

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00061857	<b>2</b> Total pages filed:  49									
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Lyda A.	MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b> 07/15/2024								
	NICKNAME	LAST Ness-Garcia	SUFFIX									
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked								
	<b>REDACTED PER 254.0313, GOV'T CODE</b>			Receipt #								
				Amount								
				Date Processed								
				Date Imaged								
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR The Honorable	FIRST Lyda A.	MI									
	NICKNAME	LAST Ness-Garcia	SUFFIX									
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY; STATE; ZIP CODE								
	<b>REDACTED PER 254.0313, GOV'T CODE</b>											
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	(915) 920-1849								
<b>8</b> REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>				<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)
<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)									
<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)									
<b>9</b> PERIOD COVERED	Month Day Year 02/25/2024	THROUGH	Month Day Year 06/30/2024									
<b>10</b> ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special									
	<b>11</b> OFFICE OFFICE HELD (if any) District Judge Place El Paso District 383 El Paso		<b>12</b> OFFICE SOUGHT (if known)									

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 49

<b>13 C / OH NAME</b> Ness-Garcia, Lyda A. (The Honorable)	<b>14 Filer ID</b> (Ethics Commission Filers) 00061857
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	
	<input type="checkbox"/> SPECIFIC		
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,859.25
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	34,590.16
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	44,573.85
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFIDAVIT**

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

\_\_\_\_\_  
The Honorable Lyda A. Ness-Garcia  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**SUBTOTALS - JC/OH**

<b>18 FILER NAME</b> Ness-Garcia, Lyda A. (The Honorable)		<b>19 Filer ID</b> 00061857	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b>			<b>SUBTOTAL AMOUNT</b>
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	7,859.25
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	34,590.16
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	3,187.56
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/9 Rpt: 4/49
<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Kathleen (The Honorable)	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79902	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Kathleen Anderson		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
<b>Date</b> 05/09/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bacas, Charles	<b>Amount of Contribution (\$)</b> \$242.52
	<b>Contributor address; City; State; Zip Code</b>  York, PA 17404	
<b>Contributor's Principal Occupation</b> Political Consultant		<b>Contributor's Job Title</b> Retired
<b>Contributor's employer/law firm</b> Retired		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b> 05/23/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Robert	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  El Paso, TX 79912	
<b>Contributor's Principal Occupation</b> attorney		<b>Contributor's Job Title</b> Attorney
<b>Contributor's employer/law firm</b> Gordon Davis Johnson & Shane		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 2/9 Rpt: 5/49
2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061857
4 Date 05/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Claudio	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  El Paso, TX 79901	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Claudio Flores Attorney at Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilles, David	Amount of Contribution (\$)  \$200.00
	Contributor address; City; State; Zip Code  El Paso, TX 79901	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm David Hilles Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, Joe	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  El Paso, TX 79912	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Windle and Hood		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/9 Rpt: 6/49
<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) James Rey Attorneys at Law PC	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$1,000.00</span>
<b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79901		
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Law Office of Luis Yanez	Amount of Contribution (\$) <span style="float:right">\$500.00</span>
Contributor address; City; State; Zip Code  El Paso, TX 79901		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Law Office of Luis Yanez	Amount of Contribution (\$) <span style="float:right">\$250.00</span>
Contributor address; City; State; Zip Code  El Paso, TX 79901		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/9 Rpt: 7/49
<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Ruben Hernandez <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79902	<b>7</b> Amount of Contribution (\$)  \$750.00
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Ruben Hernandez <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79902	Amount of Contribution (\$)  \$350.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lerma, Veronica Teresa <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79902	Amount of Contribution (\$)  \$485.05
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Offices of Veronica Lerma		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 5/9 Rpt: 8/49
2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061857
4 Date 05/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linan, Claudia	7 Amount of Contribution (\$)  \$146.47
	6 Contributor address; City; State; Zip Code  El Paso, TX 79925	
8 Contributor's Principal Occupation Nurse		9 Contributor's Job Title Nurse
10 Contributor's employer/law firm Medical Aesthetics		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longoria, Delia Virginia	Amount of Contribution (\$)  \$150.00
	Contributor address; City; State; Zip Code  El Paso, TX 79912	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Attorney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mena, Gilbert D	Amount of Contribution (\$)  \$200.00
	Contributor address; City; State; Zip Code  El Paso, TX 79922	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Daniel Mena Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/9 Rpt: 9/49
<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palafox, Patricia <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79912	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Patricia Palafox		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Gabriel <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79902	Amount of Contribution (\$)  \$146.47
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Gabriel Perez		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinonez & Salayandia Law <hr/> Contributor address; City; State; Zip Code  EL Paso, TX 79936	Amount of Contribution (\$)  \$244.18
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 7/9 Rpt: 10/49
2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061857
4 Date 05/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha-Vanderpool, Siria	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code  El Paso, TX 79912	
8 Contributor's Principal Occupation Managing Partner		9 Contributor's Job Title Managing Partner
10 Contributor's employer/law firm Atlantis		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenbaum, Noel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  El Paso, TX 79912	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Joshua	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  El Paso, TX 79902	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Joshua Spencer		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 8/9 Rpt: 11/49
2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061857
4 Date 05/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stillinger, Mary	7 Amount of Contribution (\$)  \$200.00
	6 Contributor address; City; State; Zip Code  El Paso, TX 79902	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Offices of Stilling and Godinez		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Orlando	Amount of Contribution (\$)  \$150.00
	Contributor address; City; State; Zip Code  El Paso, TX 79902	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Orlando Torres Counselor at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voorhies, Kristina	Amount of Contribution (\$)  \$194.02
	Contributor address; City; State; Zip Code  Ft. Worth, TX 76110	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 9/9 Rpt: 12/49
2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061857
4 Date 05/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warrick, Melissa	7 Amount of Contribution (\$) \$195.33
	6 Contributor address; City; State; Zip Code  El Paso, TX 79901	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Romero & Warrick		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, John	Amount of Contribution (\$) \$145.51
	Contributor address; City; State; Zip Code  El Paso, TX 79901	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm John Williams Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Jan	Amount of Contribution (\$) \$9.70
	Contributor address; City; State; Zip Code  El Paso, TX 79912	
Contributor's Principal Occupation Retired		Contributor's Job Title Author
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# LOANS (JUDICIAL)

# SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 1/1 Rpt: 13/49
<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Lender's Principal Occupation		<b>13</b> Lender's Job Title
<b>14</b> Lender's Employer/Law Firm		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>19</b> GUARANTOR INFORMATION <input type="checkbox"/> not applicable	<b>20</b> Name of guarantor	<b>22</b> Amount Guaranteed (\$)
	<b>21</b> Guarantor address; City; State; Zip Code	
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is child, law firm of parent(s) (if any)		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/17 Rpt: 14/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 02/26/2024	<b>5</b> Payee name 787 Coffee	
<b>6</b> Amount (\$) \$5.00	<b>7</b> Payee address; City; State; Zip Code 2419 N. Stanton  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense coffee poll workers
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/05/2024	Payee name 787 Coffee	
Amount (\$) \$14.00	Payee address; City; State; Zip Code 2419 N. Stanton  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee for poll workers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/25/2024	Payee name Albertsons	
Amount (\$) \$130.66	Payee address; City; State; Zip Code 3100 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for volunteers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/17 Rpt: 15/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 03/04/2024	<b>5</b> Payee name Albertsons	
<b>6</b> Amount (\$) \$43.24	<b>7</b> Payee address; City; State; Zip Code 3100 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food snacks for poll workers
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/04/2024	Payee name Albertsons	
Amount (\$) \$32.43	Payee address; City; State; Zip Code 3100 N. Mesa  El Paso, TX 79902	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense poll workers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/05/2024	Payee name Albertsons	
Amount (\$) \$87.67	Payee address; City; State; Zip Code 3100 N. Mesa  El Paso, TX 79902	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense poll worker food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/17 Rpt: 16/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/23/2024	<b>5</b> Payee name Aloft El Paso Downtown	
<b>6</b> Amount (\$) \$11.47	<b>7</b> Payee address; City; State; Zip Code 3030 Texas  El Paso, TX 79901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2024	Payee name Aloft El Paso Downtown	
Amount (\$) \$541.25	Payee address; City; State; Zip Code 3030 Texas  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2024	Payee name Apple Store	
Amount (\$) \$38.58	Payee address; City; State; Zip Code 8401 Gateway Blvd W  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/17 Rpt: 17/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/14/2024	<b>5</b> Payee name Bank Of America	
<b>6</b> Amount (\$) \$12.00	<b>7</b> Payee address; City; State; Zip Code 330 N. Mesa  El Paso, TX 79901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly maintenance fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2024	Payee name Barnes & Noble - Starbucks	
Amount (\$) \$53.07	Payee address; City; State; Zip Code 8889 Gateway West  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Books for children's room
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2024	Payee name Barnes & Noble - Starbucks	
Amount (\$) \$53.56	Payee address; City; State; Zip Code 8889 Gateway West  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense coffee for poll workers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/17 Rpt: 18/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 02/26/2024	<b>5</b> Payee name Boba	
<b>6</b> Amount (\$) \$7.52	<b>7</b> Payee address; City; State; Zip Code 8889 GATEWAY  El Paso, TX 79925	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense for poll workers
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Chipotle	
Amount (\$) \$48.87	Payee address; City; State; Zip Code 2900 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for poll workers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2024	Payee name Circle K gas	
Amount (\$) \$42.30	Payee address; City; State; Zip Code 2200 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas volunteers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/17 Rpt: 19/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 03/04/2024	<b>5</b> Payee name Circle K gas	
<b>6</b> Amount (\$) \$45.11	<b>7</b> Payee address; City; State; Zip Code 2200 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election Day gas
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/05/2024	Payee name Circle K gas	
Amount (\$) \$37.11	Payee address; City; State; Zip Code 2200 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas for pollworkers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Constant Contact	
Amount (\$) \$79.95	Payee address; City; State; Zip Code 1601 Trapelo  Waltham , MA 02451	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/17 Rpt: 20/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
