### COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM CEC COVER SHEET PG 1

Tł	e CEC Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00015946	<ul><li>2 Total pages filed:</li><li>49</li></ul>			
3	COMMITTEE NAME		•	OFFICE USE ONLY			
	Nueces County De	emocratic Executive Committee (CEC)		Date Received ELECTRONICALLY FILED 07/08/2024			
4	COMMITTEE ADDRESS		TY; STATE; ZIP CODE				
	ADDKE22	6102 Ayers Ste. 107		Date Hand-delivered or Date Postmarked			
	Change of Address	Correct DV 70445					
		Corpus Christi, TX 78415		Receipt # Amount			
				Date Processed			
				Date Imaged			
5	CAMPAIGN	MS / MRS / MR FIRST		MI			
	TREASURER NAME	Mrs. Stephanie					
		NICKNAME LAST		SUFFIX			
		Guerrero Sae	nz				
6	CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); 6022 Sweet Gum	APT / SUITE #; CITY;	STATE; ZIP CODE			
	(Residence or Business)	Corpus Christi, TX 78415					
7	CAMPAIGN	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE			
	TREASURER MAILING ADDRESS	6022 Sweet Gum					
	Change of Address	Corpus Christi, TX 78415					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
	TREASURER PHONE	(361) 249-3041					
9	REPORT	January 15 3	Oth day before election	Final Report			
	TYPE						
		X July 15	th day before election	10th day after campaign treasurer termination			
			Runoff				
10	PERIOD COVERED	Month Day Year	Month Day	Year			
	COVERED	02/25/2024 T	HROUGH 06/30/202	4			
11	ELECTION	ELECTION DATE	ELECTION TYPE				
			Primary Runoff	Other			
		11/05/2024	General Special				
	GO TO PAGE 2						
Fo	rms provided by Tex	xas Ethics Commission www.e	thics.state.tx.us	Version V4.1.0.d378aba0			

## COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

### FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME	12 COMMITTEE NAME 13 Filer			D (Ethics Commission Filers)
Nueces County Democ	ratic Executive Com	nittee (CEC)	00015	5946
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOAN	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR S MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	4	\$ 0.00
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	\$ 15,918.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	\$	\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	\$	\$ 12,276.72
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST I	DAY \$	\$ 33,429.42
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	HE \$	\$ 0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mrs. Stephanie	Guerrer	o Saenz
		Signature of Car	npaign Ti	reasurer
AFFIX NOTARY	STAMP / SEAL ABOV	E		
Sworn to and subscribed	before me, by the said	, tr	nis the	day
of	_, 20, to certi	fy which, witness my hand and seal of office.		
Signature of officer ad	lministering oath	Printed name of officer administering oath	Title o	of officer administering oath
Forms provided by Texas E	Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0

### SUBTOTALS - CEC

#### FORM CEC COVER SHEET PG 3 3 of 49

				5 01 45				
17 COMMITTER	E NAME	18 Filer ID	(Ethi	cs Commission Filers)				
Nueces Co	ounty Democratic Executive Committee (CEC)	00015946						
19 SCHEDULE	SUBTOTALS		Τ					
	NAME OF SCHEDULE							
1. X								
			\$	15,918.00				
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00				
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00				
4. X	SCHEDULE E: LOANS		\$	0.00				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	12,276.72				
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00				
9.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	2,124.62				

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/23 Rpt: 4/49 FILER NAME Filer ID (Ethics Commission Filers) 2 3 00015946 Nueces County Democratic Executive Committee (CEC) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/12/2024 20/20 Vintage \$75.00 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78401 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/27/2024 \$500.00 Abel Herrero Campaign Contributor address; City; State; Zip Code Corpus Christi, TX 78403 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/12/2024 \$300.00 Allison, Doug Contributor address; City; State; Zip Code Corpus Christi, TX 78401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Lawyer Self employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/17/2024 \$1,000.00 Allison, Doug Contributor address; City; State; Zip Code Corpus Christi, TX 78412 Principal occupation / Job title (See Instructions) Employer (See Instructions) Lawyer Self employed Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/11/2024 \$150.00 Balderas, Randy Contributor address; City; State; Zip Code Corpus Christi, TX 78410 Principal occupation / Job title (See Instructions) Employer (See Instructions) Chief Deputy Constable Pct. 4 Nueces County

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/23 Rpt: 5/49	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)			00015946	
4		5 Full name of contributor Out-of-state PAC (ID#:		7	Amount of Contribution (\$)	
	03/14/2024	Benavides, Joe (The Honorable)				\$150.00
		<ul> <li>6 Contributor address; City; State; Zip Code</li> <li>Corpus Christi, TX 78404</li> </ul>				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Nueces Cou	nty JP Pct.1/Place 1	State of Texas			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:			Amount of Contribution (\$)	
	06/27/2024		)		Amount of Contribution (\$)	¢25.00
	06/27/2024	Bogert, Heidi				\$25.00
		Contributor address; City; State; Zip Code				
		Boise, ID 83706				
⊢	Duin aire al a sao		Enveloper (Os e la structione	Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	20	Not Employed			
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	)		Amount of Contribution (\$) \$150.00	
	02/25/2024	Bustos, Jesus				\$150.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78417				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ;)		
	Small Busine		Self-employed	,		
╞				<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	***
	03/11/2024	Canales , Yolanda				\$25.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	: )		Amount of Contribution (\$)	
	04/11/2024	Canales , Yolanda				\$25.00
		Continuator address, City, State, Zip Code				
		Corpus Christi, TX 78404				
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
⊢			1			

SCHEDULE	A1
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	The Instru	ction Guide explains how to comp	olete this fo	orm.	1	Total pages Schedule A1: Sch: 3/23 Rpt: 6/49		
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)	
	Nueces Cou	nty Democratic Executive Committee (C	EC)			00015946		
4	Date	5 Full name of contributor Out-of-st	ate PAC (ID#:	)	7	Amount of Contribution (\$)		
	05/11/2024	Canales , Yolanda		/			\$25.00	
		6 Contributor address; City; State; Zip Con					+20100	
		Contributor address, City, State, Zip Con	ue					
		Corpus Christi, TX 78404						
8	Principal occu	pation / Job title (See Instructions)	I	9 Employer (See Instructions	<u> </u> ;)			
ľ	Retired			Retired	,			
				riourou	_			
	Date		tate PAC (ID#:	)		Amount of Contribution (\$)	***	
	06/11/2024	Canales , Yolanda					\$25.00	
		Contributor address; City; State; Zip Co	de					
		Corpus Christi, TX 78404						
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Retired			Retired				
	Date	Full name of contributor 🔲 out-of-st	tate PAC (ID#:	)		Amount of Contribution (\$)		
	03/11/2024	Canales , Yolanda					\$150.00	
		Contributor address; City; State; Zip Co						
		Corpus Christi, TX 78404						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)			
	Retired			Retired				
	Date	Full name of contributor	ate PAC (ID#:	)		Amount of Contribution (\$)		
	06/01/2024	Castanon, Juanita		/			\$100.00	
		Contributor address; City; State; Zip Co						
			uc					
		Rockport , TX 78381						
	Principal occu	pation / Job title (See Instructions)	I	Employer (See Instructions	L;)			
	Not Employe			Not Employed	,			
					_			
	Date		tate PAC (ID#:	)		Amount of Contribution (\$)	<b>#75 00</b>	
	03/12/2024						\$75.00	
	Contributor address; City; State; Zip Code							
	Corpus Christi, TX 78412							
		pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Real Estate	Real Estate Broker Self Employed						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	for		1	Total pages Schedule A1: Sch: 4/23 Rpt: 7/49	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)				00015946	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:	)	7	Amount of Contribution (\$)	
	02/25/2024	Clower, George					\$25.00
		6 Contributor address; City; State; Zip Code					
		Corpus Christi, TX 78463					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Retired			None			
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	#:	)		Amount of Contribution (\$)	
	03/25/2024	Clower, George					\$25.00
		Contributor address; City; State; Zip Code					
		Corpus Christi, TX 78463					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			None			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:	)		Amount of Contribution (\$)	
	05/01/2024	Clower, George					\$25.00
		Contributor address; City; State; Zip Code					
		Corpus Christi, TX 78463					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			None			
	Date	Full name of contributor out-of-state PAC (ID#	#:	)		Amount of Contribution (\$)	
	05/25/2024	Clower, George					\$25.00
		Contributor address; City; State; Zip Code			1		
		Corpus Christi, TX 78463					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			None			
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	#:	)		Amount of Contribution (\$)	
	03/04/2024	Clower, George					\$75.00
		Contributor address; City; State; Zip Code			1		
L		Corpus Christi, TX 78463					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			None			

