JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instructior	Guide explains how to cor	nplete this form.	1 Filer ID (Ethics Commi 00087665	,	2 Total pages	filed:
3 CANDIDATE /	MS / MRS / MR	FIRST	1 20001000	MI		
OFFICEHOLDER	Mr.	Orlando J.				USE ONLY
NAME	1411.	Chando J.			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2024	
	OJ	Esquivel				
		-				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	-Y;	ZIP CODE	Date Hand-delivered	l or Date Postmarked
MAILING	PO Box 1633					
ADDRESS					Receipt #	Amount
Change of Address	Edinburg, TX 78540					
	Lambarg, increasing				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			МІ	
TREASURER NAME	Mrs.	Lien J.				
	NICKNAME	LAST			SUFFIX	
		Yoder			301117	
		TOUET				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO P	O BOX PLEASE);	AP	T / SUITE #; CITY;	S	TATE; ZIP CODE
ADDRESS	3010 West University Dr					
(Residence or Business)	Edinburg, TX 78539					
7 CAMPAIGN	AREA CODE PHO	ONE NUMBER	EXTENSION			
TREASURER	(956) 383-1615					
PHONE	(000) 000 1010					
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff	15th day after o	campaign treasurer
				L		fficeholder only)
	X July 15	8th day before	election	Exceeded modified	Final Report (A	ttach C/OH-FR)
				reporting limit	_	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TI	HROUGH	06/30/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary		Other	
	11/05/2024		Timary			
	11/00/2024	X	Seneral	Special		
11 OFFICE	OFFICE HELD (if any)	1		12 OFFICE SOUGHT	(if known)	
				District Judge Pla		
					·	
GO TO PAGE 2						
	was Ethias Ormaniasi					
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	S	Vers	sion V4.1.0.d378aba0

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 39

I

13 C / OH NAME	Esquivel, Orlando J.	(Mr.)	14 Filer ID 00087665	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made withou d officeholders are required to report this informati	It the candidate's or offic	eholder's knowledge or
Additional Pages		COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER TH/ ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.00
	2. TOTAL POLIT	ICAL CONTRIBUTIONS		
	· · · · · · · · · · · · · · · · · · ·	PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 99,730.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 229,939.75
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 8,590.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required	
		Mr.	Orlando J. Esquivel	
		Signature	of Candidate or Officehc	older
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath
-orms provided by Te	exas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba

SI	JBT	OTALS - JC/OH	CC	FORM J	
	ER NAM quivel,	IE Orlando J. (Mr.)	19 Filer ID 00087665	(Ethics Commission	on Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL /	AMOUNT
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)			\$	97,630.00
2.	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$	2,100.00
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	229,939.75

3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4. SCHEDULE E(J): LOANS (JUDICIAL)	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 229,939.75
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

Esquivel, Orlando J. (Mr.) **20** SCHEDULE SUBTOTALS NAME OF SCHEDULE

18 FILER NAME

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 1/21 Rpt: 4/39
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Esquivel, Or	lando J. (Mr.)	00087665	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
03/21/2024	A-Quick Bail Bonds		\$1,000.00
	6 Contributor address; City; State; Zip Code		•
	Edinburg, TX 78540		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	1
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	1	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/20/2024	Aaron Daniel Rivera Accident & Injury Law, PLL		\$1,500.00
	Contributor address; City; State; Zip Code		•
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	•	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/25/2024	Adalberto Esquivel DDS		\$10,000.00
	Contributor address; City; State; Zip Code		1
	Mission, TX 78572		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/21 Rpt: 5/39	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Esquivel, Orlando J. (Mr.)			00087665
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
04/01/2024	Alamo Law Center PLLC		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Alamo, TX 78516		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
04/03/2024	Arredondo Law Firm		\$1,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor in	a a abild low firm of parant(a) (if any)		
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/06/2024	Atlas, Hall & Rodriguez LLP		\$2,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78502		
Contributor's	Principal Occupation	Contributor's Job Title	
Contributor 3 P			
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if anv)
If contributor is	s a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 3/21 Rpt: 6/39 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Esquivel, Orlando J. (Mr.) 00087665 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/06/2024 Ballessteros Gonzalez Law Firm PLLC \$2,500.00 6 Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation 9 Contributor's Job Title 8 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID# 03/21/2024 Barrera, Sanchez & Associates PC \$1,500.00 Contributor address; City; State; Zip Code McAllen, TX 78504 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) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: 03/06/2024 \$1,000.00 Benavides Law Firm Contributor address; City; State; Zip Code Weslaco, TX 78596 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)

