CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete		1 Filer ID (Ethics Commit 00065230		2 Total pages fil	ed: 2
3 CANDIDATE /	MS / MRS / MR F	IRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	The Honorable T	erry			Date Received ELECTRONICA	ALLY FILED
	NICKNAME L	 .AST		SUFFIX	07/15/2024	
	С	Canales				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / S	SUITE #; CITY	Υ;	ZIP CODE	Date Hand-delivered or	r Date Postmarked
MAILING ADDRESS	310 S. Closner Blvd				Receipt #	Amount
Change of Address	Edinburg, TX 78539					
	Lambarg, 17(10000				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FI	IRST		MI	<u></u>	
TREASURER NAME	Mrs. E	rica E.				
	NICKNAME LA	 AST		SUFFIX		
		anales				
6 CAMPAIGN	CTDEET ADDDEEC (NO DO DO		A D-	LOUITE # CITY	· CTA	ATE; ZIP CODE
TREASURER ADDRESS	STREET ADDRESS (NO PO BO 310 S. Closner Blvd.	JA PLEASE),	AP	T / SUITE #; CITY	; STA	ATE, ZIP CODE
(Residence or Business)	Edinburg, TX 78539					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER PHONE	(956) 605-0836	NOMBER E	XTENOION			
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after car	
	X July 15	8th day before e	election	Exceeded modified	appointment (office Final Report (Atta	
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	ROUGH	06/30/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pr	imary	Runoff	Other	
		Ge	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	Γ (if known)	
32 311182	State Representative District	t 40		State Represen		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 32

13 C / OH NAME	Canales, Terry (The I	Honorable)	14 Filer ID 00065230	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made without officeholders are required to report this informat	it the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 46,600.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 94,508.89
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 551,440.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required t	
		The Ho	onorable Terry Canales	S
		Signature	of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				JVE	3 of 32
	ER NAN	(Ethi	cs Commission Filers)		
		E SUBTOTALS	00065230	l	
		SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	46,600.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	_
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	71,017.72
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	21,716.91
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,774.26
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/32		
2	FILER NAME Canales, Te	rry (The Honorable)		3	Filer ID (Ethics Commission 00065230	n Filers)
4	Date 02/21/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_		Dallas, TX 75240				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Border Health PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$	10,000.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions)		
	•	,	. , (
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_ COPART INC. PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75254				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Caterpillar Inc PAC Contributor address; City; State; Zip Code Irving, TX 75039)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/10/2024	Full name of contributor x out-of-state PAC (ID#: Comcast Corporation & NBCUNIVERSAL PAC Contributor address; City; State; Zip Code philadelphia, PA 19103	C00248716)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/32	
2	FILER NAME Canales, Ter	ry (The Honorable)		3	Filer ID (Ethics Commission 00065230	on Filers)
4	Date 04/02/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_		Oklahoma City, OK 73102-5010				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 02/21/2024	Full name of contributor out-of-state PAC (ID#:_ Friends of UNT PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75380				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/15/2024	Full name of contributor X out-of-state PAC (ID#: C General Motors Company Political Action Comm Contributor address; City; State; Zip Code	ittee (GM PAC)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Washington, DC 20001 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/21/2024	Full name of contributor	DATE COMMITTEE		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ K&L Gates LLP Contributor address; City; State; Zip Code Dallas, TX 75201)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/32		
2	FILER NAME Canales, Ter	ry (The Honorable)		3	Filer ID (Ethics Commission 00065230	on Filers)