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total pages Schedule A1: 1 The Instruction Guide explains how to complete this form. Sch: 5/23 Rpt: 8/49 FILER NAME Filer ID (Ethics Commission Filers) 2 3 00015946 Nueces County Democratic Executive Committee (CEC) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/11/2024 Coastal Bend Tejano Democrats \$300.00 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78466 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/27/2024 Coastal Bend Texas Democratic Women \$150.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78468 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/02/2024 Engen, Erick \$5.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78403 Principal occupation / Job title (See Instructions) Employer (See Instructions) Disaster Assistance Department of Homeland Security U.S. Government Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/02/2024 \$5.00 Engen, Erick Contributor address; City; State; Zip Code Corpus Christi, TX 78403 Principal occupation / Job title (See Instructions) Employer (See Instructions) Disaster Assistance Department of Homeland Security U.S. Government Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/02/2024 Engen, Erick \$5.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78403 Principal occupation / Job title (See Instructions) Employer (See Instructions) Disaster Assistance Department of Homeland Security U.S. Government

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/23 Rpt: 9/49	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)			00015946	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/02/2024	Engen, Erick				\$5.00
		6 Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78403				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> چ)		
		istance Department of Homeland Security	U.S. Government			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	02/27/2024	Estrada, Laura	)			\$10.00
	02/21/2024	Contributor address; City; State; Zip Code				<b>\$10.00</b>
		Contributor address, City, State, Zip Code				
		Corpus Christi , TX 78412				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Teacher		Corpus Christi ISD	,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:	)	<u> </u>	Amount of Contribution (\$)	
	03/12/2024	Estrada, Laura	)			\$40.00
	03/12/2024					Ψ+0.00
		Contributor address; City; State; Zip Code				
		Corpus Christi , TX 78412				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Teacher		Corpus Christi ISD			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/25/2024	Estrada, Laura	)			\$10.00
	00/20/2021	Contributor address; City; State; Zip Code				<b>\$10100</b>
		Contributor address, City, State, Zip Code				
		Corpus Christi, TX 78412				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Teacher		Corpus Christi ISD			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/25/2024	Estrada, Laura	)			\$10.00
	•					+_0.00
		Contributor address, City, State, Zip Code				
		Corpus Christi , TX 78412				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L 5)		
	Teacher	· · · · · · /	Corpus Christi ISD			
⊢			l '			

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 7/23 Rpt: 10/49
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)	
	unty Democratic Executive Committee (CEC)		00015946
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
05/25/2024			\$10.00
	6 Contributor address; City; State; Zip Code		•
	Corpus Christi, TX 78412		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	δ)
Teacher		Corpus Christi ISD	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)
06/25/2024	Estrada, Laura		\$10.00
	Contributor address; City; State; Zip Code		•
	Corpus Christi, TX 78412		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	δ)
Teacher		Corpus Christi ISD	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/12/2024	Frank Yzaguirre Campaign		\$40.00
	Contributor address; City; State; Zip Code		1
	Corpus Christi, TX 78403		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/02/2024	Galus, Christine		\$25.00
	Contributor address; City; State; Zip Code		1
	Corpus Christi, TX 78413	<u>.</u>	
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Not Employe	ed	None	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/02/2024	Galus, Christine		\$25.00
	Contributor address; City; State; Zip Code		1
	Corpus Christi, TX 78413	<u>.</u>	
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Not Employe	ed	None	

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 8/23 Rpt: 11/49
	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		inty Democratic Executive Committee (CEC)		00015946
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	05/02/2024	Galus, Christine		\$25.00
	1	6 Contributor address; City; State; Zip Code		1
Ļ		Corpus Christi, TX 78413	· · · · · · · · · · · · · · · · · · ·	
8	Principal occu Not Employe		9 Employer (See Instructions None	3)
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/02/2024	Galus, Christine	,	\$25.00
	00,02,202			
		Contributor address; City; State; Zip Code		
		1		
		Corpus Christi, TX 78413		
⊢	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	e)
	Not Employe		None	>)
⊢				
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/22/2024	Garcia , David L.		\$25.00
		Contributor address; City; State; Zip Code		
		1		
		Corpus Christi, TX 78413		
		ipation / Job title (See Instructions)	Employer (See Instructions	3)
	Not Employe	<u>,a</u>	None	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	02/25/2024	Garza, Ernest		\$250.00
	I	Contributor address; City; State; Zip Code	, , , , , , , , , , , , , , , , , , ,	1
		1		
		1		
		Corpus Christi, TX 78410		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	CPA		Self	
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/13/2024	Gina Benavides Campaign		\$300.00
	I	Contributor address; City; State; Zip Code		1
		1		
		Corpus Christi, TX 78413		
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ι</u> δ)
		, , , , , , , , , , , , , , , , , , ,		,
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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 9/23 Rpt: 12/49	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		nty Democratic Executive Committee (CEC)			00015946	-
4	Date	5 Full name of contributor out-of-state PAC (ID	)#:)	7	Amount of Contribution (\$)	
	05/06/2024	Gina Benavides Campaign				\$2,500.00
		6 Contributor address; City; State; Zip Code		ł		
		Corpus Christi, TX 78413				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
F	Date	Full name of contributor 🔲 out-of-state PAC (ID	)#:)	Γ	Amount of Contribution (\$)	
	03/12/2024	Graham, Coretta				\$75.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78466				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	lawyer		Self			
	Date	Full name of contributor 🔲 out-of-state PAC (ID	)#:)	Γ	Amount of Contribution (\$)	
	03/02/2024	Guerrero Saenz, Stephanie				\$25.00
		Contributor address; City; State; Zip Code		]		
		Comme Christi TV 70415				
	Drive sized a servi	Corpus Christi, TX 78415		Ĺ		
	Principal occu Teacher	pation / Job title (See Instructions)	Employer (See Instructions Corpus Christi iSD	5)		
L				<del>.</del>		
	Date	Full name of contributor Out-of-state PAC (ID	)#:)		Amount of Contribution (\$)	± 25.00
	04/02/2024	Guerrero Saenz, Stephanie				\$25.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78415				
$\vdash$	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Teacher		Corpus Christi iSD	>)		
╞				1		
	Date	Full name of contributor out-of-state PAC (ID	/#:)		Amount of Contribution (\$)	ቀንፍ በበ
	05/02/2024	Guerrero Saenz, Stephanie				\$25.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78415				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> د)		
	Teacher		Corpus Christi iSD	<b>&gt;</b> )		
$\vdash$						

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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 10/23 Rpt: 13/49	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	unty Democratic Executive Committee (CEC)		00015946	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/02/2024				\$25.00
	6 Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78415	,		
	upation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Teacher		Corpus Christi iSD		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/12/2024	Henderson, Terry			\$35.00
	Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78411			
	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Not employe	3d	None		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/15/2024	Hernandez, Lisa			\$20.00
	Contributor address; City; State; Zip Code			
D in single and	Corpus Christi, TX 78407		<u>`</u>	
Principal occu Teacher	upation / Job title (See Instructions)	Employer (See Instructions Retired	;)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	÷22.00
03/15/2024	Hernandez, Lisa			\$20.00
	Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78407			
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	() ()	
Teacher		Retired	7	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
04/15/2024	Full name of contributor out-of-state PAC (ID#: Hernandez, Lisa	)		\$20.00
04/10/2024	Contributor address; City; State; Zip Code			Ψ20.00
	Continuutor address, City, State, Zip Code			
	Corpus Christi, TX 78407			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Teacher		Retired	<i>y</i>	
-				

Ţ	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 11/23 Rpt: 14/49
2 F	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		nty Democratic Executive Committee (CEC)		00015946
4 C	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
(	05/15/2024	Hernandez, Lisa		\$20.00
	1	6 Contributor address; City; State; Zip Code		
		Corpus Christi, TX 78407		
<b>8</b> F	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	is)
י_	Teacher		Retired	
	Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)
(	03/07/2024	Huerta, Carlos		\$12.00
	ł	Contributor address; City; State; Zip Code		
		Corpus Christi, TX 78412		
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ls)
E	Educator		Texas A&M University (	Corpus Christi
<u>г</u>	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
(	04/07/2024	Huerta, Carlos		\$12.00
				n
	1			
		Corpus Christi, TX 78412		
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
E	Educator		Texas A&M University (	Corpus Christi
[	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
(	05/07/2024	Huerta, Carlos		\$12.00
		Contributor address; City; State; Zip Code		.1
		Corpus Christi, TX 78412		
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
_E	Educator		Texas A&M University (	Corpus Christi
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/07/2024	Huerta, Carlos		\$12.00
		Contributor address; City; State; Zip Code		
		Corpus Christi, TX 78412		
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)
E	Educator		Texas A&M University (	Corpus Christi