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<b>4</b> Date 05/10/2024	<b>5</b> Payee name Constant Contact
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<b>6</b> Amount (\$) \$79.95	<b>7</b> Payee address; City; State; Zip Code 1601 Trapelo  Waltham , MA 02451
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense emails
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/11/2024	Payee name Constant Contact
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Amount (\$) \$79.95	Payee address; City; State; Zip Code 1601 Trapelo  Waltham , MA 02451
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense emails
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/04/2024	Payee name El Clavo
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Amount (\$) \$11.25	Payee address; City; State; Zip Code 4138 N. Mesa  El Paso, TX 79902
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sign material
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/17 Rpt: 21/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
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<b>4</b> Date 02/27/2024	<b>5</b> Payee name El Paso Mail & Print Service
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<b>6</b> Amount (\$) \$8,122.32	<b>7</b> Payee address; City; State; Zip Code 1144 Vista De Oro St  EL Paso, TX 79935
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flyers and mailers
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/25/2024	Payee name El Paso Mail & Print Service
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Amount (\$) \$6,045.95	Payee address; City; State; Zip Code 1144 Vista De Oro St  EL Paso, TX 79935
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mailer and postage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/27/2024	Payee name Etsy
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Amount (\$) \$83.92	Payee address; City; State; Zip Code 117 Adams St  Brooklyn, NY 11201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you cards
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/17 Rpt: 22/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 02/28/2024	<b>5</b> Payee name Etsy	
<b>6</b> Amount (\$) \$35.00	<b>7</b> Payee address; City; State; Zip Code 117 Adams St  Brooklyn, NY 11201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense stickers
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2024	Payee name Fedex	
Amount (\$) \$6.47	Payee address; City; State; Zip Code 4190 N Mesa  El Paso, TX 79912	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense tape
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/07/2024	Payee name Fedex	
Amount (\$) \$47.38	Payee address; City; State; Zip Code 4190 N Mesa  El Paso, TX 79912	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense payment for pushcards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/17 Rpt: 23/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 02/26/2024	<b>5</b> Payee name Glias Coffee	
<b>6</b> Amount (\$) \$8.47	<b>7</b> Payee address; City; State; Zip Code 4841 Alberta Ave  El Paso, TX 79901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense coffee poll workers
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2024	Payee name Go Direct Marketing Services	
Amount (\$) \$335.69	Payee address; City; State; Zip Code 8400 Boeing Drive  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense invitations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/19/2024	Payee name HOBBY LOBBY	
Amount (\$) \$12.97	Payee address; City; State; Zip Code 7930 N. MESA  EL PASO, TX 79932	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DECOR
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/17 Rpt: 24/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 06/21/2024	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$11.73	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Suite 400 San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ride to courthouse
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name MACS	
Amount (\$) \$31.42	Payee address; City; State; Zip Code 315 Mills  El Paso, TX 79901	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food poll workers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2024	Payee name McDonalds	
Amount (\$) \$14.36	Payee address; City; State; Zip Code 2401 N. Mesa  El PAso, TX 79902	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/17 Rpt: 25/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 02/26/2024	<b>5</b> Payee name McDonalds	
<b>6</b> Amount (\$) \$11.11	<b>7</b> Payee address; City; State; Zip Code 2401 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense for poll workers
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Michel, Perla	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 521 Texas  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense poll worker gas etc
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2024	Payee name Microsoft	
Amount (\$) \$18.36	Payee address; City; State; Zip Code One Microsoft way  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense adobe fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/17 Rpt: 26/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 02/27/2024	<b>5</b> Payee name Ness Garcia, Lyda (The Honorable)	