4	Date 02/21/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
•	Dringing oggu	Dallas, TX 75201	• Employer (Con Instructions			
ð	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 02/21/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/03/2024	Full name of contributor x out-of-state PAC (ID#: CLKQ Corporation Employee Good Government F	und		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20003 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/21/2024	Full name of contributor out-of-state PAC (ID#:_ McGuire Woods Federal Pac Fund Gateway Pla: Contributor address; City; State; Zip Code Richmond, VA 23219			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#:_ POLITICAL ACTION COMMITTEE FOR ENGINE Contributor address; City; State; Zip Code austin, TX 78768-2145			Amount of Contribution (\$)	\$850.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/32		
2	FILER NAME Canales, Te	ry (The Honorable)		3	Filer ID (Ethics Commission 00065230	on Filers)
4	Date 01/04/2024	 Full name of contributor	000039321)	7	Amount of Contribution (\$)	\$1,000.00
_	<u> </u>	Purchase, NY 10577				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 01/04/2024	Full name of contributor	00361758)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	washington, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/04/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS DAIRYMEN PAC Contributor address; City; State; Zip Code Austin, TX 78711			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/16/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS RURAL WATER PAC Contributor address; City; State; Zip Code AUSTIN, TX 78701-1122)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/31/2024	Full name of contributor out-of-state PAC (ID#:_ TREPAC/Texas Association of Realtors Political Contributor address; City; State; Zip Code Austin, TX 78768			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/32	
2	2 FILER NAME Canales, Terry (The Honorable)		3	Filer ID (Ethics Commission 00065230	on Filers)	
4	Date 02/08/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_	5	Austin, TX 78766				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 02/21/2024	Full name of contributor out-of-state PAC (ID#: Tex-Pipe PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	.)		
	i illopai occa	sation, oob title (oce monactions)	Employer (See manacions	')		
	Date 02/21/2024	Full name of contributor out-of-state PAC (ID#:_ Texas American Federation of Teachers Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78741				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/25/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Sands PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ USAA Employee Political Action Committee Contributor address; City; State; Zip Code San Antonio, TX 78288)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUI	E A1
	The Instruction Guide explains how to complete this form.			1 Total pages Sch: 6/6 R		
2	FILER NAME Canales, Te	rry (The Honorable)		3 Filer ID (E 00065230		on Filers)
4	Date 04/16/2024	Full name of contributor		7 Amount of C	contribution (\$)	\$2,000.00
		Washington, DC 20005				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruction	ns)		
	Date 02/21/2024	Full name of contributor out-of-state PAC (I Zachry Corporation PAC Contributor address; City; State; Zip Code	D#:)	Amount of C	Contribution (\$)	\$1,000.00
	Principal occu	San Antonio, TX 78265 upation / Job title (See Instructions)	Employer (See Instruction	ns)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mplete 1	this form.	
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission File	ers)
	Sch: 1/17 Rpt: 10/32	Canales, Terry (The Honorable)		00065230	
4	Date	5 Payee name			
	02/06/2024	7-Eleven			
6	Amount (\$)	7 Payee address; City; State; Zip Co	de		
	\$31.50	1415 E University Dr			
		Edinburg, TX 78539			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE			Check if Austin, TX, officeholder living expense	
			G	as for staff travel for state work	
Ļ	0 1 0 0 1 1 1 1 1			000	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	gnt	Office held	
	•				
	Date	Payee name			
	01/12/2024	Alvarado, Donaciano			
	Amount (\$)	Payee address; City; State; Zip Co	de		
	\$200.00	1306 Dove Lane			
		La Villa, TX 78562			
-	DUDDOOF	(a) a			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
	OF	Contributions/Donations Made By	(b) De	Check if travel outside of Texas. Complete Schedule T.	