SCHEDULE A	1\
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on Guide explains how to complete this fo	nrm		Total pages Schedule A1:	
on Guide explains now to complete this it			Sch: 12/23 Rpt: 15/49	
		3	Filer ID (Ethics Commissio	on Filers)
Democratic Executive Committee (CEC)			00015946	
Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
James E. Klein Campaign				\$150.00
Contributor address; City; State; Zip Code		1		
Corpus Christi, TX 78411				
tion / Job title (See Instructions)	9 Employer (See Instructions	5)		
Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
Juan Chuy Hinojosa Campaign				\$2,500.00
				-
Edinburg , TX 78539				
tion / Job title (See Instructions)	Employer (See Instructions	5)		
Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
Juan Chuy Hinojosa Campaign				\$1,000.00
Edinburg , TX 78539				
Edinburg , TX 78539 tion / Job title (See Instructions)	Employer (See Instructions	6)		
-	Employer (See Instructions	5)		
-	Employer (See Instructions		Amount of Contribution (\$)	
tion / Job title (See Instructions)	Employer (See Instructions		Amount of Contribution (\$)	\$1,000.00
Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions		Amount of Contribution (\$)	\$1,000.00
Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions		Amount of Contribution (\$)	\$1,000.00
Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions		Amount of Contribution (\$)	\$1,000.00
Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions		Amount of Contribution (\$)	\$1,000.00
Full name of contributor out-of-state PAC (ID#: Juan Chuy Hinojosa Campaign Contributor address; City; State; Zip Code	Employer (See Instructions		Amount of Contribution (\$)	\$1,000.00
Full name of contributor out-of-state PAC (ID#: Juan Chuy Hinojosa Campaign Contributor address; City; State; Zip Code Edinburg , TX 78539	)		Amount of Contribution (\$)	\$1,000.00
Full name of contributor out-of-state PAC (ID#: Juan Chuy Hinojosa Campaign Contributor address; City; State; Zip Code Edinburg , TX 78539	)		Amount of Contribution (\$)	\$1,000.00
ion / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:	)			\$1,000.00
Full name of contributor       out-of-state PAC (ID#:	)			
ion / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:	)			
ion / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:	)			
ion / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:	)			
Full name of contributor out-of-state PAC (ID#:_   Juan Chuy Hinojosa Campaign   Contributor address; City; State; Zip Code   Edinburg , TX 78539   tion / Job title (See Instructions)   Full name of contributor   out-of-state PAC (ID#:_   King , Donna   Contributor address; City; State; Zip Code	)	) 		
- -	Full name of contributor       out-of-state PAC (ID#:_         James E. Klein Campaign         Contributor address; City; State; Zip Code         Corpus Christi, TX 78411         ion / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Juan Chuy Hinojosa Campaign         Contributor address; City; State; Zip Code         Edinburg , TX 78539         ion / Job title (See Instructions)         Full name of contributor         Juan Chuy Hinojosa Campaign         Full name of contributor         Juan Chuy Hinojosa Campaign         Full name of contributor         Juan Chuy Hinojosa Campaign	Full name of contributor       out-of-state PAC (ID#:)         James E. Klein Campaign         Contributor address; City; State; Zip Code         Corpus Christi, TX 78411         ion / Job title (See Instructions)         9       Employer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)         Juan Chuy Hinojosa Campaign       Contributor address; City; State; Zip Code         Edinburg , TX 78539       Employer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)         Juan Chuy Hinojosa Campaign       Employer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)         Juan Chuy Hinojosa Campaign       Imployer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)         Juan Chuy Hinojosa Campaign       Imployer (See Instructions)	3         Permocratic Executive Committee (CEC)         Full name of contributor       out-of-state PAC (ID#:)         James E. Klein Campaign       7         Contributor address; City; State; Zip Code       7         Corpus Christi, TX 78411       9         ion / Job title (See Instructions)       9       Employer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)       Juan Chuy Hinojosa Campaign         Contributor address; City; State; Zip Code       Edinburg , TX 78539       Employer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)       Juan Chuy Hinojosa Campaign         Contributor address; City; State; Zip Code       Employer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)         Juan Chuy Hinojosa Campaign       Employer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)         Juan Chuy Hinojosa Campaign       Imployer (See Instructions)	Image: Democratic Executive Committee (CEC)       3       Filer ID (Ethics Commission 00015946         Full name of contributor       out-of-state PAC (ID#:)       7       Amount of Contribution (\$)         James E. Klein Campaign       7       Amount of Contribution (\$)       7         Contributor address; City; State; Zip Code       7       Amount of Contribution (\$)         Corpus Christi, TX 78411       9       Employer (See Instructions)         Image: Section of the contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Juan Chuy Hinojosa Campaign       Employer (See Instructions)       Amount of Contribution (\$)         Edinburg , TX 78539       Employer (See Instructions)       Amount of Contribution (\$)         Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Juan Chuy Hinojosa Campaign       Imployer (See Instructions)       Amount of Contribution (\$)

The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/23 Rpt: 16/49	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Nueces Cou	inty Democratic Executive Committee (CEC)			00015946	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
03/30/2024	King , Donna			· · · · · · · · · · · · · · · · · · ·	\$10.00
	6 Contributor address; City; State; Zip Code		ł		Ŧ -
	Corpus Christi, TX 78412				
8 Principal occu	I upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Sit & Remote Editing	Self	,		
Date	Full name of contributor out-of-state PAC (ID#:_	)	T	Amount of Contribution (\$)	
04/30/2024	King , Donna	/			\$10.00
04/00/202 .	-		•		Ψ10.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78412				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
·	Sit & Remote Editing	Self	3)		
Date			T	Amount of Contribution (\$)	
05/30/2024		)			\$10.00
05/30/2024	King , Donna				Φ10.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78412				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	Sit & Remote Editing	Self	3)		
Date			1	Amount of Contribution (\$)	
		)		Amount of Contribution (\$)	¢150.00
03/11/2024	Klein, James (Dr.)				\$150.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78411				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u>		
Professor		Del Mar College	5)		
			1		
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀርብ በብ
02/29/2024	Klein, Teresa (Dr.)				\$50.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78411				
Dringing occu		Employer (See Instructions	<u> </u>		
Principal occu Professor	upation / Job title (See Instructions)	Employer (See Instructions Del Mar College	5)		
Pluiessui		Del Mai College			

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 14/23 Rpt: 17/49	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	nty Democratic Executive Committee (CEC)		00015946	
03/31/2024	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Klein, Teresa (Dr.)</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$)	\$50.00
	Corpus Christi, TX 78411			
8 Principal occup Professor	pation / Job title (See Instructions)	9 Employer (See Instructions) Del Mar College	)	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/30/2024	Klein, Teresa (Dr.)			\$50.00
	Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78411			
	pation / Job title (See Instructions)	Employer (See Instructions)	)	
Professor		Del Mar College		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/31/2024	Klein, Teresa (Dr.)			\$50.00
	Contributor address; City; State; Zip Code	1		
	Corpus Christi, TX 78411			
Principal occur	Corpus Christi, TX 78411 pation / Job title (See Instructions)	Emplover (See Instructions	)	
Principal occur Professor	Corpus Christi, TX 78411 pation / Job title (See Instructions)	Employer (See Instructions) Del Mar College	)	
		Del Mar College	) Amount of Contribution (\$)	
Professor	pation / Job title (See Instructions)	Del Mar College		\$50.00
Professor Date	Full name of contributor out-of-state PAC (ID#:_	Del Mar College		\$50.00
Professor Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Klein, Teresa (Dr.) Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Del Mar College	Amount of Contribution (\$)	\$50.00
Professor Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Klein, Teresa (Dr.) Contributor address; City; State; Zip Code	Del Mar College	Amount of Contribution (\$)	\$50.00
Professor Date 06/30/2024 Principal occup	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Klein, Teresa (Dr.)         Contributor address; City; State; Zip Code         Corpus Christi, TX 78411         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Full name of contributor	Del Mar College	Amount of Contribution (\$)	\$50.00
Professor Date 06/30/2024 Principal occup Professor	Full name of contributor out-of-state PAC (ID#:_ Klein, Teresa (Dr.) Contributor address; City; State; Zip Code Corpus Christi, TX 78411 pation / Job title (See Instructions)	Del Mar College	Amount of Contribution (\$)	\$50.00
Professor Date 06/30/2024 Principal occup Professor Date	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Klein, Teresa (Dr.)         Contributor address; City; State; Zip Code         Corpus Christi, TX 78411         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Koivula, Carolyn         Contributor address; City; State; Zip Code	Del Mar College	Amount of Contribution (\$)	
Professor Date 06/30/2024 Principal occur Professor Date 04/15/2024	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Klein, Teresa (Dr.)         Contributor address; City; State; Zip Code         Corpus Christi, TX 78411         pation / Job title (See Instructions)         Full name of contributor         Gut-of-state PAC (ID#:_         Koivula, Carolyn         Contributor address; City; State; Zip Code         Corpus Christi, TX 78411	Del Mar College	Amount of Contribution (\$)	
Professor Date 06/30/2024 Principal occur Professor Date 04/15/2024	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Klein, Teresa (Dr.)         Contributor address; City; State; Zip Code         Corpus Christi, TX 78411         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Koivula, Carolyn         Contributor address; City; State; Zip Code	Del Mar College	Amount of Contribution (\$)	