The Instruction Guide explains how to complete	1 Total pages Schedule A(J)1: Sch: 4/21 Rpt: 7/39				
2 FILER NAME Esquivel, Orlando J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087665				
4 Date 5 Full name of contributor out-of-state P 03/20/2024 Brasure, Chris					
6 Contributor address; City; State; Zip Code					
McAllen, TX 78504					
8 Contributor's Principal Occupation	9 Contributor's Job Title	•			
Attorney	Attorney				
10 Contributor's employer/law firm	11 Law firm of contributor's sp	pouse (if any)			
Law Office of Chris Brasure					
12 If contributor is a child, law firm of parent(s) (if any)					
	PAC (ID#:)	Amount of Contribution (\$)			
		\$3,000.00			
Contributor address; City; State; Zip Code					
Edinburg, TX 78539					
Contributor's Principal Occupation	Contributor's Job Title	1			
Attorney	State Representative				
Contributor's employer/law firm	Law firm of contributor's sp	pouse (if any)			
Terry Canales Attorney at Law					
If contributor is a child, law firm of parent(s) (if any)					
Date Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)			
03/19/2024 Contreras, Rutchebeth		\$1,000.00			
Contributor address; City; State; Zip Code					
McAllen, TX 78501					
Contributor's Principal Occupation	Contributor's Job Title				
Business Owner	Owner				
Contributor's employer/law firm	Law firm of contributor's s	pouse (if any)			
Self					
If contributor is a child, law firm of parent(s) (if any)					
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The Instru	ction Guide explains how to	complete this fo	orm.	1 Total pages Schedule A(J)1: Sch: 5/21 Rpt: 8/39	
2 FILER NAME				3 Filer ID (Ethics Commission Filers	s)
Esquivel, Or	lando J. (Mr.)			00087665	-
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
04/06/2024	Cruz, Steven			\$10	0.00
	6 Contributor address; City; State; 2				
	Edinburg, TX 78541				
8 Contributor's I	Principal Occupation		9 Contributor's Job Title		
Self Employ	ed		Owner		
10 Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if any)	
Self					
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/06/2024	Delta Oaks Dentistry PA			\$1,00	0.00
	Contributor address; City; State; 2	Zip Code			
	Elsa, TX 78543				
Contributor's I	Principal Occupation		Contributor's Job Title	1	
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/06/2024	Emmanuel Espinoza Law Gro	up PLLC		\$20	0.00
	Contributor address; City; State; 2	Zip Code]	
	McAllen, TX 78501				
Contributor's I	Principal Occupation		Contributor's Job Title		
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)				

The Instru	ction Guide explains how to complete this t	1 Total pages Schedule A(J)1: Sch: 6/21 Rpt: 9/39	
2 FILER NAME Esquivel, Orlando J. (Mr.)			3 Filer ID (Ethics Commission Filers) 00087665
4 Date 04/06/2024	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$100.00
	McAllen, TX 78502		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e Self Employe		11 Law firm of contributor's sp	bouse (if any)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/22/2024	Garcia & Garcia Attorneys at Law PLLC		\$2,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78502		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
lf trille to			
If contributor is	s a child, law firm of parent(s) (if any)		
Data			
Date 03/06/2024	Full name of contributor out-of-state PAC (ID#: Garza, Doreen)	Amount of Contribution (\$) \$100.00
00/00/2024	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Retired		Retired	
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
Retired			
If contributor is	s a child, law firm of parent(s) (if any)		
Forme provided	hy Texas Ethics Commission www.ethic	es state ty us	Version V4.1.0 d378aba0