				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF	Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	El	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA Cookoff	
	OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sou	El	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sou	El	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA Cookoff	
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south	El	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA Cookoff	
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express	El	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA Cookoff	
-	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 01/12/2024 Amount (\$)	Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express Payee address; City; State; Zip Co	El	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA Cookoff	
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express	El	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA Cookoff	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 01/12/2024 Amount (\$)	Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express Payee address; City; State; Zip Co. PO Box 650448	El	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA Cookoff	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 01/12/2024 Amount (\$) \$2,118.21	Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express Payee address; City; State; Zip Co	ght de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sa Cookoff Office held	
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 01/12/2024 Amount (\$) \$2,118.21	Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express Payee address; City; State; Zip Composition Political Committee Dallas, TX 75265-0448 (a) Category (See Categories listed at the top of this schedule)	ght de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sa Cookoff Office held escription	
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 01/12/2024 Amount (\$) \$2,118.21	Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express Payee address; City; State; Zip Composition Policies State; Delian, TX 75265-0448	ght de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA COOKOFF Office held Description Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 01/12/2024 Amount (\$) \$2,118.21 PURPOSE OF	Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express Payee address; City; State; Zip Composition Political Committee Dallas, TX 75265-0448 (a) Category (See Categories listed at the top of this schedule)	ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sa Cookoff Office held escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 01/12/2024 Amount (\$) \$2,118.21 PURPOSE OF	Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express Payee address; City; State; Zip Composition Political Committee Dallas, TX 75265-0448 (a) Category (See Categories listed at the top of this schedule)	ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA COOKOFF Office held Description Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 01/12/2024 Amount (\$) \$2,118.21 PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Candidate/Officeholder name Office south Payee name American Express Payee address; City; State; Zip Composition Policies State; Zip Composition	ght (b) De	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA COOKOFF Office held escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense redit Card Payment	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 01/12/2024 Amount (\$) \$2,118.21 PURPOSE OF	Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name American Express Payee address; City; State; Zip Corp. PO Box 650448 Dallas, TX 75265-0448 (a) Category (See Categories listed at the top of this schedule) Credit Card Payment Candidate/Officeholder name Office sou	ght (b) De	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sa Cookoff Office held escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 01/12/2024 Amount (\$) \$2,118.21 PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name American Express Payee address; City; State; Zip Corp. PO Box 650448 Dallas, TX 75265-0448 (a) Category (See Categories listed at the top of this schedule) Credit Card Payment Candidate/Officeholder name Office sou	ght (b) De	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA COOKOFF Office held escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense redit Card Payment	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 01/12/2024 Amount (\$) \$2,118.21 PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name American Express Payee address; City; State; Zip Corp. PO Box 650448 Dallas, TX 75265-0448 (a) Category (See Categories listed at the top of this schedule) Credit Card Payment Candidate/Officeholder name Office sou	ght (b) De	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SA COOKOFF Office held escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense redit Card Payment	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	Tatal manua C. L. L. T.	,
1	Total pages Schedule F1:	
	Sch: 2/17 Rpt: 11/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	04/26/2024	American Express
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6,962.79	PO Box 650448
	, , , , , ,	
		Dollac TV 75265 0440
		Dallas, TX 75265-0448
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
		Great Sala Laymont
<u>_</u>	Complete ONLY !! -!!	Condidate/Officeholder name
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	06/24/2024	American Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$16,639.60	PO Box 650448
		Dallas, TX 75265-0448
	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	Date 02/15/2024	Payee name Boys and Girls Club
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	702 Cullen St.
		Edinburg, TX 78541
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	By - Gift/Awards/Memorials Expense Printing Expense Travel C	n District Dut of District t (enter a category not listed above)
1	Total pages Schedule F1:		
	Sch: 3/17 Rpt: 12/32	Canales, Terry (The Honorable) 00069	5230
4	Date	5 Payee name	
	04/16/2024	Brooks County Fair Association	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$6,000.00	P. O. Box 835	
		Falfurrias, TX 78355	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texact Committee Check if Austin, TX, officeholder/Political Committee	
		Candidate/Officeholder/Political Committee	
9	Complete ONLY if direct expenditure to benefit C/O		ffice held
_	Date	Payee name	
	04/24/2024	Cantu, Victoria	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,000.00		
	DUDDOG	Palmview, TX 78572	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Tex	xas, Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Tex Check if Austin, TX, officehol	
		GOTV	
	Complete ONLY if direct expenditure to benefit C/O		ffice held
	Date	Payee name	
	04/17/2024	Carrera, Mike	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,500.00	135 Paseo del Prado	
		Edinburg, TX 78541	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Tex	·
		Check if Austin, TX, officehol	nnei iiviiii exhelise
	Complete ONLY if direct	Candidate/Officeholder name Office sought O	ffice held
	expenditure to benefit C/O		

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
-	Sch: 4/17 Rpt: 13/32	Canales, Terry (The Honorable) 00065230		
4	Date	5 Payee name		
	06/16/2024	Edcouch Elsa ISD		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$1,000.00	P.O. Box 127		
		Edcouch, TX 78538		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By		
		Candidate/Officeholder/Political Committee		
		Donation to Support Edcouch-Elsa Mariachi Juvenil Azteca		
Ļ				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	04/11/2024	Edcouch Elsa ISD		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$1,250.00	P.O. Box 127		
		Edcouch, TX 78538		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.		