	The Instrue	ction Guide explains how to	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 15/23 Rpt: 18/49	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		nty Democratic Executive Comm	nittee (CEC)			00015946	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/15/2024	– Koivula, Carolyn	-				\$10.00
		6 Contributor address; City; State	e; Zip Code				
			•				
		Corpus Christi, TX 78411					
8	Principal occu	pation / Job title (See Instructions)	9	B Employer (See Instructions	5)		
	Retired			None			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/15/2024	Koivula, Carolyn	-				\$10.00
		Contributor address; City; State	; Zip Code				
		Corpus Christi, TX 78411					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			None			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/17/2024	Larkin, Patrick (Mr.)	-				\$150.00
		Contributor address; City; State					
		Corpus Christi, TX 78404					
		pation / Job title (See Instructions)		Employer (See Instructions			
	Professor			Texas A&M University-C	Cor	pus Christi	
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/17/2024	Larkin, Patrick (Mr.)					\$150.00
		Contributor address; City; State	e; Zip Code		1		
		Corpus Christi, TX 78404	ii				
1		pation / Job title (See Instructions)		Employer (See Instructions			
	Professor			Texas A&M University-C	Cor	pus Christi	
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/17/2024	Larkin, Patrick (Mr.)					\$150.00
		Contributor address; City; State			1		
L		Corpus Christi, TX 78404					
1		pation / Job title (See Instructions)		Employer (See Instructions			
L	Professor			Texas A&M University-C	Cor	pus Christi	

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 16/23 Rpt: 19/49	
2	FILER NAME			3 Filer ID (Ethics Commission File	rs)
	Nueces Cou	inty Democratic Executive Committee (CEC)		00015946	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
	06/17/2024	Larkin, Patrick (Mr.)			50.00
		6 Contributor address; City; State; Zip Code			
		Corpus Christi, TX 78404			
8		pation / Job title (See Instructions)	9 Employer (See Instructions		
	Professor		Texas A&M University-C	Corpus Christi	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	03/13/2024	Lisa Gonzales Campaign		\$	75.00
		Contributor address; City; State; Zip Code			
		Corpus Christi TV 79/11			
_	Dringing occu	Corpus Christi, TX 78411 Ipation / Job title (See Instructions)	Employer (See Instructions	N	
	Pilicipai occu		Employer (See Instructions	)	
╞	Data		<u> </u>	Amount of Contribution (ft)	
	Date 03/12/2024	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	75.00
	03/12/2024	Lopez Leon, Celina		Ψ	75.00
		Contributor address; City; State; Zip Code			
		Corpus Christi, TX 78415			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)	
	Attorney		Self		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	03/12/2024	Marez, John (Commissioner)		\$30	00.00
		Contributor address; City; State; Zip Code			
		Corpus Christi, TX 78404			
		upation / Job title (See Instructions)	Employer (See Instructions	)	
	Commission	er	County		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	06/23/2024	McAuliffe, Cathleen (Dr.)		\$2	50.00
		Contributor address; City; State; Zip Code			
		Rockport, TX 78382			
$\vdash$	Dringing occu	upation / Job title (See Instructions)	Employer (See Instructions	N	
	Principal occu Professor		Employer (See Instructions Not Employed	)	
	FIDESSO				

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 17/23 Rpt: 20/49	
2 FILER NAME			3 Filer ID (Ethics Commission Fil	ilers)
Nueces Cour	nty Democratic Executive Committee (CEC)		00015946	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
03/04/2024	Mitchell, Hannah			\$5.00
ŀ	6 Contributor address; City; State; Zip Code			
	Corpus Chrisit, TX 78412			
	pation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
Grants Specia	alist	TAMUCC		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/04/2024	Mitchell, Hannah			\$5.00
ľ	Contributor address; City; State; Zip Code			
	Corpus Chrisit, TX 78412			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	;)	
Grants Specia	alist	TAMUCC		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/04/2024	Mitchell, Hannah			\$5.00
ľ	Contributor address; City; State; Zip Code			
	-			
	Corpus Chrisit, TX 78412			
	pation / Job title (See Instructions)	Employer (See Instructions)		
Grants Specia	alist	TAMUCC		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/04/2024	Mitchell, Hannah			\$5.00
ŀ	Contributor address; City; State; Zip Code			
	Corpus Chrisit, TX 78412			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	3)	
Grants Specia	alist	TAMUCC		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/11/2024	Morgan LaMantia Campaign		\$	\$500.00
ľ	Contributor address; City; State; Zip Code			
	-			
	Brownsville, TX 78520			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	;)	
		<u>I</u>		

MONETARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	.e A1
The Instruction Guide explains how	/ to complete this fc	orm.	1	Total pages Schedule A1: Sch: 18/23 Rpt: 21/49	
2 FILER NAME Nueces County Democratic Executive Cor	mmittee (CEC)		3	Filer ID (Ethics Commissio 00015946	n Filers)
4 Date       5 Full name of contributor         06/01/2024       Nueces County Tejano De         6 Contributor address; City; St		)	7	Amount of Contribution (\$)	\$75.00
Robstown, TX 78380           8 Principal occupation / Job title (See Instructions)	;)	9 Employer (See Instructions	;)		
Date Full name of contributor 03/13/2024 Richardson, Regina Contributor address; City; St McAllen, TX 78504	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00
Principal occupation / Job title (See Instructions) Attorney	)	Employer (See Instructions Self	)		
Date Full name of contributor 03/12/2024 Rivera, Jimmy Contributor address; City; St				Amount of Contribution (\$)	\$150.00
Bishop, TX 78343					
Principal occupation / Job title (See Instructions Constable	)	Employer (See Instructions Nueces County	)		
Date Full name of contributor 02/25/2024 Rose, Amanda (Mrs.) Contributor address; City; St Corpus Christi, TX 78404		)		Amount of Contribution (\$)	\$10.00
Principal occupation / Job title (See Instructions Program Coordinator	)	Employer (See Instructions Texas A&M Corpus Chri			
Date Full name of contributor 03/25/2024 Rose, Amanda (Mrs.) Contributor address; City; St		)		Amount of Contribution (\$)	\$10.00
Corpus Christi, TX 78404 Principal occupation / Job title (See Instructions Program Coordinator		Employer (See Instructions Texas A&M Corpus Chri			

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 19/23 Rpt: 22/49		
2 FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	nty Democratic Executive Committee (CEC)			00015946	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
04/25/2024	Rose, Amanda (Mrs.)				\$10.00
	6 Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78404				
	pation / Job title (See Instructions)	9 Employer (See Instructions			
Program Coo	ordinator	Texas A&M Corpus Chr	risti		
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
05/25/2024	Rose, Amanda (Mrs.)				\$10.00
	Contributor address; City; State; Zip Code		1		
	Corpus Christi, TX 78404				
	pation / Job title (See Instructions)	Employer (See Instructions			
Program Coo	ordinator	Texas A&M Corpus Chr	risti		
Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
06/25/2024	Rose, Amanda (Mrs.)				\$10.00
	Contributor address; City; State; Zip Code		1		
	Corpus Christi, TX 78404	1			
	pation / Job title (See Instructions)	Employer (See Instructions			
Program Coo	ordinator	Texas A&M Corpus Chr	risti		
Date	Full name of contributor out-of-state PAC (ID#:	)	Ţ	Amount of Contribution (\$)	
03/11/2024	Solomon P. Ortiz Jr. Campaign Fund				\$150.00
	Contributor address; City; State; Zip Code		]		
	Corpus Christi, TX 78401				
Bringinal occu	pation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
ΡΠΠΟΙμαι Ουυμ	pation / Job lille (See instructions)		5)		
Data	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	<del>—</del>	Amount of Contribution (\$)	
Date 05/12/2024		)		Amount of Contribution (\$)	\$25.00
05/12/2024 Spann, Dorothy					φ20.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78404				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L s)		
Retired		5)			
		None			
1					

The li	nstruction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 20/23 Rpt: 23/49	
2 FILER	NAME	<b>3</b> Filer ID (Ethics Commission Filers)	
Nuece	s County Democratic Executive Committee (CEC)		00015946
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
06/12/	2024 Spann, Dorothy		\$25.00
	6 Contributor address; City; State; Zip Code		4
	Corpus Christi, TX 78404		
8 Princip	al occupation / Job title (See Instructions)	9 Employer (See Instructions	<u>۱</u> ۵)
Retire	t	None	
Date	Full name of contributor out-of-state PAC (ID#:	· )	Amount of Contribution (\$)
03/14/			\$3.00
00,11,			
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78413		
Princin	al occupation / Job title (See Instructions)	Employer (See Instructions	
	stic Engineer	Self	>)
			T
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/14/	2024 Stockman, Christen		\$3.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78413		
	al occupation / Job title (See Instructions)	Employer (See Instructions	3)
Domes	stic Engineer	Self	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/14/	2024 Stockman, Christen		\$3.00
	Contributor address; City; State; Zip Code		1
	Corpus Christi, TX 78413		
Princip	al occupation / Job title (See Instructions)	Employer (See Instructions	\$)
Dome	stic Engineer	Self	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
05/14/			\$3.00
	Contributor address; City; State; Zip Code	•	
	Continuator address, City, State, Zip Code		
	Corpus Christi, TX 78413		
Princin	al occupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	stic Engineer	Self	<i>`</i> /