<b>6</b> Amount (\$) \$12,500.00	<b>7</b> Payee address; City; State; Zip Code CONFIDENTIAL  El Paso, TX 79901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of personal loan to campaign
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2024	Payee name Ness Garcia, Lyda (The Honorable)	
Amount (\$) \$4,285.43	Payee address; City; State; Zip Code confidential confidential EL Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of personal loan to campaign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Nikole Snacks	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 8401 Gateway West  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense for polls workers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/17 Rpt: 27/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
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<b>4</b> Date 03/07/2024	<b>5</b> Payee name Raising Canes
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<b>6</b> Amount (\$)  \$33.16	<b>7</b> Payee address; City; State; Zip Code N. Mesa  El Paso, TX 79902
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office lunch
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/28/2024	Payee name Raising Canes
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Amount (\$)  \$17.55	Payee address; City; State; Zip Code N. Mesa  El Paso, TX 79902
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food poll workers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/26/2024	Payee name Starbucks
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Amount (\$)  \$11.90	Payee address; City; State; Zip Code 2300 N. Mesa  El Paso, TX 79902
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast poll workers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/17 Rpt: 28/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 03/04/2024	<b>5</b> Payee name Starbucks	
<b>6</b> Amount (\$) \$10.00	<b>7</b> Payee address; City; State; Zip Code 2300 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense coffee poll workers election day
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/27/2024	Payee name Target	
Amount (\$) \$61.63	Payee address; City; State; Zip Code 801 Sunland Park  El Paso, TX 79912	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food drinks workers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Wingstop	
Amount (\$) \$59.53	Payee address; City; State; Zip Code 2900 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food poll workers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/17 Rpt: 29/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
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<b>4</b> Date 03/01/2024	<b>5</b> Payee name Zapa Graphics
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<b>6</b> Amount (\$) \$261.03	<b>7</b> Payee address; City; State; Zip Code 3410 Wickham  El Paso, TX 79904
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense signs
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/04/2024	Payee name Zippy's Printing
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Amount (\$) \$468.73	Payee address; City; State; Zip Code 2855 Pershing  El Paso, TX 79903
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/07/2024	Payee name Zippy's Printing
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Amount (\$) \$211.08	Payee address; City; State; Zip Code 2855 Pershing  El Paso, TX 79903
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Invitations
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/17 Rpt: 30/49	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/10/2024	<b>5</b> Payee name Zippy's Printing	
<b>6</b> Amount (\$) \$217.41	<b>7</b> Payee address; City; State; Zip Code 2855 Pershing  El Paso, TX 79903	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mailers
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2024	Payee name walgreens	
Amount (\$) \$5.19	Payee address; City; State; Zip Code 2800 N. Mesa  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense rubber bands
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name walgreens	
Amount (\$) \$2.43	Payee address; City; State; Zip Code 2800 N. Mesa  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water poll workers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 1/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/11/2024	<b>5</b> Payee name 2Ten	
<b>6</b> Amount (\$) 24.64	<b>7</b> Payee Address; City; State; Zip 3007 Montana  El Paso, TX 79901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee beans office
Date 03/06/2024	Payee name 787 Coffee	
Amount (\$) 23.00	Payee Address; City; State; Zip 2419 N. Stanton  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Breakfast office
Date 04/12/2024	Payee name 787 Coffee	
Amount (\$) 21.00	Payee Address; City; State; Zip 2419 N. Stanton  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee beans office
Date 05/15/2024	Payee name Albertsons	
Amount (\$) 50.90	Payee Address; City; State; Zip 3100 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Office snacks and beverages