		Candidate/Officeholder/Political Committee		
		Donation		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·		
-	Date	Payros namo		
	03/18/2024	Payee name Edinburg Housing Authority		
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 910 Sugar Rd		
	\$500.00	910 Sugai Ru		
		Ediahura TV 70520		
		Edinburg, TX 78539		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made Ry Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Donation for Easter Egg Hunt		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total pages Cabadula 54:	<u> </u>	_
	Total pages Schedule F1:		
L	Sch: 5/17 Rpt: 14/32	Canales, Terry (The Honorable) 00065230	
4	Date	5 Payee name	
	05/03/2024	Edinburg North Boys Soccer	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	3101 N. Closner Blvd.	
		Edinburg, TX 78541	
<u>_</u>	DUDDOCE		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Donation to support High School Soccer Team	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
L			_
	Date	Payee name	
	05/01/2024	Edinburg Professional Association Local 4873	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.00	PO Box 1495	
		Edinburg, TX 78540	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee	
		Tible Sign Sponsor for Fundraiser	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office accurate	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
L	•		
	Date	Payee name	
	03/20/2024	Esquivel, O.J.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,000.00	PO Box 1633	
		Edinburg, TX 78540	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee Campaign Paperties	
		Campaign Donation	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	CAPETIGITATE TO DETICITE C/OF		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/17 Rpt: 15/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	04/23/2024	Hidalgo Forward
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	709 Ramon Ayala Dr.
		Hidalgo, TX 78557
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		GOTV
_	Computate ONLY if direct	Constitute / Office helder no year.
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H
_		
	Date	Payee name
	02/06/2024	Hobby Lobby
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.96	7600 N. 10th, Bldg 300
		McAllen, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Framing for resolutions
		Training for resolutions
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	03/19/2024	Hobby Lobby
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.30	7600 N. 10th, Bldg 300
	φ30.30	7000 N. 10th, Blug 300
		MoAllon TV 79704
		McAllen, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Flag frames
		Flag frames
	Complete ONLY if direct	Flag frames Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
		Candidate/Officeholder name Office sought Office held
		Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/17 Rpt: 16/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	04/29/2024	Ibarra, Celinda
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3409 East Efrain St.
		Edinburg, TX 78542
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/26/2024	Lone Star Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.00	117 S 10th Ave.
		Edinburg , TX 78539
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Chargeback fees
		Charges act 1666
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	01/19/2024	Mailbox Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.28	2112 W. University Dr
	φυ.20	ZIIZ W. OHIVGISILY DI
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Mailing to Constiuents Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mailing to Constiuents
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	expenditure to beliefft C/Of	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula 51:	1
1	Total pages Schedule F1:	
	Sch: 8/17 Rpt: 17/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
L	02/28/2024	Margarita's Flower Shop
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$235.45	901 E. Cano
		Edinburg, TX 78539
8	PURPOSE	1
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Flowers for constituent funeral
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash	Date	Payee name
	02/26/2024	Martinez, Eduardo
		· ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1708 Ann St.
L		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
L	Opening Chilly III	Open districts (Office the Island as a second secon
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
L	01/22/2024	Matamoros, Aaron
	Amount (\$)	Payee address; City; State; Zip Code
	\$255.00	2804 Hart St.