The Instru	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 7/21 Rpt: 10/39	
2 FILER NAME				3 Filer ID (Ethics Commission	on Filers)
Esquivel, Or	lando J. (Mr.)			00087665	-
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
04/03/2024	Gonzalez Castillo Moya L				\$1,500.00
	6 Contributor address; City; St	ate; Zip Code			
	McAllen, TX 78503				
8 Contributor's F	Principal Occupation		9 Contributor's Job Title		
10 Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if a	iny)			
	r			1	
Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
03/28/2024	Griffith Law Group				\$1,500.00
	Contributor address; City; St	ate; Zip Code			
	MaAllan TX 79504				
Contributor's	McAllen, TX 78504		Contributor's Job Title		
Contributors i	Principal Occupation				
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)	
			'		
If contributor is	s a child, law firm of parent(s) (if a	any)			
Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/08/2024	Guerra, Celeste				\$500.00
	Contributor address; City; St	ate; Zip Code			
	McAllen, TX 78501				
Contributor's F	Principal Occupation		Contributor's Job Title	•	
Attorney			Attorney		
	employer/law firm		Law firm of contributor's sp	oouse (if any)	
Law Office o	f Celeste Guerra				
If contributor is	s a child, law firm of parent(s) (if a	any)			
Forms provided	hy Texas Ethics Commission	Manage othio	s state ty us	Version V/4 1	0 d279aba0

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 8/21 Rpt: 11/39			
2 FILER NAME Esquivel, Orlando J. (Mr.)			3 Filer ID (Ethics Commission Filers) 00087665		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)		
03/27/2024	Hacienda Collision Center		\$2,500.00		
	6 Contributor address; City; State; Zip Code		1		
	McAllen, TX 78504				
8 Contributor's F	Principal Occupation	9 Contributor's Job Title			
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)		
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
03/25/2024	Henrichson Law PLLC		\$750.00		
	Contributor address; City; State; Zip Code				
	Edinburg, TX 78539				
Contributor's F	Principal Occupation	Contributor's Job Title	1		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
03/22/2024	Hernandez, Dulce		\$2,500.00		
00/22/2024					
	Contributor address; City; State; Zip Code				
	Alama TX 79516				
O sustaila standa	Alamo, TX 78516	O antributanta Jak Titla			
	Principal Occupation	Contributor's Job Title			
Attorney		Attorney			
Contributor's employer/law firm Law firm of contributor's sp DM Law Firm		bouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
	hy Tayas Ethics Commission www.ethic	s state ty us	Version V/A 1.0 d378aba0		

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 9/21 Rpt: 12/39	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	lando J. (Mr.)		00087665
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
03/15/2024	Hinojosa Law		\$1,500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77026		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/27/2024	Jones, Galligan, Key & Lozano LLP	/	\$1,500.00
	Weslaco, TX 78596		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor 5 1			
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
03/21/2024	Full name of contributor out-of-state PAC (ID#: Law Office of Alex Martinez PLLC)	\$2,500.00
03/21/2024			φ2,300.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contr		Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 10/21 Rpt: 13/39 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Esquivel, Orlando J. (Mr.) 00087665 Date Amount of Contribution (\$) 4 5 Full name of contributor out-of-state PAC (ID#: 7 03/19/2024 Law Office of Anthony Ortega PLLC \$1,500.00 6 Contributor address; City; State; Zip Code Alamo, TX 78516 Contributor's Principal Occupation 9 Contributor's Job Title 8 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/06/2024 Law Office of Catarina Alvarado \$1,500.00 Contributor address; City; State; Zip Code McAllen, TX 78504 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) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: 04/15/2024 Law Office of Dennis Ramirez \$1,500.00 Contributor address; City; State; Zip Code Donna, TX 78537 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)

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 11/21 Rpt: 14/39
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	lando J. (Mr.)		00087665
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
03/20/2024	Law Office of Jose L Bravo		\$1,500.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78502		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	•
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/20/2024	Law Office of Judith A Cantu)	\$1,000.00
03/20/2024			
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/06/2024	Law Office of Laura Martinez Barbosa		\$100.00
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78540		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's s		pouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)		