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 2/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/08/2024	<b>5</b> Payee name Albertsons	
<b>6</b> Amount (\$) 28.51	<b>7</b> Payee Address; City; State; Zip 3100 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) office
Date 04/22/2024	Payee name Albertsons	
Amount (\$) 90.72	Payee Address; City; State; Zip 3100 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Food and snacks for office
Date 03/11/2024	Payee name Albertsons	
Amount (\$) 42.59	Payee Address; City; State; Zip 3100 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) snacks for office
Date 03/25/2024	Payee name Albertsons	
Amount (\$) 23.44	Payee Address; City; State; Zip 3100 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) office/juries



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 3/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/05/2024	<b>5</b> Payee name Albertsons	
<b>6</b> Amount (\$) 24.13	<b>7</b> Payee Address; City; State; Zip 3100 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee supplies office/jury room
Date 04/08/2024	Payee name Albertsons	
Amount (\$) 25.93	Payee Address; City; State; Zip 3100 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) donuts and coffee for courthouse staff
Date 05/23/2024	Payee name Albertsons	
Amount (\$) 39.23	Payee Address; City; State; Zip 3100 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) snacks and supplies off
Date 05/28/2024	Payee name Barnes & Noble -	
Amount (\$) 46.70	Payee Address; City; State; Zip 8889 Gateway West  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Books & gifts	<b>(b)</b> Description (See instructions regarding type of information required.) books for children's room