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation Girl Scouts
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/17 Rpt: 18/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	01/26/2024	Nation Builder
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$240.00	520 S Grand Ave., 2nd Floor
		Los Angeles, TX 90071
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	02/26/2024	Nation Builder
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	520 S Grand Ave., 2nd Floor
		Los Angeles, TX 90071
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website fees
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
H	Date	Payee name
	03/25/2024	Nation Builder
	Amount (\$) \$240.00	Payee address; City; State; Zip Code 520 S Grand Ave., 2nd Floor
	φ240.00	320 3 Glatia Ave., Zila Flooi
		Los Angeles, TX 90071
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Website Fee (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Website Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/17 Rpt: 19/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	04/25/2024	Nation Builder
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$265.10	520 S Grand Ave., 2nd Floor
		Los Angeles, TX 90071
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website Fee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/28/2024	Nation Builder
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	520 S Grand Ave., 2nd Floor
	φ240.00	320 S Giana Ave., 2na Flooi
		Las Appelas TV 00074
		Los Angeles, TX 90071
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/25/2024	Nation Builder
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	520 S Grand Ave., 2nd Floor
	,=	
		Los Angeles, TX 90071
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Website hosting Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Website hosting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 11/17 Rpt: 20/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
L	04/22/2024	Nino, Luis
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	919 E. Lovett
		Edinburg, TX 78541
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		GOTV
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	01/05/2024	Ortega, Ricardo
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,143.00	PO Box 1401
		Premont, TX 78375
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/25/2024	Ortiz, Oralia
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	1005 W. Pike Blvd.
		Weslaco, TX 78596
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Manaon i antera i anaraser
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/17 Rpt: 21/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	06/04/2024	Pena, Luis
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	1708 Ann St.
		Edinburg, TX 78539
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Little League / iii ettale
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/17/2024	Quinta Mazatlan
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,500.00	600 Sunset Drive
		McAllen, TX 78503
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		1y . 6.660 2 6.6600.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/28/2024	RGV Womens Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	135 PASEO DEL PRADO AVE
	·	STE 62
		Edinburg, TX 78539
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Yearly Membership Fee
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	T		
1	Total pages Schedule F1:		
	Sch: 13/17 Rpt: 22/32	Canales, Terry (The Honorable) 00065230	
4	Date	5 Payee name	
	05/13/2024	Rocha, Armida	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	522 E. Sprague	
		Edinburg, TX 78535	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		Donation for Funeral Expenses	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	f e e e e e e e e e e e e e e e e e e e	
	Date	Payee name	
	02/22/2024	Rudy Zamorano campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	417 W. Southland Avenue	
		Edinburg, TX 78539	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		Campaign Contribution	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	1	
	Date	Payee name	
	06/03/2024	Saenz, Jaime	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$700.00	3911 N 10th St	
		STE J	
		McAllen, TX 78501	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Donation for Funeral Expenses	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

l	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 14/17 Rpt: 23/32	Canales, Terry (The Honorable)	00065230
4	Date	5 Payee name	
	02/29/2024	Saenz, Jaime	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$885.33	3911 N 10th St	
		STE J	
		McAllen, TX 78501	
8	PURPOSE OF	, , ,	Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Onicenoide// Oniteal Committee	Funeral Expenses
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	02/20/2024	Salazar, Gabriel	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	7123 Thrushview #37	
		San Antonio, TX 78209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	0 E		
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			Check if Austin, TX, officeholder living expense
	EXPENDITURE	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if Austin, TX, officeholder living expense Contract Work
	EXPENDITURE Complete ONLY if direct	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if Austin, TX, officeholder living expense Contract Work
_	Complete ONLY if direct expenditure to benefit C/O	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if Austin, TX, officeholder living expense Contract Work
	Complete ONLY if direct expenditure to benefit C/Ol	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought Payee name	Check if Austin, TX, officeholder living expense Contract Work
_	Complete ONLY if direct expenditure to benefit C/OhDate 04/28/2024	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought Payee name Smith, Curtis	Check if Austin, TX, officeholder living expense Contract Work
	Complete ONLY if direct expenditure to benefit C/OFDate 04/28/2024 Amount (\$)	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code	Check if Austin, TX, officeholder living expense Contract Work
	Complete ONLY if direct expenditure to benefit C/OFDate 04/28/2024 Amount (\$)	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code	Check if Austin, TX, officeholder living expense Contract Work
	Complete ONLY if direct expenditure to benefit C/Ol Date 04/28/2024 Amount (\$) \$2,000.00	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code 6600 Ranchito Drive Austin, TX 78744	Check if Austin, TX, officeholder living expense Contract Work
	Complete ONLY if direct expenditure to benefit C/OFDate 04/28/2024 Amount (\$) \$2,000.00 PURPOSE OF	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code 6600 Ranchito Drive Austin, TX 78744	Check if Austin, TX, officeholder living expense Contract Work Office held Description Check if travel outside of Texas. Complete Schedule T.