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/21 Rpt: 15/39	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Esquivel, O	rlando J. (Mr.)		00087665
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
04/03/2024			\$1,500.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any)	1	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/20/2024			\$1,000.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's	Principal Occupation	Contributor's Job Title	I
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor	is a child, law firm of parent(s) (if any)	•	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
05/03/2024	Law Office of Traci Evans		\$500.00
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's	Principal Occupation	Contributor's Job Title	•
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 13/21 Rpt: 16/39 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Esquivel, Orlando J. (Mr.) 00087665 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/05/2024 Law Office of Victor Jaramillo Sosa PLLC \$1,000.00 6 Contributor address; City; State; Zip Code McAllen, TX 78504 Contributor's Principal Occupation 9 Contributor's Job Title 8 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$500.00 03/21/2024 Law Offices of Aurelio Garza Jr. PLLC Contributor address; City; State; Zip Code McAllen, TX 78501 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) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: 03/20/2024 \$2,500.00 Law Offices of Ezequiel Reyna Jr Contributor address; City; State; Zip Code Weslaco, TX 78599 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)

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Self If contributor is a child, law firm of parent(s) (if any) Date Date 03/26/2024 MAH Financial Services Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's spouse (if any)	Self If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) 03/26/2024 MAH Financial Services Amou Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's Principal Occupation Contributor's Job Title	
If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) 03/26/2024 MAH Financial Services Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) McAllen, TX 78501 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 Full name of contributor out-of-state PAC (ID#:) Amou 03/26/2024 MAH Financial Services Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title Contributor's Job Title	ıy)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 03/26/2024 MAH Financial Services \$5,000.00 Contributor address; City; State; Zip Code McAllen, TX 78501 \$5,000.00 McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)	Date Full name of contributor out-of-state PAC (ID#:) Amou 03/26/2024 MAH Financial Services Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title Contributor's Job Title	
03/26/2024 MAH Financial Services \$5,000.00 Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)	03/26/2024 MAH Financial Services Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title	
03/26/2024 MAH Financial Services \$5,000.00 Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)	03/26/2024 MAH Financial Services Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title	
Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's employer/law firm Law firm of contributor's spouse (if any)	Contributor address; City; State; Zip Code McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title	nt of Contribution (\$)
McAllen, TX 78501 Contributor's Principal Occupation Contributor's employer/law firm Law firm of contributor's spouse (if any)	McAllen, TX 78501 Contributor's Principal Occupation Contributor's Job Title	\$5,000.00
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)	Contributor's Principal Occupation Contributor's Job Title	
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)	Contributor's Principal Occupation Contributor's Job Title	
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)	Contributor's Principal Occupation Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's spouse (if any)		
	Contributor's employer/law firm Law firm of contributor's spouse (if ar	
	Contributor's employer/law firm Law firm of contributor's spouse (if ar	
If contributor is a child, law firm of parent(s) (if any)		ıy)
If contributor is a child, law firm of parent(s) (if any)		
	If contributor is a child, law firm of parent(s) (if any)	
	Forme provided by Toyoo Ethico Commission	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 15/21 Rpt: 18/39
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	lando J. (Mr.)		00087665
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
04/06/2024	McGraw, Peter		\$40.00
	6 Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	•
self		self	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
self			、 <i></i>
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/20/2024	Omar Ochoa Law Firm PC		\$5,000.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/07/2024	Pablo Tagle III Chiropractic Wellness & Spa Ce	nter	\$1,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor of			
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

The Instru	ction Guide explains how to complete this f	orm	1 Total pages Schedule A(J)1:
The Instruction Guide explains how to complete this form.		Sch: 16/21 Rpt: 19/39	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	lando J. (Mr.)		00087665
4 Date	5 Full name of contributor Out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/11/2024	Patino & Associates PLLC		\$1,500.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date 04/06/2024	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$250.00
04/06/2024			\$250.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's s		oouse (if any)	
lf a sustaile stars i			
If contributor is	s a child, law firm of parent(s) (if any)		
Data	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
Date 04/06/2024	Full name of contributor out-of-state PAC (ID#: Patricia Ann Rigney, Attorney at Law)	\$100.00
0 1100/2021	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 17/21 Rpt: 20/39
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	lando J. (Mr.)		00087665
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
04/06/2024	Richardson, Regina		\$100.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Law Office o	f Regina Richardson		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/08/2024	Ricky Rod Law Group PLLC		\$1,500.00
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's I	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/28/2024	Ruy Mireles Law Firm PLLC		\$1,500.00
	Contributor address; City; State; Zip Code		
	Mission, TX 78572		
Contributor's I	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
<u> </u>	by Taylog Ethics Commission		Varaian V/4.1.0.d270aba0