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 4/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/01/2024	<b>5</b> Payee name Barnes & Noble -	
<b>6</b> Amount (\$) 83.73	<b>7</b> Payee Address; City; State; Zip 8889 Gateway West  El Paso, TX 79925	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description (See instructions regarding type of information required.) Books donation little libraries
Date 06/23/2024	Payee name Barnes & Noble - Starbucks	
Amount (\$) 24.50	Payee Address; City; State; Zip 8889 Gateway West  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Coffee Staff
Date 04/01/2024	Payee name Bath and Body Work	
Amount (\$) 21.92	Payee Address; City; State; Zip 655 Sunland Park  El Paso, TX 79912	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) soap for jury bathrooms
Date 05/03/2024	Payee name Bath and Body Work	
Amount (\$) 51.91	Payee Address; City; State; Zip 655 Sunland Park  El Paso, TX 79912	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) soap and air freshener for office bathrooms

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 5/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/08/2024	<b>5</b> Payee name Chipotle	
<b>6</b> Amount (\$) 42.43	<b>7</b> Payee Address; City; State; Zip 2900 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Office Lunch
Date 06/28/2024	Payee name Chipotle	
Amount (\$) 62.68	Payee Address; City; State; Zip 2900 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) office lunch
Date 04/02/2024	Payee name Chuy's	
Amount (\$) 87.83	Payee Address; City; State; Zip 8889 Gateway  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Lunch staff
Date 04/03/2024	Payee name Circle K gas	
Amount (\$) 35.54	Payee Address; City; State; Zip 2200 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Travel In District	<b>(b)</b> Description (See instructions regarding type of information required.) gas

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 6/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/01/2024	<b>5</b> Payee name Coffee Box	
<b>6</b> Amount (\$) 35.11	<b>7</b> Payee Address; City; State; Zip 401 N. Mesa  El Paso, TX 79901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee
Date 05/28/2024	Payee name Costco gas	
Amount (\$) 49.78	Payee Address; City; State; Zip 6101 Gateway Blvd  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Travel In District	<b>(b)</b> Description (See instructions regarding type of information required.) gas
Date 05/02/2024	Payee name Costco gas	
Amount (\$) 44.83	Payee Address; City; State; Zip 6101 Gateway Blvd  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Travel In District	<b>(b)</b> Description (See instructions regarding type of information required.) gas
Date 06/05/2024	Payee name DC Bar	
Amount (\$) 212.00	Payee Address; City; State; Zip 901 4th St NW  Washington , DC 20001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) DC Bar

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/19 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
4 Date 04/16/2024	5 Payee name Doordash	
6 Amount (\$)  9.99	7 Payee Address; City; State; Zip 303 2nd Street  San Francisco, CA 94107	
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Fees	<b>(b) Description</b> (See instructions regarding type of information required.) Delivery fee for office lunch
Date 03/04/2024	Payee name Doordash	
Amount (\$)  9.99	Payee Address; City; State; Zip 303 2nd Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Fees	<b>(b) Description</b> (See instructions regarding type of information required.) delivery fee
Date 03/11/2024	Payee name Fengcha	
Amount (\$)  7.92	Payee Address; City; State; Zip 7470 Cimarron Market Ave  El Paso, TX 79911	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) coffee
Date 03/18/2024	Payee name Fengcha	
Amount (\$)  8.41	Payee Address; City; State; Zip 7470 Cimarron Market Ave  El Paso, TX 79911	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) coffee/tea office

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 8/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 03/28/2024	<b>5</b> Payee name Five Star Mexican Bakery West	
<b>6</b> Amount (\$) 13.50	<b>7</b> Payee Address; City; State; Zip 3233 N. Mesa Ste 2001 El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Breakfast office
Date 03/21/2024	Payee name Glias Coffee	
Amount (\$) 11.55	Payee Address; City; State; Zip 4841 Alberta Ave  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) office
Date 04/11/2024	Payee name Glias Coffee	
Amount (\$) 8.04	Payee Address; City; State; Zip 4841 Alberta Ave  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee
Date 04/18/2024	Payee name Glias Coffee	
Amount (\$) 18.43	Payee Address; City; State; Zip 4841 Alberta Ave  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee bean

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 9/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/06/2024	<b>5</b> Payee name Glias Coffee	
<b>6</b> Amount (\$) 12.64	<b>7</b> Payee Address; City; State; Zip 4841 Alberta Ave  El Paso, TX 79901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee office
Date 06/10/2024	Payee name Glias Coffee	
Amount (\$) 16.50	Payee Address; City; State; Zip 4841 Alberta Ave  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee beans
Date 05/28/2024	Payee name Grimaldi	
Amount (\$) 74.69	Payee Address; City; State; Zip 8889 Gateway  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) office staff
Date 06/03/2024	Payee name Grove	
Amount (\$) 62.44	Payee Address; City; State; Zip 7470 Cimmaron  El Paso, TX 79911	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Staff mtg