	Complete ONLY if direct expenditure to benefit C/Ol Date 04/28/2024 Amount (\$) \$2,000.00	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code 6600 Ranchito Drive Austin, TX 78744 (a) Category (See Categories listed at the top of this schedule)	Check if Austin, TX, officeholder living expense Contract Work Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OFDate 04/28/2024 Amount (\$) \$2,000.00 PURPOSE OF	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code 6600 Ranchito Drive Austin, TX 78744 (a) Category (See Categories listed at the top of this schedule)	Check if Austin, TX, officeholder living expense Contract Work Office held Description Check if travel outside of Texas. Complete Schedule T.
	Complete ONLY if direct expenditure to benefit C/OF Date 04/28/2024 Amount (\$) PURPOSE OF EXPENDITURE	Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code 6600 Ranchito Drive Austin, TX 78744 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense Contract Work Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Finance Work
	Complete ONLY if direct expenditure to benefit C/OFDate 04/28/2024 Amount (\$) \$2,000.00 PURPOSE OF	Candidate/Officeholder name Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code 6600 Ranchito Drive Austin, TX 78744 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if Austin, TX, officeholder living expense Contract Work Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF Date 04/28/2024 Amount (\$) \$2,000.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code 6600 Ranchito Drive Austin, TX 78744 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if Austin, TX, officeholder living expense Contract Work Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Finance Work
	Complete ONLY if direct expenditure to benefit C/OF Date 04/28/2024 Amount (\$) \$2,000.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Candidate/Officeholder name Payee name Smith, Curtis Payee address; City; State; Zip Code 6600 Ranchito Drive Austin, TX 78744 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if Austin, TX, officeholder living expense Contract Work Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Finance Work

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 15/17 Rpt: 24/32	Canales, Terry (The Honorable)	00065230
4	Date	5 Payee name	·
	02/08/2024	Stripes	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$27.30	721 N. Closner	
		Edinburg, TX 78541	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Gas for state travel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	04/04/2024	Sunoco Gas Station	
┢	Amount (\$)	Payee address; City; State; Zip Code	
	\$36.40	2900 W. Nolana	
		McAllen, TX 78504	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Gas in district travel
			ous in district traver
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	05/14/2024	Sunoco Gas Station	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.40	2900 W. Nolana	
		McAllen, TX 78504	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense gas for in district travel
			gas for in district traver
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/17 Rpt: 25/32	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	05/28/2024	Sunoco Gas Station
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$51.10	2900 W. Nolana
		McAllen, TX 78504
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense gas for in district travel
		gas for in district traver
_	Complete ONU V if alice	Condidate/Officeholder name Office south
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/19/2024	Walmart Super Center Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.90	2800 W Nolana Ave
		McAllen, TX 78504
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		office supplies
		Office Supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		
	Date	Payee name
	06/03/2024	Walmart Super Center Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.11	2800 W Nolana Ave
		McAllen, TX 78504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Picture frame for presentation
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
<u> </u>	T. 1 01 11 F4	· · · · · · · · · · · · · · · · · · ·	4			
1	Total pages Schedule F1:					
	Sch: 17/17 Rpt: 26/32	Canales, Terry (The Honorable) 00065230				
4	Date	5 Payee name				
	05/29/2024	Walmart				
6	Amount (\$)	7 Payee address; City; State; Zip Code	Π			
	\$72.79	2812 South Expressway 281				
		Edinburg, TX 78542				
Ļ	P. P. C.		4			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Office Supplies, cleaning products, etc				
		Office Supplies, clearing products, etc				
Ļ	Operation ONE VALUE	Our distance (Office de alcele an array of the annual to the control of the contr	_			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	The strategy of the strategy o					