The Instrue	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 21/23 Rpt: 24/49		
2 FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	inty Democratic Executive Committee (CEC)		00015946		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
06/14/2024	Stockman, Christen				\$3.00
	6 Contributor address; City; State; Zip Code		1		
	Corpus Christi, TX 78413				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Domestic En	ıgineer	Self			
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
03/11/2024	Sylvia Campos Campaign				\$150.00
	Contributor address; City; State; Zip Code		1		
	Corpus Christi, TX 78411				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
I					
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
03/12/2024	Tanya Lloyd Campaign				\$500.00
	Contributor address; City; State; Zip Code		1		
	Lockhart, TX 78644				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
03/12/2024	Tasbe, Eric				\$75.00
	Contributor address; City; State; Zip Code				
	Cornue Christi TV 79/12				
Dringingl occu	Corpus Christi, TX 78413	Employer (See Instructions			
Not employe	upation / Job title (See Instructions)	Not employed	5)		
		1	<del>—</del>		
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	*=2.00
03/13/2024 Timmons, Jeffery					\$50.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78411				
Principal occu	pation / Job title (See Instructions)	Employor (See Instructions	$\overline{\Gamma}$		
Retired	pation / Job title (See instructions)	Employer (See Instructions)	5)		
Relieu		NULLE			

	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 22/23 Rpt: 25/49		
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	Nueces Cou	nty Democratic Executive Committee (CEC)			00015946	
		5 Full name of contributor Out-of-state PAC (ID#	)	7	Amount of Contribution (\$)	
	03/04/2024	Webb, Ann			•••••••••••••••••••••••••••••••••••••••	\$100.00
		6 Contributor address; City; State; Zip Code		ł		
		Corpus Christi, TX 78414				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not employe	d	Not employed			
╞─	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	03/04/2024	Webb, Ann			.,	\$100.00
		Contributor address; City; State; Zip Code		ł		+
		Corpus Christi, TX 78414				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	d	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Γ	Amount of Contribution (\$)	
	05/04/2024	Webb, Ann				\$100.00
	ł	Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78414				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		_
	Not employe	d	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	06/04/2024	Webb, Ann				\$100.00
	1	Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78414	1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	d	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#	)		Amount of Contribution (\$)	_
	02/25/2024 Westergen, Kathy					\$5.00
		Contributor address; City; State; Zip Code	]			
		On the Object TV 70410				
		Corpus Christi, TX 78416		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Academic Ac	JVISOr	Del Mar College			

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 23/23 Rpt: 26/49	
2 FILER NAME		3 Filer ID (Ethics Commission F	-ilers)	
Nueces Cour	nty Democratic Executive Committee (CEC)		00015946	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
03/25/2024	Westergen, Kathy			\$5.00
	6 Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78416	<u> </u>	-	
	pation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Academic Ad		Del Mar College		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/25/2024				\$5.00
	Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78416			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)	\ \	
Academic Ad		Del Mar College	)	
			Amount of Contribution (\$)	
Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	\$5.00
03/23/2024	Westergen, Kathy		Φ0.00	
	Or a taile star address. City / Ctato, Zin Cada			
	Contributor address; City; State; Zip Code			
	Contributor address; City; State; Zip Code			
	Contributor address; City; State; Zip Code Corpus Christi, TX 78416			
Principal occur		Employer (See Instructions)	)	
Principal occur Academic Ad	Corpus Christi, TX 78416 pation / Job title (See Instructions)	Employer (See Instructions) Del Mar College	)	
	Corpus Christi, TX 78416 pation / Job title (See Instructions)		) Amount of Contribution (\$)	
Academic Ad	Corpus Christi, TX 78416 pation / Job title (See Instructions) Ivisor			\$5.00
Academic Ad	Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor Full name of contributor out-of-state PAC (ID#:			\$5.00
Academic Ad	Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor Full name of contributor out-of-state PAC (ID#:_ Westergen, Kathy			\$5.00
Academic Ad	Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor Full name of contributor out-of-state PAC (ID#:_ Westergen, Kathy			\$5.00
Academic Ad	Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor Full name of contributor out-of-state PAC (ID#:_ Westergen, Kathy			\$5.00
Academic Ad Date 06/25/2024 Principal occup	Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor Full name of contributor out-of-state PAC (ID#:_ Westergen, Kathy Contributor address; City; State; Zip Code Corpus Christi, TX 78416 Dation / Job title (See Instructions)	Del Mar College	Amount of Contribution (\$)	\$5.00
Academic Ad Date 06/25/2024	Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor Full name of contributor out-of-state PAC (ID#:_ Westergen, Kathy Contributor address; City; State; Zip Code Corpus Christi, TX 78416 Dation / Job title (See Instructions)	Del Mar College	Amount of Contribution (\$)	\$5.00
Academic Ad Date 06/25/2024 Principal occup	Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor Full name of contributor out-of-state PAC (ID#:_ Westergen, Kathy Contributor address; City; State; Zip Code Corpus Christi, TX 78416 Dation / Job title (See Instructions)	Del Mar College ) 	Amount of Contribution (\$)	\$5.00
Academic Ad Date 06/25/2024 Principal occup Academic Ad	Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor Full name of contributor out-of-state PAC (ID#:_ Westergen, Kathy Contributor address; City; State; Zip Code Corpus Christi, TX 78416 Dation / Job title (See Instructions) Ivisor	Del Mar College ) 	Amount of Contribution (\$)	\$5.00
Academic Ad Date 06/25/2024 Principal occup Academic Ad Date	Corpus Christi, TX 78416         Dation / Job title (See Instructions)         Ivisor         Full name of contributor         Out-of-state PAC (ID#:_         Westergen, Kathy         Contributor address; City; State; Zip Code         Corpus Christi, TX 78416         Dation / Job title (See Instructions)         Ivisor         Full name of contributor         Out-of-state PAC (ID#:_         Full name of contributor	Del Mar College ) 	Amount of Contribution (\$)	
Academic Ad Date 06/25/2024 Principal occup Academic Ad Date	Corpus Christi, TX 78416         Dation / Job title (See Instructions)         Ivisor         Full name of contributor       out-of-state PAC (ID#:_         Westergen, Kathy         Contributor address; City; State; Zip Code         Corpus Christi, TX 78416         Dation / Job title (See Instructions)         Ivisor         Full name of contributor         Out-of-state PAC (ID#:_         Wilson, Sylvia	Del Mar College ) 	Amount of Contribution (\$)	
Academic Ad Date 06/25/2024 Principal occup Academic Ad Date	Corpus Christi, TX 78416         pation / Job title (See Instructions)         lvisor         Full name of contributor       out-of-state PAC (ID#:_         Westergen, Kathy         Contributor address; City; State; Zip Code         Corpus Christi, TX 78416         pation / Job title (See Instructions)         lvisor         Full name of contributor         out-of-state PAC (ID#:_         Wilson, Sylvia         Contributor address; City; State; Zip Code	Del Mar College ) 	Amount of Contribution (\$)	
Academic Ad Date 06/25/2024 Principal occur Academic Ad Date 06/04/2024	Corpus Christi, TX 78416         Dation / Job title (See Instructions)         Ivisor         Full name of contributor       out-of-state PAC (ID#:_         Westergen, Kathy         Contributor address; City; State; Zip Code         Corpus Christi, TX 78416         Dation / Job title (See Instructions)         Ivisor         Full name of contributor         Out-of-state PAC (ID#:_         Wilson, Sylvia         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         Corpus Christi, TX 78413	Del Mar College	Amount of Contribution (\$)	
Academic Ad Date 06/25/2024 Principal occur Academic Ad Date 06/04/2024	Corpus Christi, TX 78416         pation / Job title (See Instructions)         lvisor         Full name of contributor       out-of-state PAC (ID#:_         Westergen, Kathy         Contributor address; City; State; Zip Code         Corpus Christi, TX 78416         pation / Job title (See Instructions)         lvisor         Full name of contributor         out-of-state PAC (ID#:_         Wilson, Sylvia         Contributor address; City; State; Zip Code	Del Mar College ) 	Amount of Contribution (\$)	

## PLEDGED CONTRIBUTIONS

	The	Instruction Guide expla		otal pages S Sch: 1/1 Rpt					
2	FILER NAME				3 F	iler ID	(Ethics 0	Commission Filers)	
	Nueces Cou	unty Democratic Executive C	Committee (CEC)		0	0015946			
<sup>4</sup> TOTAL OF UNITEMIZED PLEDGES						5			0.00
5	Date	6 Full name of pledgor	out-of-state PAC (ID#:_	)		mount of ledge (\$)	9   	In-kind description (If applicable)	
		7 Pledgor Address;	City; State; Zip Code						
						Check if trave	l outside	of Texas. Complete Sch	edule T.
10	) Principal occ	upation / Job title (See Instruction	ons)	11 Employer (See Instru	ctions	6)			
				•					

