

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086222	2 Total pages filed: 21	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Jonathan Dwayne	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2024
	NICKNAME	LAST Gracia	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 119 W. Van Buren Harlingen, TX 78550		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Sandra	MI MI	
	NICKNAME	LAST Colwell	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 207 W Saturn Ln South Padre Island, TX 78597			
7 CAMPAIGN TREASURER PHONE	AREA CODE (956)	PHONE NUMBER 459-6789	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 05/19/2024	THROUGH		Month Day Year 06/30/2024
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 37	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Gracia, Jonathan Dwayne (Mr.) **14 Filer ID** (Ethics Commission Filers)
00086222

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

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.

<input checked="" type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		Charter Schools Now PAC
	COMMITTEE ADDRESS	3005 S Lamar Blvd, Ste. D109 #250
		Austin, TX 78704
	COMMITTEE CAMPAIGN TREASURER NAME	Gore, Rex
	COMMITTEE CAMPAIGN TREASURER ADDRESS	1301 W. Oltorf St
		Austin, TX 78704

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 122,375.26
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,823.53
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 95,486.47
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 243,600.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Jonathan Dwayne Gracia

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Gracia, Jonathan Dwayne (Mr.)		19 Filer ID (Ethics Commission Filers) 00086222
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 104,985.24
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 17,390.02
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 11,823.53
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agnew, Virginia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$20.83
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Herring & Irwin L.L.P
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Shelley <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amatucci, James <hr/> Contributor address; City; State; Zip Code Nashua, NH 03062	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Field Sales		Employer (See Instructions) Water
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Sam <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Liaison Resources
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banman, Donald <hr/> Contributor address; City; State; Zip Code Pottsboro , TX 75076	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Law Office of Donald Banman

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/10 Rpt: 5/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartsch, Carol <hr/> 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$8.33
8 Principal occupation / Job title (See Instructions) Associate Professor		9 Employer (See Instructions) UTMB
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodsky, Nina <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Bookkeeper and Artist		Employer (See Instructions) Self
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronstein, Dale <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Wine Merchant		Employer (See Instructions)
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brosnihan, Kerry <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clinton, Scot <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Elton	7 Amount of Contribution (\$) \$8.33
	6 Contributor address; City; State; Zip Code Austin, TX 78745	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Los Santos, Christina	Amount of Contribution (\$) \$16.66
	Contributor address; City; State; Zip Code Austin, TX 78757	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fehr, Stefan	Amount of Contribution (\$) \$2.09
	Contributor address; City; State; Zip Code Austin , TX 78704	
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Austin Public Health
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Field, Megan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Austin, TX 78757	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortin, Renee'	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Riverside, CA 92506-9237	
Principal occupation / Job title (See Instructions) Associate Government Program Analyst		Employer (See Instructions) State California

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/10 Rpt: 7/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, JOSE <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78521	7 Amount of Contribution (\$) \$8,000.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) SELF EMPLOYED
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gober, Kenneth <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Lee Gober & Reyna
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Laura <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) South Texas College
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gracia, Jonathan <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Gracia Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/10 Rpt: 8/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gracia, Robert <hr/> 6 Contributor address; City; State; Zip Code Rancho Viejo, TX 78575	7 Amount of Contribution (\$) \$14,000.00
8 Principal occupation / Job title (See Instructions) Consulting		9 Employer (See Instructions) Self Employed
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregg, Aaron <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions)
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guenther, Nancy Fly <hr/> Contributor address; City; State; Zip Code Harlingen , TX 78552	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller, Jay <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Yoga Instructor		Employer (See Instructions) LASR
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$20.84
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/10 Rpt: 9/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keysor, Georgia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$8.33
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonagh, Kathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) Early Child Music Specialist		Employer (See Instructions) Armstrong Community Music School
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaelson, Hedrich <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Tiffany <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Solutions Engineer		Employer (See Instructions) Tiffany Newby
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/10 Rpt: 10/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, MARCELINO <hr/> 6 Contributor address; City; State; Zip Code San Benito, TX 78586	7 Amount of Contribution (\$) \$9,000.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SELF
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ Jr., JOSE <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$9,000.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF EMPLOYED
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Elizabeth <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$9,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pereyra, Carolyn <hr/> Contributor address; City; State; Zip Code Marlton, NJ 08053	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pereyra, Carolyn <hr/> Contributor address; City; State; Zip Code Marlton, NJ 08053	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/10 Rpt: 11/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Pamela D 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$4.17
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 06/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pumfrey, William Ross Contributor address; City; State; Zip Code Austin, TX 78736-3312	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Mauro Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Ramirez Law, PLLC
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Elaine Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Copyeditor		Employer (See Instructions) Self
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kathryn Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/10 Rpt: 12/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruffing, Patrick <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78245	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Donald <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Mollie <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-8140	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosa, Guadalupe <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/10 Rpt: 13/21
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Lynn	7 Amount of Contribution (\$) \$4.17
6 Contributor address; City; State; Zip Code Austin, TX 78723		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Travis County
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Denis	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) University of Texas at Austin
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Houston, TX 77027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Retired
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, M	Amount of Contribution (\$) \$4.16
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Ascension