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 10/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/29/2024	<b>5</b> Payee name Javy	
<b>6</b> Amount (\$) 49.69	<b>7</b> Payee Address; City; State; Zip 1318 N. Main St  Summerville, SC 29483	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee office
Date 04/01/2024	Payee name Javy	
Amount (\$) 49.69	Payee Address; City; State; Zip 1318 N. Main  Summerville, SC 29843	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Coffee delivery
Date 02/27/2024	Payee name Javy	
Amount (\$) 49.69	Payee Address; City; State; Zip 1318 N. Main St  Summerville, SC 29483	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Coffee delivery office
Date 04/15/2024	Payee name Luby's	
Amount (\$) 7.57	Payee Address; City; State; Zip 500 E San Antonio  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Lunch office



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 11/19 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
4 Date 05/02/2024	5 Payee name Lulac Women's	
6 Amount (\$)  98.28	7 Payee Address; City; State; Zip 221 N. Kansas  El Paso, TX 79901	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Event Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Lulac EVENT
Date 04/03/2024	Payee name Marcos Plizza	
Amount (\$)  12.97	Payee Address; City; State; Zip 7460 Cimmaron  el paso, TX 79911	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) pizza office
Date 05/20/2024	Payee name McDonalds	
Amount (\$)  26.06	Payee Address; City; State; Zip 2401 N. Mesa  El PAso, TX 79902	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Office luncheon
Date 04/02/2024	Payee name Menchie's	
Amount (\$)  22.70	Payee Address; City; State; Zip 8889 Gateway  El Paso, TX 79925	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) ice-cream after staff lunch

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 12/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/02/2024	<b>5</b> Payee name Microsoft	
<b>6</b> Amount (\$) 18.38	<b>7</b> Payee Address; City; State; Zip once microsoft way  Redmond, WA 98052	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) adobe
Date 05/01/2024	Payee name Microsoft	
Amount (\$) 18.38	Payee Address; City; State; Zip One Microsoft way  Redmond , WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) adobe
Date 04/03/2024	Payee name Moveon	
Amount (\$) 43.68	Payee Address; City; State; Zip 1442 Walnut  Berkley , CA 94709	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description (See instructions regarding type of information required.) Dem party
Date 06/04/2024	Payee name NACC Child Law	
Amount (\$) 120.00	Payee Address; City; State; Zip 899 N. Logan St  Denver, CO 80203	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) National Association of Child Welfare

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 13/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/06/2024	<b>5</b> Payee name PDF filler	
<b>6</b> Amount (\$) 102.34	<b>7</b> Payee Address; City; State; Zip 17 Station  Brookline, MA 02445	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) software
Date 05/26/2024	Payee name Pandora	
Amount (\$) 81.19	Payee Address; City; State; Zip 8401 Gateway Blvd  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Staff Gift
Date 06/04/2024	Payee name Pennsylvania Bar	
Amount (\$) 102.75	Payee Address; City; State; Zip 100 South St  Harrisburg, PA 17101	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Penn Bar Association
Date 06/04/2024	Payee name Race against Blindness	
Amount (\$) 25.00	Payee Address; City; State; Zip 3317 S. Higley  Glibert, AZ 85297	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description (See instructions regarding type of information required.) charitable donation

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 14/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/28/2024	<b>5</b> Payee name Race against Blindness	
<b>6</b> Amount (\$) 25.00	<b>7</b> Payee Address; City; State; Zip 3317 S. Higley Rd  Glibert, AZ 85297	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description (See instructions regarding type of information required.) Charitable donation
Date 04/04/2024	Payee name Raising Canes	
Amount (\$) 33.58	Payee Address; City; State; Zip N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) lunch office
Date 04/15/2024	Payee name Raising Canes	
Amount (\$) 61.66	Payee Address; City; State; Zip N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) office lunch
Date 06/03/2024	Payee name Raising Canes	
Amount (\$) 22.53	Payee Address; City; State; Zip N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) office