LOANS							SCH	EDULE E
The Instructio	The Instruction Guide explains how to complete this form.       1 Total pag         Sch: 1/1							
2 FILER NAME Nueces County	Democratic Executive	Committee (CE	C)			3 Filer ID 000159	(Ethics Commi 946	ssion Filers)
<sup>4</sup> TOTAL OF UN	ITEMIZED LOANS						\$	0.00
5 Date of loan	7 Name of lender	ou	it-of-state PA	C (ID#:		)	9 Loan Amou	nt (\$)
6 Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rat	
							<b>11</b> Maturity Dat	le
12 Principal occupatio	on / Job title (See Instruct	ions)		13 Employer (See Ins	structions	)		
14 Description of Coll	ateral			15 Check if personal t	funds we	re deposited	l into political acc (See Instruc	
16 GUARANTOR INFORMATION	17 Name of guarantor						19 Amount Gua	aranteed (\$)
not applicable	<b>18</b> Guarantor address;	City;	State;	Zip Code				
20 Principal occupation	n D			21 Employer (See Ins	structions	)		

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Rela Travel in District Travel Out of District OTHER (enter a category not list	ated Expense
1	Total pages Schedule F1:	<b>2</b> F			-	3 Filer ID (Ethics Com	mission Filers)
_	Sch: 1/19 Rpt: 29/49		lueces County Democratic Executiv	e Committe	e (CEC)	00015946	,
4	Date 02/27/2024		rayee name T&T			I	
6 Amount (\$) \$63.67 PO BOX 5001 Carol Stream , IL 60197							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this soffice Overhead/Rental Expense	chedule)		el outside of Texas. Complete Schedule 1 in, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office sou	ht	Office held	
	Date	F	ayee name				
	03/07/2024	A	T&T				
	Amount (\$) \$37.87	F	vayee address; City; Sta 20 BOX 5001 Carol Stream , IL 60197	te; Zip Coo	le		
	PURPOSE OF EXPENDITURE	(a) (	Category (See Categories listed at the top of this s	chedule)		el outside of Texas. Complete Schedule T in, TX, officeholder living expense <b>GEI</b>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office sou	ht	Office held	
	Date	F	ayee name				
	03/26/2024	ļ	T&T				
	Amount (\$) \$63.67		ayee address; City; Sta O BOX 5001	te; Zip Coo	le		
		C	Carol Stream , IL 60197				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Office Overhead/Rental Expense	chedule)		el outside of Texas. Complete Schedule T in, TX, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office sou	ht	Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)
-	Sch: 2/19 Rpt: 30/49		Nueces County Democratic Executive	Committe	e (CEC)		00015946
4	Date 04/26/2024		Payee name AT&T				
6	6 Amount (\$) \$63.56 7 Payee address; City; State; Zip Code PO BOX 5001 Carol Stream , IL 60197						
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	nedule)			de of Texas. Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office souç	ht		Office held
	Date		Payee name				
	05/28/2024		AT&T				
	Amount (\$) \$63.56		PO BOX 5001	; Zip Coo	le		
	PURPOSE OF EXPENDITURE	(a)	Carol Stream , IL 60197 Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	nedule)			de of Texas. Complete Schedule T. . officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name (	Office souç	ht		Office held
	Date		Payee name				
	06/26/2024		AT&T				
	Amount (\$) \$63.26		Payee address; City; State PO BOX 5001	; Zip Coo	le		
			Carol Stream , IL 60197				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	nedule)			de of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office souç	ht		Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)	
	Sch: 3/19 Rpt: 31/49	Nueces County Democratic Executive Committee (CEC)	00015946	
4	Date	Payee name		
-	06/30/2024	ActBlue		
6 Amount (\$)     7 Payee address; City; State; Zip Code     366 Summer Street     Sommerville, MA 02144				
8	PURPOSE OF EXPENDITURE		rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	06/23/2024	ActBlue		
	Amount (\$) \$15.81	Payee address; City; State; Zip Code 366 Summer Street		
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	06/16/2024	ActBlue		
	Amount (\$) \$3.29	Payee address;     City;     State;     Zip     Code       366 Summer Street		
		Sommerville, MA 02144		
	PURPOSE OF EXPENDITURE		rel outside of Texas. Complete Schedule T. atin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	

		EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       bornittee     Legal Services       Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)		
	Sch: 4/19 Rpt: 32/49	Nueces County Democratic Executive Committee (CEC)	00015946		
4	Date	Payee name			
	06/09/2024	ActBlue			
6 Amount (\$)       7 Payee address;       City;       State;       Zip Code         \$4.63       366 Summer Street					
		Sommerville, MA 02144			
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	06/02/2024	ActBlue			
	Amount (\$) \$4.56	Payee address; City; State; Zip Code 366 Summer Street			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	05/26/2024	ActBlue			
	Amount (\$) \$1.99	Payee address;City;State;Zip Code366 Summer Street			
		Sommerville, MA 02144			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)
-	Sch: 5/19 Rpt: 33/49	Nueces County Democratic Executive Committee (CEC)	00015946
4	Date 05/19/2024	Payee name ActBlue	
6	Amount (\$) \$7.24	Payee address; City; State; Zip Code 366 Summer Street Sommerville, MA 02144	
8	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/12/2024	ActBlue	
	Amount (\$) \$2.46	Payee address; City; State; Zip Code 366 Summer Street Sommerville, MA 02144	
	PURPOSE OF EXPENDITURE	Category     (See Categories listed at the top of this schedule)     (b) Description       Solicitation/Fundraising Expense     Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/05/2024	ActBlue	
	Amount (\$) \$9.70	Payee address;City;State;ZipCode366 Summer Street	
		Sommerville, MA 02144	
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)					
-	Sch: 6/19 Rpt: 34/49	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date							
-	04/28/2024	5 Payee name ActBlue						
6	Amount (\$) \$1.00	7 Payee address; City; State; Zip Code 366 Summer Street						
		Sommerville, MA 02144						
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Solicitation/Fundraising Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense fee</li> </ul> </li> </ul>						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	04/21/2024	ActBlue						
	Amount (\$) \$7.12	Payee address;City;State;Zip Code366 Summer Street						
		Sommerville, MA 02144						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	04/14/2024	ActBlue						
	Amount (\$) \$1.11	Payee address;City;State;Zip Code366 Summer Street						
		Sommerville, MA 02144						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)					
-	Sch: 7/19 Rpt: 35/49	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date							
-	04/07/2024	5 Payee name ActBlue						
6	Amount (\$) \$6.81	7 Payee address; City; State; Zip Code 366 Summer Street Sommerville, MA 02144						
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Solicitation/Fundraising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>fee</li> </ul>						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/31/2024	ActBlue						
	Amount (\$) \$4.37	Payee address; City; State; Zip Code 366 Summer Street Sommerville, MA 02144						
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/24/2024	ActBlue						
	Amount (\$) \$0.99	Payee address; City; State; Zip Code 366 Summer Street						
		Sommerville, MA 02144						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Corr	Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Imitee Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing E Salaries/V	erheac pense xpense Vages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 8/19 Rpt: 36/49		Nueces County Democratic Executive	e Commit	tee (	(CEC)		00015946	
4	Date	5	Payee name						
	03/17/2024		ActBlue						
6	Amount (\$)								
	\$105.25		366 Summer Street						
			Sommerville, MA 02144						
8	PURPOSE OF		Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	EXPENDITURE		Solicitation/Fundraising Expense					de of Texas. Complete Schedule T. officeholder living expense	
						fee			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held	
_	Data	<u> </u>							
	Date 03/10/2024		Payee name ActBlue						
	Amount (\$)			e; Zip Co	bde				
	\$4.63		366 Summer Street						
			Sommerville, MA 02144						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.								
							, TX,	officeholder living expense	
						fee			
	Complete ONIL V if direct		andidata/Officebolder name	Office cou	a ht			Office held	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
-	Date		Payee name						
	03/03/2024		ActBlue						
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode				
	\$4.96		366 Summer Street						
		Sommerville, MA 02144							
	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/Fundraising Expense			닏		de of Texas. Complete Schedule T.	
						fee	, IX,	officeholder living expense	
-	Complete ONLY if direct		andidate/Officeholder name	Office sou	l Iaht			Office held	
	expenditure to benefit C/OI			21100 300	.g				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		FeesOffice OrFood/Beverage ExpensePolling EGift/Awards/Memorials ExpensePrinting	verhea xpens Expens Wages	se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	· · · · · · · · · · · · · · · · · · ·	•	3 Filer ID (Ethics Commission Filers)			
-	Sch: 9/19 Rpt: 37/49		Nueces County Democratic Executive Committee (CEC)     00015946					
4	Date 02/25/2024		Payee name ActBlue					
6	Amount (\$) \$1.59		Payee address; City; State; Zip C 366 Summer Street Sommerville, MA 02144	ode				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fee			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office so	ught	Office held			
	Date		Payee name					
	03/11/2024		Amazon					
	Amount (\$) \$222.60		Payee address; City; State; Zip C 410 Terry Ave N	ode				
	PURPOSE OF EXPENDITURE	<u> </u>	Seattle , WA 98109 Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 2 Office Chairs			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office so	ught	Office held			
	Date		Payee name					
	03/19/2024		Amazon					
	Amount (\$) \$25.88		Payee address; City; State; Zip C 410 Terry Ave N	ode				
			Seattle , WA 98109	1				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office so	ught	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	r - I Com	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nittee Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	· · ·		•	3	Filer ID (Ethics Commission Filers)		
-	Sch: 10/19 Rpt: 38/49						00015946		
4	Date	5 F	Payee name						
	03/19/2024		Amazon						
6	Amount (\$)	<b>7</b> F	Payee address; City; State	; Zip Co	de				
	\$45.98	2	10 Terry Ave N						
			Seattle , WA 98109						
8	PURPOSE	(a) (	Category (See Categories listed at the top of this sch	a a dula)	(b) Description				
-	OF		Event Expense	nedule)	-	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin	, TX	, officeholder living expense		
					County Conv	ent	tion Supplies		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ŋht		Office held		
	Date	F	Payee name						
	06/24/2024	E	BlueHost						
	Amount (\$)	F	Payee address; City; State	; Zip Co	de				
	\$37.17		L958 South 950 East						
			Provo, UT 84606						
PURPOSE OF EXPENDITURE			Category (See Categories listed at the top of this sch Advertising Expense	nedule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	Jht		Office held		
	Date	F	Payee name						
	06/13/2024		Campaign Verify						
	Amount (\$)	F	Payee address; City; State	; Zip Co	de				
	\$95.00	F	PO BOX 3554						
		١	Washington , DC 20007-9998						
	PURPOSE OF		Category (See Categories listed at the top of this sch	nedule)	(b) Description				
	EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	jht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expen Travel in District Travel Out of District OTHER (enter a category not listed above)	se		
1	Total pages Schedule F1:	2	FILER NAME			<b>3</b> Filer ID (Ethics Commission F	ilers)		
	Sch: 11/19 Rpt: 39/49		Nueces County Democratic Executive Co	ommitte	e (CEC)	00015946	,		
4	Date	5	Payee name						
	02/26/2024		Constant Contact						
6	Amount (\$)	7	Payee address; City; State; 2	Zip Coc	е				
	\$81.02		Reservoir Place						
			1601 Trapelo Road						
			Waltham, MA 02451						
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedu		b) Description				
-	OF	,	Advertising Expense	uie)	·	l outside of Texas. Complete Schedule T.			
	EXPENDITURE					n, TX, officeholder living expense			
					email				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offi	fice soug	ht	Office held			
	Date		Payee name						
	03/25/2024		Constant Contact						
	Amount (\$)	┢	Payee address; City; State; Z	Zip Coc	e				
	\$81.02		Reservoir Place						
	<b>40110</b>								
			1601 Trapelo Road						
			Waltham, MA 02451						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	ule)	b) Description				
	EXPENDITURE		Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
					email	.,,			
	Complete <u>ONLY</u> if direct		Candidate/Officeholder name Offi	fice soug	ht	Office held			
	expenditure to benefit C/OI								
	Date		Payee name						
	04/24/2024		Constant Contact						
	Amount (\$)		Payee address; City; State; Z	Zip Coc	е				
	\$81.02		Reservoir Place						
			1601 Trapelo Road						
			Waltham, MA 02451						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule)	b) Description				
	OF		Advertising Expense			outside of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Austin	n, TX, officeholder living expense			
					email				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Offi	fice soug	ht	Office held			
	,								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Ex Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)	
	Sch: 12/19 Rpt: 40/49		Nueces County Democratic Executive	Committ	ee (CEC)	-	00015946	
4	Date		Payee name		. ,			
	05/24/2024		Constant Contact					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$81.02		Reservoir Place					
			1601 Trapelo Road					
			Waltham, MA 02451					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Advertising Expense	,		outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE					, тх	officeholder living expense	
					email			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held	
	Date		Payee name					
	03/24/2024		Constant Contact					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$81.02		Reservoir Place					
			1601 Trapelo Road					
			Waltham, MA 02451					
_	PURPOSE				(b) Description			
	OF		Category (See Categories listed at the top of this sche Advertising Expense	edule)	·	outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE				Check if Austin	, тх	officeholder living expense	
					email			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght		Office held	
	Date		Payee name					
	03/22/2024		Gulf Coast Mailing & Printing					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$664.93		PO BOX 9312	1				
			Corpus Christi, TX 78469					
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Event Expense				de of Texas. Complete Schedule T.	
							officeholder living expense ion Program Book	
					County Conv	CIII		
-	Complete ONLY if direct	Ļ	andidate/Officeholder name C	Office sou	aht		Office held	
	expenditure to benefit C/OI			111CE 200	Jur			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME 3	Filer ID (Ethics Commission Filers)					
	Sch: 13/19 Rpt: 41/49	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date	Payee name						
	03/22/2024	Gulf Coast Mailing & Printing						
6	Amount (\$) \$105.54	Payee address; City; State; Zip Code PO BOX 9312 Corpus Christi, TX 78469						
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description						
Ū	OF	Event Expense	side of Texas. Complete Schedule T. K, officeholder living expense Ition Printing					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/25/2024	Herrejon's Bakery						
	Amount (\$) \$62.39	Payee address;City;State;Zip Code3829 Crosstown Expy						
		Corpus Christi, TX 78415						
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense Ition Breakfast					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/25/2024	Home Depot #6584						
	Amount (\$) \$43.25	Payee address;City;State; Zip Code5041 S. Padre Island Dr						
		Corpus Christi, TX 78411						
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

Advertising Expense Accounting/Banking

Consulting Expense

Credit Card Payment

1

8

9

Date

Date

03/25/2024

Amount (\$)

PURPOSE

OF

EXPENDITURE

02/26/2024

Amount (\$)

PURPOSE

OF

EXPENDITURE

4 Date

06/13/2024

PURPOSE

OF

EXPENDITURE

6 Amount (\$)

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 14/19 Rpt: 42/49 Nueces County Democratic Executive Committee (CEC) 00015946 5 Payee name Liberty Mutual Insurance Payee address; City; State; Zip Code \$600.00 9450 Seward Road Fairfield, OH 45014-5456 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense Check if Austin, TX, officeholder living expense Liability Insurance Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Lopez Broadcasting Payee address; City; State; Zip Code \$1,000.00 2209 NPID Corpus Christi, TX 78408 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense Check if Austin, TX, officeholder living expense Radio Ads Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Mi Casita Payee address: City; State; Zip Code \$191.60 2033 Airline Rd Corpus Christi, TX 78412 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Event Expense Check if Austin, TX, officeholder living expense

Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

Office sought

**County Convention Breakfast** 

Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)					
-	Sch: 15/19 Rpt: 43/49	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date 03/22/2024	Payee name Office Depot						
6	Amount (\$) \$541.96	7 Payee address; City; State; Zip Code 1737 S Staples St Corpus Christi, TX 78404						
8	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/12/2024	Reliant Energy						
	Amount (\$) \$66.16	Payee address; City; State; Zip Code PO Box 650475 Dallas, TX 75265-0475						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	04/12/2024	Reliant Energy						
	Amount (\$) \$82.61	Payee address;City;State;Zip CodePO Box 650475						
		Dallas, TX 75265-0475						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Fees         Office Overhaed/Rental Expense         Transportation Equipment & Travel in District           -         Gift/Awards/Memorials Expense         Polling Expense         Travel ou tof District						
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 16/19 Rpt: 44/49		Nueces County Democratic Executiv	ve Commit	tee (	CEC)		00015946	
4	Date	5	Payee name						
	05/09/2024		Reliant Energy						
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	ode				
	\$62.56		PO Box 650475						
			Dallas, TX 75265-0475						
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T.	
						Check if Austin,	, TX,	officeholder living expense	
						electric			
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l Iaht			Office held	
	expenditure to benefit C/OF				9				
⊨	Date		Payee name						
	05/30/2024		Reliant Energy						
⊢	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode				
\$83.99 PO Box 650475									
	+00.00								
			Dallas, TX 75265-0475						
	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.					
							, TX,	officeholder living expense	
						electric			
┝	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht			Office held	
	expenditure to benefit C/OF				9				
F	Date		Payee name						
	03/04/2024		Stellar Point						
	Amount (\$)	$\vdash$	Payee address; City; Sta	ate; Zip Co	ode				
	\$1,000.00		6102 Ayers						
			Suite 106						
			Corpus Christi, TX 78415						
_	PURPOSE	(2)	-		(h)	Description			
	OF	(a)	Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedule)	(0)		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Once Overhead/Kental Expense					officeholder living expense	
						rent			
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ight			Office held	
L	expenditure to benefit C/OF								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 EII				2	Filer ID (Ethics Commission Filers)	
Ľ	Sch: 17/19 Rpt: 45/49		ueces County Democratic Executive (	Committe	ee (CEC)		00015946	
4	Date		ayee name		( )			
-	04/01/2024		ellar Point					
6	Amount (\$)	<b>7</b> Pa	ayee address; City; State;	Zip Co	le			
	\$1,000.00	61	L02 Ayers					
		Sı	uite 106					
		С	orpus Christi, TX 78415					
8	PURPOSE	(a) Ca	ategory (See Categories listed at the top of this sche	edule)	(b) Description			
			ffice Overhead/Rental Expense	cuulc)		outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE				Check if Austin	I, TX	, officeholder living expense	
					rent			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name O	office sou	Jht		Office held	
	Date	Pa	ayee name					
	05/03/2024	St	ellar Point					
⊢	Amount (\$)	Pa	ayee address; City; State;	Zip Co	le			
\$1,000.00 6102 Ayers								
	+_,000.00		uite 106					
			orpus Christi, TX 78415					
	PURPOSE OF		Ategory (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE	Office Overhead/Rental Expense						
					rent			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholder name O	)ffice sou	Jht		Office held	
	Date	Pa	ayee name					
	06/01/2024		ellar Point					
_	Amount (\$)	Pa	ayee address; City; State;	Zip Co	le			
	\$1,000.00		LO2 Ayers	p 000				
	+_,000.00		uite 106					
			orpus Christi, TX 78415					
			-	i				
	PURPOSE OF		(See Categories listed at the top of this sche	edule)	(b) Description	outo	ida of Taylog, Complete Sebedule T	
	EXPENDITURE	O	ffice Overhead/Rental Expense				ide of Texas. Complete Schedule T. , officeholder living expense	
					rent	,	,	
⊢	Complete ONLY if direct	Car	ndidate/Officeholder name O	Office soug	iht		Office held	
	expenditure to benefit C/Oł		· · · · · · · · · · · · · · · · · · ·		, -			
⊢								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)					
	Sch: 18/19 Rpt: 46/49	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date	5 Payee name						
	04/01/2024	Texas Secretary of State						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$750.00	P.O. Box 12060						
		Austin, TX 78711						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Primary Fund	side of Texas. Complete Schedule T.					
			X, officeholder living expense					
		Sulpius Repay	ment for 2022 Primary					
	Complete ONIL V if direct	Candidate/Officeholder name Office sought	Office hold					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Office held					
	Date	Payee name						
	02/26/2024	Texas Secretary of State						
⊢	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,000.00	P.O. Box 12060						
		Austin, TX 78711						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense					
			ment for 2022 Primary					
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OF							
	Date	Payee name						
	06/20/2024	The Print Shop						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$974.25	3906 S. Jackson Rd						
		Edingburg, TX 78539						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		side of Texas. Complete Schedule T.					
		Signs	X, officeholder living expense					
	ſ	Signs						
⊢	Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OF		Childe Hold					
⊢								

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURE CA Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expens Legal Services The Instruction Guide ex	Loan Rep Office Ov Polling Ex Se Printing E Salaries/V	ayment/Reimbursement erhead/Rental Expense spense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Tatal names Cabadula E1.				• • • • • •	3 Filer ID (Ethics Commission Filers)		
1	Total pages Schedule F1: Sch: 19/19 Rpt: 47/49		FILER NAME3Filer IDNueces County Democratic Executive Committee (CEC)00015946					
4	Date	5 Pavee nam	•					
-	04/12/2024	5 Payee nam Twisted D						
6	Amount (\$)	7 Payee add	ess; City;	State; Zip Co	ode			
	\$628.68	243 S Cor	nmercial St suite a					
		Aransas F	Pass, TX 78336					
8	PURPOSE	(a) Category	(See Categories listed at the top o	of this schedule)	(b) Description			
	OF		g Expense	,		outside of Texas. Complete Schedule T.		
	EXPENDITURE		5 1		Check if Austin	n, TX, officeholder living expense		
					Step and Re	peat		
9	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	ight	Office held		
	Date	Payee nam	е					
	04/27/2024	Wechsler,	Sharon					
	Amount (\$)	Payee add		State; Zip Co	do			
		-		State, Zip Ct	Jue			
	\$40.00	6741 Sha	rks Ct.					
		Corpus Cl	nristi, TX 78414		-			
	PURPOSE	(a) Category	(See Categories listed at the top o	of this schedule)	(b) Description			
	OF EXPENDITURE	Salaries/V	Vages/Contract Labor			outside of Texas. Complete Schedule T.		
						n, TX, officeholder living expense		
					Phone banki	ng		
	Complete ONLY if direct		fficeholder name	Office sou	ıght	Office held		
	expenditure to benefit C/OI	4						
-								

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	The Instruction Guide explains how to complete this form.       1 Total pag         Sch: 1/2								
2	FILER NAME			3		D (Ethics Commission F	-ilers)			
	Nueces Cou	nty	Democratic Executive Committee (CEC)		0001					
4	Date	5	Name of person from whom amount is received	1		8 Amount (\$)				
	02/29/2024		Nueces County Democratic Primary				\$39.39			
		6	Address of person from whom amount is received; City; State; Zip Code			.				
			Corpus Christi, TX 78415							
		7	Purpose for which amount is received Check if p	ooliti	cal con	tribution returned to filer				
			30% of Utilities							
F	Date	F	Name of person from whom amount is received			Amount (\$)				
	03/29/2024		Nueces County Democratic Primary				\$38.95			
			Address of person from whom amount is received; City; State; Zip Code							
		L	Corpus Christi, TX 78415							
				ooliti	cal con	tribution returned to filer				
		L	30% of Utilities			*				
	Date		Name of person from whom amount is received			Amount (\$)				
	04/29/2024		Nueces County Democratic Primary				\$43.88			
			Address of person from whom amount is received; City; State; Zip Code							
			Corpus Christi, TX 78415							
		┢	· · · · · · · · · · · · · · · · · · ·	ooliti	cal con	I tribution returned to filer				
			30% Utilities	-						
	Date	┢	Name of person from whom amount is received			Amount (\$)				
	05/06/2024		Nueces County Democratic Primary				\$37.84			
			Address of person from whom amount is received; City; State; Zip Code			•				
		L	Corpus Christi, TX 78415							
				ooliti	cal con	tribution returned to filer				
			30% of Utilities							
	Date		Name of person from whom amount is received			Amount (\$)				
	02/29/2024		Nueces County Democratic Primary			\$	\$300.00			
			Address of person from whom amount is received; City; State; Zip Code							
			Corpus Christi, TX 78415							
		┝		- 1;+;	-1 - 0 - 0	· '' ution not unred to filor				
			Purpose for which amount is received Check if p 30% of Rent	Oliti	Cal Con	tribution returned to filer				
┡			30% 01 Relit							

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	The Instruction Guide explains how to complete this form. 1 Total pag Sch: 2/2							
2	FILER NAME		3 File	er ID (Ethics Commission	n Filers)				
	Nueces Cou	nty Democratic Executive Committee (CEC)	00	015946					
4	Date	5 Name of person from whom amount is received		8 Amount (\$)					
	03/05/2024	Nueces County Democratic Primary			\$300.00				
		6 Address of person from whom amount is received; City; State; Zip Code							
		Corpus Christi, TX 78415							
		7 Purpose for which amount is received Check if p	olitical c	contribution returned to file	r				
		30% of Rent							
F	Date	Name of person from whom amount is received		Amount (\$)					
	03/25/2024	Nueces County Democratic Primary			\$541.96				
		Address of person from whom amount is received; City; State; Zip Code							
		Corpus Christi, TX 78415							
		Purpose for which amount is received Check if p	olitical c	contribution returned to file	r				
		Office Supplies (Ink)							
	Date	Name of person from whom amount is received		Amount (\$)					
	04/11/2024	Nueces County Democratic Primary			\$300.00				
		Address of person from whom amount is received; City; State; Zip Code							
		Corpus Christi, TX 78415							
		Purpose for which amount is received Check if p	olitical c	contribution returned to file	r				
		30% of Rent							
	Date	Name of person from whom amount is received		Amount (\$)					
	05/06/2024	Nueces County Democratic Primary			\$300.00				
		Address of person from whom amount is received; City; State; Zip Code							
		Corpus Christi, TX 78415							
			olitical c	contribution returned to file	r				
		30% of Rent							
	Date	Name of person from whom amount is received		Amount (\$)					
	05/29/2024	Nueces County Democratic Primary			\$222.60				
		Address of person from whom amount is received; City; State; Zip Code							
		Corpus Christi, TX 78415							
		_ ·	olitical c	contribution returned to file	r				
		Office Supplies							