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 18/21 Rpt: 21/39
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Esquivel, Or	lando J. (Mr.)		00087665
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
03/26/2024	Singh, Simran		\$300.00
	6 Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	l
Self		Self	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Self			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/17/2024	Soliz, Naida		\$500.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78556		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Retired		Retired	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Retired			
If contributor is	s a child, law firm of parent(s) (if any)	•	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/22/2024	THe Garcia Legal Firm PLLC		\$5,000.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's s		oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)	•	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 19/21 Rpt: 22/39 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Esquivel, Orlando J. (Mr.) 00087665 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/19/2024 The Law Office of Daniel Gonzalez PLLC \$500.00 6 Contributor address; City; State; Zip Code Pharr, TX 78577 Contributor's Principal Occupation 9 Contributor's Job Title 8 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/11/2024 \$5,000.00 The Law Office of Derek I Salinas PLLC Contributor address; City; State; Zip Code McAllen, TX 78504 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) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/01/2024 The Law Office of J Enereo Bazan PLLC \$750.00 Contributor address; City; State; Zip Code Donna, TX 78537 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)

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 20/21 Rpt: 23/39
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Esquivel, Or	lando J. (Mr.)		00087665
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
03/20/2024	The Law Offices of V&E PLLC		\$1,500.00
	6 Contributor address; City; State; Zip Code		
	Mission, TX 78574		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/20/2024)	\$5,000.00
00/20/2024			
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
04/06/2024	Trevino, Hugo		\$100.00
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's F	Principal Occupation	Contributor's Job Title	
self	- F F	self	
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
Self			
If contributor is a child, law firm of parent(s) (if any)			
Forms provided	hy Texas Ethics Commission www.ethic	s state ty us	Version VA 1.0 d378aba0