	Date	Payee name				
	02/26/2024	White, David				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00	819 Park Cir				
		Edinburg, TX 78539				
	DUDDOCE		_			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if to use outside of Tayon Complete Schedule T				
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	Political Donation					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_			
	expenditure to benefit C/OI					
			_			
	Date	Payee name				
	05/19/2024	Worley Printing Co. Inc				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,800.20	3217 North IH 35				
		Austin, TX 78722	ſ			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	\dashv			
	OF	Printing Expense Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		High School Senior Graduation Certificates				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	H				
			٦			
			ļ			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission F				
Sch: 1/5 Rpt: 27/32	Canales, Terry (The	e Honorable)	00065230				
4 CREDIT CARD ISSUER	Name of financial institution American Express		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$71.92	03/28/2024	04/26/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Sidebar		215 East University Drive				
			Edinburg, TX 78539				
8 PURPOSE OF	(a) Category	of their color dullo	(b) Description				
EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Expe		Office Meeting				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$2,438.20	05/19/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
Atlantic Austin		4309 Emma Browning Ave					
			Austin, TX 78717				
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of		(b) Description Travel To Austin fo		e business			
X Political	Travel Out of District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		, officeholder living expense			
Complete ONLY if direct Candidate/Officeholder name Offi expenditure to benefit C/OH			e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$45.32	04/02/2024	04/26/2024				
PAYEE	(a) Payee name	ı	(b) Payee address;	City, State, Zip Code			
	Flying J Travel Center		1305 E Monte Cristo Rd				
			Edinburg, TX 78539				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Travel in District				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense

	Candidate/Officeriolder/Folitica	· ·	ruction Guide explains how	to complete this		TIEN (enter a category	not iisteu ai	bove)
1	Total pages Schedule F4:	· · · · · · · · · · · · · · · · · · ·			3 Filer ID (Ethics Commission Filers)			
-	Sch: 2/5 Rpt: 28/32	Canales, Terry (The	00065230			,		
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	EXPENDI [*]	UNITEMIZED TURES O TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$95.30	(b) Date of Charge 04/18/2024	(c) Date(s) C 06/24/2024	redit Card Issuer	Paid		
7	PAYEE	(a) Payee name Exxon Mobil		(b) Payee ad 4120 S. Bus Edinbrurg,	siness Hwy 28	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Travel in Di	n			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse	
9	•	Candidate/Officeholder	name Office	e sought		Office held		
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$86.94	(b) Date of Charge 05/10/2024	(c) Date(s) C	redit Card Issuer	[*] Paid		
	PAYEE	(a) Payee name Valero		(b) Payee ad 801 Closne Edinburg, T	r	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political		(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct Candidate/Officeholder name Office expenditure to benefit C/OH		e sought		Office held				
	PAYMENT	(a) Amount Charged \$672.39	(b) Date of Charge 05/21/2024	(c) Date(s) C	redit Card Issuer	⁻ Paid		
	PAYEE	(a) Payee name Double Tree Suites		(b) Payee ad 303 W 15th Austin, TX	St	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District		(b) Description	n	iness in Austin		
	Non-Political	(7)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
I								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete th	is form.	(*	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)
	Sch: 3/5 Rpt: 29/32	Canales, Terry (The	00065230					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	[·] Paid		
		\$600.00	04/22/2024					
7	PAYEE	(a) Payee name Professional Auto C	Collision	(b) Payee at 2805 W Bu	usiness 83	City,	State,	Zip Code
L		() 2 :		Weslaco,				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Work on bbq trailer ov		(b) Descripti Work on b	on bq trailer owned	l by Campaigr	1	
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
€	expenditure to benefit C/OH		-					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid		
		\$344.05	05/05/2024					
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
Junior's Supermarket		3621 N Cl	osner Blvd 7854	11				
