Month Day Year			Month Day	Year		
COVERED	07/01/2023	11	HROUGH	12/31/2023	3		
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month Day Year		Primary	Runoff	X Other		
			General	Special	Late Filin	g for Semi-Annual	
				—	January 2	2024	
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)		
		tate Representative District 51 Travis State Representa				L	
	I						
		GO	TO PAGE 2				
Forms provided by Te	exas Ethics Commission	www.et	thics.state.tx.u	IS	Vers	sion V4.1.0.d378aba0	

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2 2 of 5

	_			2 of	5		
13 C / OH NAME	Rodriguez, Eduardo R. (The Honorable)14 Filer ID00041097			(Ethics Commission File	ers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.						
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASUR	RER ADDRESS				
16 CONTRIBUTION TOTALS	1. TOTAL UNITEM OR GUARANTE		0.00				
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEE	S OF LOANS)	\$ (	0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ (	0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$	0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ (	0.00		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ (	0.00		
17 AFFIDAVIT		I swear, or affirm, true and correct a under Title 15, Ele	under penalty of perjury, that the nd includes all information require ection Code.	accompanying report is d to be reported by me			
	The Honorable Eduardo R. Rodriguez						
			Signature of Candidate or Office	holder			
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subscribed before me, by the said day							
of, 20, to certify which, witness my hand and seal of office.							
Signature of offic	cer administering	Printed name of officer administ	ering Title of offi	cer administering oath	-		
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us	6	Version V4.1.0.d378	aba0		

#### FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 5 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Rodriguez, Eduardo R. (The Honorable) 00041097 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 0.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 0.00 \$ X SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 0.00 З. 4. X SCHEDULE E: LOANS \$ 0.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 0.00 \$ X 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 0.00 \$ 7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS 0.00 \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 0.00 8. \$ X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 0.00 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

### **PLEDGED CONTRIBUTIONS** SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/5 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Rodriguez, Eduardo R. (The Honorable) 00041097 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES 6 Full name of pledgor In-kind description 5 Date out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) ..... 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

LOANS SCHEDULE E								
The Instruction Guide explains how to complete this form.	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5							
2 FILER NAME Rodriguez, Eduardo R. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00041097							
<sup>4</sup> TOTAL OF UNITEMIZED LOANS	\$ 0.00							
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:	) <b>9</b> Loan Amount (\$)							
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code	10 Interest Rate							
	11 Maturity Date							
<b>12</b> Principal occupation / Job title (See Instructions) <b>13</b> Employer (See	Instructions)							
14 Description of Collateral   15 Check if person     None	nal funds were deposited into political account (See Instructions)							
16 GUARANTOR 17 Name of guarantor INFORMATION	<b>19</b> Amount Guaranteed (\$)							
not applicable <b>18</b> Guarantor address; City; State; Zip Code								
20 Principal occupation 21 Employer (See	Instructions)							