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 21/21 Rpt: 24/39
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Esquivel, Or	lando J. (Mr.)		00087665
4 Date 03/18/2024	5 Full name of contributor out-of-state PAC (ID#: Valiant Energy Sources LLC		7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code Pharr, TX 78577		
0 Contributorio		Contributoria Job Title	
8 Contributors	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
12 If contributor i	is a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/06/2024	West, Isayah		\$100.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's	I Principal Occupation	Contributor's Job Title	
student		student	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
Student			
If contributor i	s a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/2 Rpt: 25/39
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	rlando J. (Mr.)		00087665
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 04/05/2024	 7 Contributor address; City; State; Zip Code)	8 Amount of 9 In-kind contribution contribution (\$) description \$300.00 Prizes for golf tournament
	Edinburg, TX 78540		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 04/06/2024	Full name of contributor out-of-state PAC (ID#: Costa Messa Restaurant Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$1,000.00 Food for golf tournament
	McAllen, TX 78501		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 04/06/2024	Full name of contributor out-of-state PAC (ID#: L&F Distributors Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$500.00 Beverages for golf tournament
	McAllen, TX 78501		I I Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title		(FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL) Law firm of contribu		Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instruction Guide explains how to complete this form.		1	1 Total pages Schedule A2: Sch: 2/2 Rpt: 26/39	
2	FILER NAME		3	Filer ID (Ethics Commission Filers)	
	Esquivel, Orlando J. (Mr.)			00087665	
4	TOTAL OF UNITEMIZED IN-KIND POLITICAL CON	TRIBUTIONS	\$		
5	Date 6 Full name of contributor out-of-state PAC (I 04/06/2024 Law Office of Hector Bustos 7 Contributor address; City; State; Zip Code Edinburg, TX 78539	D#:)	8	Amount of 9 In-kind contribution contribution (\$) 6escription \$300.00	
		ions) 11 Employer (FOR NON	I I-JL	Check if travel outside of Texas. Complete Schedule T. JDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) 1		13 Contributor's job title	(FC	DR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)15 Law		15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr Gift/Awards/Memorials Expense Printing Expense Tr					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 F	ILER NAME	ER NAME 3								
	Sch: 1/13 Rpt: 27/39		Esquivel, Orlando J. (Mr.)					00087665				
4	Date	5 F	Payee name									
	04/05/2024	A	Academy									
6	Amount (\$) \$529.88	5	Payee address; City; State; Zip Code 500 N Jackson Rd Pharr, TX 78577									
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Prizes for golf tournament											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ıht		Office held				
	Date	F	Payee name									
	04/08/2024 Aguilar's Meat Market											
	Amount (\$) Payee address; City; State; Zip Code \$557.57 3317 W University Dr Edinburg, TX 78539											
	PURPOSE OF EXPENDITURE						side of Texas. Complete Schedule T. <, officeholder living expense urnament					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	Jht		Office held				
	Date	F	Payee name									
	04/05/2024	4	Amazon									
	Amount (\$) \$88.68		Payee address; City; 10 Terry Ave N	State;	Zip Coo	le						
		ç	Seattle, WA 98109									
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Event Expense	of this sche	edule)		ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense urnament				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office soug	ıht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)							
	Sch: 2/13 Rpt: 28/39		Esquivel, Orlando J. (Mr.)					00087665			
4	Date	5	Payee name								
	03/23/2024		Billy Leo Foundation								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$200.00		PO Box 1								
			La Joya, TX 78560								
8	PURPOSE	(a)	-		(h)	Description					
0	OF	(a)	Category (See Categories listed at the top of this sch Contributions/Donations Made By	edule)	(D)		outsid	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Candidate/Officeholder/Political Comm	ittee		Check if Austin	, тх,	, officeholder living expense			
						200					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght			Office held			
	Date		Payee name								
	01/23/2024		Boys & Girls Clubs of Edinburg								
_	Amount (\$)	┝		Zip Co	de						
	\$1,850.00		702 Cullen St	, zip co	uc						
	φ1,050.00		The Cullen St								
			Edinburg, TX 78539								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description					
	EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
						Sponsorship	, 17,				
						oponooromp					
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	aht			Office held			
	expenditure to benefit C/Oł				gint Onice neid						
_	Data	_									
	Date 04/19/2024		Payee name Brand Boosters								
	Amount (\$)		5	; Zip Co	de						
	\$653.41		301 N McColl Road								
			McAllen, TX 78504								
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.			
	LAFENDITORE							, officeholder living expense			
						Signs for golf	tou	urnament			
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght			Office held			
	expenditure to benefit C/OI										