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 15/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 04/29/2024	<b>5</b> Payee name Starbucks	
<b>6</b> Amount (\$) 30.00	<b>7</b> Payee Address; City; State; Zip 2300 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Event Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Breakfast meeting office
Date 03/22/2024	Payee name Starbucks	
Amount (\$) 15.00	Payee Address; City; State; Zip 2300 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee
Date 03/25/2024	Payee name Starbucks	
Amount (\$) 30.00	Payee Address; City; State; Zip 2300 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) office
Date 05/24/2024	Payee name Starbucks	
Amount (\$) 10.00	Payee Address; City; State; Zip 2300 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee beans

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 16/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 05/29/2024	<b>5</b> Payee name Starbucks	
<b>6</b> Amount (\$) 10.00	<b>7</b> Payee Address; City; State; Zip 2300 N. Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee beans
Date 06/05/2024	Payee name Starbucks	
Amount (\$) 15.00	Payee Address; City; State; Zip 2300 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) cofee beans
Date 06/28/2024	Payee name Starbucks	
Amount (\$) 15.00	Payee Address; City; State; Zip 2300 N. Mesa  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) coffee
Date 04/08/2024	Payee name T J Maxx	
Amount (\$) 179.24	Payee Address; City; State; Zip 8889 Gateway  El Paso, TX 79925	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Furniture for jury bathrooms & other decor for jury room

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 17/19 Rpt:	<b>2</b> FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00061857
<b>4</b> Date 06/10/2024	<b>5</b> Payee name Taco Bell	
<b>6</b> Amount (\$) 31.68	<b>7</b> Payee Address; City; State; Zip 2103 Mesa  El Paso, TX 79902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) off lunch
Date 04/01/2024	Payee name Target	
Amount (\$) 138.87	Payee Address; City; State; Zip 801 Sunland Park  El Paso, TX 79912	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Supplies office	<b>(b)</b> Description (See instructions regarding type of information required.) items for jury room
Date 04/08/2024	Payee name Target	
Amount (\$) 20.56	Payee Address; City; State; Zip 801 Sunland Park  El Paso, TX 79912	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) pens
Date 05/28/2024	Payee name Target	
Amount (\$) 26.52	Payee Address; City; State; Zip 801 Sunland Park  El Paso, TX 79912	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Snacks for office and juries

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 18/19 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
4 Date 06/27/2024	5 Payee name The Cleaners	
6 Amount (\$)  21.80	7 Payee Address; City; State; Zip 2922 N. Mesa  El Paso, TX 79902	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Judicial Robe repair	<b>(b) Description</b> (See instructions regarding type of information required.) Robe
Date 05/06/2024	Payee name Tiff's Treats	
Amount (\$)  50.00	Payee Address; City; State; Zip 8889 Gateway  El Paso, TX 79925	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Event Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Cookies staff bday party
Date 04/08/2024	Payee name Verde Salad	
Amount (\$)  29.93	Payee Address; City; State; Zip 5809 N. Mesa  El PAso, TX 79912	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Office lunch
Date 03/13/2024	Payee name Whataburger	
Amount (\$)  23.26	Payee Address; City; State; Zip 2201 N. Mesa  El Paso, TX 79902	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Office



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 19/19 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
4 Date 06/27/2024	5 Payee name Whole Foods Market	
6 Amount (\$)  67.69	7 Payee Address; City; State; Zip 100 Pitts St  El Paso, TX 79912	
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Event Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Office Birthday luncheon
Date 05/03/2024	Payee name charcoaler	
Amount (\$)  37.44	Payee Address; City; State; Zip 5837 N. Mesa  El Paso, TX 79912	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) office lunch
Date 04/08/2024	Payee name walgreens	
Amount (\$)  17.28	Payee Address; City; State; Zip 2800 N. Mesa  El Paso, TX 79901	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b) Description</b> (See instructions regarding type of information required.) chargers for office