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/21	
2 FILER NAME Gracia, Jonathan Dwayne (Mr.)		3 Filer ID (Ethics Commission Filers) 00086222	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/30/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cambio Texas	8 Amount of contribution (\$) \$1,907.86	9 In-kind contribution description Email Platform, Email List Acquisition & Text SMS
	7 Contributor address; City; State; Zip Code Edinburg, TX 78539	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Party	Amount of contribution (\$) \$15,482.16	In-kind contribution description Salaries, Payroll Taxes & Insurance Benefits
	Contributor address; City; State; Zip Code Austin, TX 78761	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/7 Rpt: 15/21	2 FILER NAME Gracia, Jonathan Dwayne (Mr.)	3 Filer ID (Ethics Commission Filers) 00086222
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4 Date 06/07/2024	5 Payee name All Valley Media LLC
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6 Amount (\$) \$4,283.51	7 Payee address; City; State; Zip Code 221 W. Wilson Ave. Harlingen, TX 78550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/28/2024	Payee name Allegra
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Amount (\$) \$337.65	Payee address; City; State; Zip Code 1801 S 77 Sunshine Strip #B6 Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door Hangers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/07/2024	Payee name Alvarado, Janie
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 745 S Adeline St Raymondville, TX 78580
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Worker
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/7 Rpt: 16/21	2 FILER NAME Gracia, Jonathan Dwayne (Mr.)	3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/07/2024	5 Payee name Bedertes, Rosa	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 514 Pera Ave Brownsville, TX 78520	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Worker
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2024	Payee name Dollar Tree	
Amount (\$) \$20.30	Payee address; City; State; Zip Code 2109 Lincoln Ave Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Party
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/31/2024	Payee name IBC Bank	
Amount (\$) \$45.57	Payee address; City; State; Zip Code 4520 E 14th St Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Analysis Charges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/7 Rpt: 17/21	2 FILER NAME Gracia, Jonathan Dwayne (Mr.)	3 Filer ID (Ethics Commission Filers) 00086222
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4 Date 06/30/2024	5 Payee name IBC Bank
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6 Amount (\$) \$26.15	7 Payee address; City; State; Zip Code 4520 E 14th St Brownsville, TX 78521
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Analysis Charge
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/06/2024	Payee name Lopez, Sofia
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 33168 Whipple Rd Apt 12208 Los Fresnos , TX 78566
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Worker
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/20/2024	Payee name Magallanes, Mando
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Amount (\$) \$1,575.00	Payee address; City; State; Zip Code 1130 W Elizabeth St Brownsville, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/7 Rpt: 18/21	2 FILER NAME Gracia, Jonathan Dwayne (Mr.)	3 Filer ID (Ethics Commission Filers) 00086222
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4 Date 06/04/2024	5 Payee name Peerly.Com
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6 Amount (\$) \$359.82	7 Payee address; City; State; Zip Code 2232 Dell Range Blvd Cheyenne, WY 82009
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/21/2024	Payee name Pena, Irma
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 4380 Boca Chica Apt. 513 Brownsville, TX 78521
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Banking
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/10/2024	Payee name Rosenbaum, Lucino
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Amount (\$) \$820.00	Payee address; City; State; Zip Code 3620 S Dakota Ave Brownsville, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/7 Rpt: 19/21	2 FILER NAME Gracia, Jonathan Dwayne (Mr.)	3 Filer ID (Ethics Commission Filers) 00086222
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4 Date 05/28/2024	5 Payee name Smoke Texas BBQ & Watering Hole
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6 Amount (\$) \$27.06	7 Payee address; City; State; Zip Code 1600 W Harrison Ste A Harlingen, TX 78550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/28/2024	Payee name Smoke Texas BBQ & Watering Hole
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Amount (\$) \$930.00	Payee address; City; State; Zip Code 1600 W Harrison Ste A Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food & Drinks for Campaign Party
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/27/2024	Payee name Tyler, Robert
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 72 Pizarro Ave Rancho Viejo, TX 78575
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Bank
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/7 Rpt: 20/21	2 FILER NAME Gracia, Jonathan Dwayne (Mr.)	3 Filer ID (Ethics Commission Filers) 00086222
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4 Date 05/20/2024	5 Payee name UPS
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6 Amount (\$) \$48.47	7 Payee address; City; State; Zip Code 1474 W Price Rd Brownsville, TX 78521
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/23/2024	Payee name Valley Morning Star
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 1906 E. Tyler, Suite D Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense News Paper Ad
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/12/2024	Payee name Zavala , Diamantina
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 941 E Gem Ave Raymondville, TX 78580
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Worker
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/7 Rpt: 21/21	2 FILER NAME Gracia, Jonathan Dwayne (Mr.)	3 Filer ID (Ethics Commission Filers) 00086222
4 Date 06/04/2024	5 Payee name Zavala , Mike	
6 Amount (\$) \$600.00	7 Payee address; City; State; Zip Code 941 E Gem Ave Raymondville, TX 78580	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Worker
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held