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Pinting Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	FILER NAME	Filer ID (Ethics Commission Filers)								
	Sch: 3/13 Rpt: 29/39	Esquivel, Orlando J. (Mr.)	00087665								
4	Date 04/17/2024	Payee name Cantu, Javier									
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 1307 W Duranta Alamo, TX 78577									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Labor Check if Austin, TX, officeholder living expense Labor											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	01/24/2024	Carrera Communications									
Amount (\$) Payee address; City; State; Zip Code											
	\$10,500.00	135 Paseo del Prado Edinburg, TX 78542									
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	01/24/2024	Carrera, Miguel									
	Amount (\$) \$10,000.00	Payee address;City;State;Zip Code135 Paseo Del Prado									
		Edinburg, TX 78539									
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Til Food/Beverage Expense Polling Expense Til By - Gift/Awards/Memorials Expense Printing Expense Til					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 4/13 Rpt: 30/39		Esquivel, Orlando J. (M	r.)				00087665				
4	Date 04/09/2024		Payee name Carrera, Miguel									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$750.00		135 Paseo Del Prado Edinburg, TX 78539									
8	PURPOSE	(a)		d at the tap of this cab	odulo)	(b) Description						
	OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder nam	e C	Office sou	ht		Office held				
	Date		Payee name									
	04/09/2024		City of Edinburg									
Amount (\$) Payee address; City; State; Zip Code												
	\$500.00		415 W University Dr									
			Edinburg, TX 78539									
	PURPOSE OF EXPENDITURE		Category (See Categories liste Advertising Expense	d at the top of this sche	edule)			ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder nam	e C	Office soug	ht		Office held				
	Date		Payee name									
	04/06/2024		Escobedo, Pablo									
	Amount (\$) \$67.00		Payee address; City;	State;	Zip Coo	le						
			McAllen, TX 78501									
	PURPOSE OF EXPENDITURE		Category (See Categories liste Loan Repayment/Reimt		edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder nam	e C	Office soug	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan R Office O Polling Printing Salarie:	epaym Overhe Expen: Exper S/Wage	ent/Reimbursement ad/Rental Expense se ise es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2			•		3	Filer ID (Ethics Commission Filers)				
1	Sch: 5/13 Rpt: 31/39		Esquivel, Orlando J. (Mr.)					00087665				
4	Date	5	Payee name									
	04/16/2024		Esquivel, Amanda									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$5,363.72		2600 San Jose Dr									
			Edinburg, TX 78541									
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office so	ought	:		Office held				
	Date		Payee name									
	01/26/2024		Esquivel, Orlando									
Amount (\$) Payee address; City; State; Zip Code												
	\$10,768.28 2600 San Jose Dr											
			Edinburg, TX 78541									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Loan Repayment/Reimbursemen		(b)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H				nt Office held						
	Date		Payee name									
	04/06/2024		Garcia, Carlos									
	Amount (\$)	\vdash	Payee address; City;	State; Zip (Code							
	\$223.21		617 Jonquil									
			Mcallen, TX 78502									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Loan Repayment/Reimbursemen		(b)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense t for supplies				
	Complete ONLY if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office so	ought	[Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ov Polling Ex Printing E Salaries/V	ayme erhea kpense xpens Xpens Wages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 6/13 Rpt: 32/39		Esquivel, Orlando J. (Mr.)					00087665				
4	Date	5	Payee name									
	05/06/2024		Hidalgo County Bar Association									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$500.00		323 W Cano St									
			Edinburg, TX 78539									
8	PURPOSE	(a)			(h)	Description						
ľ	OF	(4)	Category (See Categories listed at the top of this Advertising Expense	schedule)	(0)		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE					Check if Austin	, TX,	officeholder living expense				
						Sponsorship						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held				
	Date		Payee name									
	04/29/2024		Los Lagos Golf									
Amount (\$) Payee address; City; State; Zip Code												
	\$4,280.00 1720 S Raul Longoria											
			Edinburg, TX 78539									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Event Expense	schedule)	(b)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense for golf tournament				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l Ight			Office held				
	Date		Payee name									
	04/06/2024		Maye, Jessica									
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode							
	\$213.73		9315 N 34th Lane									
			McAllen, TX 78504		[a]							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(¤)	Description	OUTSI	de of Texas. Complete Schedule T.				
	EXPENDITURE		Loan Repayment/Reimbursement				, тх,	officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l Jght			Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Ove Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Exp	rhead ense pense ages/	e 'Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME	R NAME 3 Filer ID (Ethics Co								
	Sch: 7/13 Rpt: 33/39		Esquivel, Orlando J. (Mr.)				00087665					
4	Date 05/03/2024	5	Payee name McAllen Professional Law Enforcement Associa	atior	1							
6	Amount (\$) \$200.00	7	7 Payee address; City; State; Zip Code PO Box 702338 McAllen, TX 78501									
8	PURPOSE OF EXPENDITURE	OF Contributions/Donations Made By										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office sou	ght			Office held					
	Date		Payee name									
	04/06/2024		Rick's Ice House									
Amount (\$) Payee address; City; State; Zip Code												
	\$200.00											
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Event Expense	ide of Texas. Complete Schedule T. , officeholder living expense nament								
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office sou	ght			Office held					
	Date		Payee name									
	03/12/2024		Rio Grande Valley Diabetes Association									
	Amount (\$) \$800.00		Payee address; City; State; Zip Co 3200 N 23rd St	de								
			McAllen, TX 78504									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Advertising Expense				le of Texas. Complete Schedule T. officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name Office sou	ght			Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 8/13 Rpt: 34/39	Esquivel, Orlando J. (Mr.)	00087665								
4	Date 04/04/2024	Payee name Sams Club									
6	Amount (\$) \$507.97	7 Payee address; City; State; Zip Code 7601 N 10th St McAllen, TX 78501									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Image: Check if Austin, TX, officeholder living expense Items for golf tournament Image: Check if Austin, TX, officeholder living expense											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	04/08/2024	Sams Club									
	Amount (\$) \$255.58	Payee address; City; State; Zip Code 7601 N 10th St									
	PURPOSE	McAllen, TX 78501 a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Items for golf tournament								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	04/08/2024	Sams Club									
	Amount (\$) \$519.31	Payee address;City;State;Zip Code7601 N 10th St									
		McAllen, TX 78501									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Cournament								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awa ttee Legal Se	verage Expense rds/Memorials Exper rvices		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract	Expense t Labor		Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment & R	elated Expense
				struction Guide e	explains	now to con	iplete this	form.	-			
1	Total pages Schedule F1:	1							Filer ID	(Ethics Co	mmission Filers)	
	Sch: 9/13 Rpt: 35/39	E:	squivel, Orlando	J. (Mr.)						00087665		
4	Date	5 Pa	ayee name									
	03/07/2024	S	hell									
6	Amount (\$)	7 Pá	ayee address;	City;	State;	; Zip Coo	le					
	\$70.98).98 .										
		М	ercedes, TX 78	570								
8	PURPOSE						(b) Descr	intion				
Ŭ	OF		ategory _{(See Catego} avel In District	bries listed at the top	of this sche	edule)			outsic	de of Texas. Com	plete Schedul	е Т.
	EXPENDITURE							eck if Austin	, TX,	officeholder living	expense	
							Trave	el for Ele	ectio	on Day		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officehold	er name	C	Office soug	ht			Office he	eld	
	Date	Pa	ayee name									
	04/06/2024	S	outh Texas Mob	ile Entertainm	ent							
	Amount (\$)	Pa	ayee address;	City;	State;	Zip Coo	le					
	\$937.50	1	502 Nassau			·						
		E	dinburg, TX 785	41								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Co Check if Austin, TX, officeholder livi DJ for golf tournament 						officeholder living		e T.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officehold	er name	C	Office soug	ht			Office he	eld	
	Date	Pa	ayee name									
	01/09/2024	1	arget									
	Amount (\$)	Pa	ayee address;	City;	State;	Zip Coo	le					
	\$30.31		400 N 10th St			·						
		м	callen, TX 7850	1								
	PURPOSE OF		ategory (See Catego	ories listed at the top	of this sche	edule)	(b) Descr	•		1(T		
	EXPENDITURE	E'	vent Expense							de of Texas. Com officeholder living	•	e I.
								tion iten		Sincenoider IIVIIIų	CAPENSE	
							20114		•			
	Complete ONLY if direct		ndidate/Officehold	er name		Office soug	ht			Office he	h	
	expenditure to benefit C/OF				C							