				Edinburg,				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Food and Beverages for event				
	X Political	Food/Beverage Expe	nse					
L	Non-Political	()	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct Candidate/Officeholder name Offi expenditure to benefit C/OH			e sought		Office held			
	PAYMENT	(a) Amount Charged \$10,400.00	(b) Date of Charge 04/15/2024	(c) Date(s) (06/24/202	Credit Card Issuer 4	Paid		
	PAYEE	(a) Payee name South Texas Ag Ro	oundup - TX	(b) Payee a PO Box 19	939	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Descripti		nty 4-H and FF	-A membo	ers
L	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
6	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought		Office held		
H		L						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officenoider/Politica	-	ruction Guide explains how	•	HER (enter a category not listed above)
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 30/32	Canales, Terry (The	e Honorable)		00065230
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid
	\$1,800.00	04/24/2024		
7 PAYEE	(a) Payee name Savy Publishing		(b) Payee address; 1217 N Conway	City, State, Zip Code
	() 0-1		Mission, TX 78572	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	.~
X Political	Printing Expense	,	Campaign Material Printin	g
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held
expenditure to benefit C/OH			0 00 1.9	U
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid
	\$2,881.46	04/19/2024	06/24/2024	
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Barrel House Kitchen & Bar		1927 S Tourist Dr	
			Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description	
X Political			Food & Drinks for Event	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TY	officeholder living expense
Complete ONLY if direct	Candidate/Officeholder	i	e sought	Office held
expenditure to benefit C/OH	Kardoza, Karina		algo Appraisal District Place	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	(see previous)			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description	
Political				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held
expenditure to benefit C/OH	Canales, Erica	Hida	algo County Appraisal Distric	:t

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Candidate/Officeholder/Politica		ices	Salaries/Wages/Contract Labor	OTHER (enter a cat		oove)
	The Inst	ruction Guide explains h	ow to complete this form.			
1 Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME			3 Filer ID (E	Ethics Commiss	ion Filers)
Sch: 5/5 Rpt: 31/32	Canales, Terry (The	e Honorable)		00065230		
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMI			
ISSUER	America	n Express	EXPENDITURES CHARGED TO A CR	EDIT		
			CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid		
	\$2,281.33	04/24/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Patio On Guerra		116 S 17th St			
	Pallo On Guerra					
			McAllen, TX 78501			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
l <u>—</u>	Event Expense	or this schedule)	Food and Drinks for E	=vent		
X Political						
Non-Political	(1)	of Texas. Complete Schedule	<u> </u>	in, TX, officeholder living	expense	
9 Complete ONLY if direct			ce sought Office held			
expenditure to benefit C/OH	Canales, Erica		dalgo County Appraisal D			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Pald		
PAYEE	(a) Davisa nama		(h) Davisa addusasi	City	Ctata	Zin Codo
PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	(see previous)					
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top of this schedule)					
Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	Check if Aust	in, TX, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held		
expenditure to benefit C/OH	Cardoza, Karina	Hi	dalgo County Appraisal D	istrict		
	•					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 1/1 Rpt: 32/32 Canales, Terry (The Honorable) 00065230 Date Payee name 05/02/2024 Wiley, Jerry Amount (\$) Payee address; City; State; Zip Code \$874.26 2614 Sunset Blvd Reimbursement from political contributions Х intended Mission, TX 78574 (a) Category (See Categories listed at the top of this schedule) **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (b) Description OF Check if Austin, TX, officeholder living expense Travel Out of District **EXPENDITURE** Travel From Edinburg to San Antonio for Campaign **Purposes** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/09/2024 Wiley, Jerry Amount (\$) Payee address; City; State; Zip Code \$900.00 2614 Sunset Blvd Reimbursement from political contributions Χ Mission, TX 78574 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Travel Out of District **EXPENDITURE** Travel for Baytown for Campaign Purposes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Version V4.1.0.d378aba0