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)								
	Sch: 10/13 Rpt: 36/39	Esquivel, Orlando J. (Mr.)	00087665								
4	Date	5 Payee name									
	02/09/2024	Texas Exes Hidalgo									
6	Amount (\$) \$500.00	Payee address; City; State; Zip Code McAllen, TX 78501									
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE	Advertising Expense									
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
06/03/2024 Texas National Bank											
Amount (\$) Payee address; City; State; Zip Code											
	\$790.56	\$790.56 4908 S Jackson Rd Edinburg, TX 78539									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	02/05/2024	Texas National Bank									
	Amount (\$) \$788.27	Payee address; City; State; Zip Code 4908 S Jackson Rd									
		Edinburg, TX 78539									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ent								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp nmittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e 'Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)		
	Sch: 11/13 Rpt: 37/39		Esquivel, Orlando J. (Mr.)						00087665	· · ·		
4	Date 03/04/2024	5	Payee name Texas National Bank									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
-	\$737.54		4908 S Jackson Rd Edinburg, TX 78539									
			_									
8	PURPOSE OF EXPENDITURE											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Office sou	ght			Office he	ld		
	Date		Payee name									
	03/19/2024		Texas National Bank									
	Amount (\$)		Payee address; City;	State	; Zip Co	de						
	\$100,000.00 4908 S Jackson Rd											
			Edinburg, TX 78539									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the to Loan Repayment/Reimbursen		edule)			, тх,	de of Texas. Comp officeholder living			
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	C	Dffice sou	ght			Office he	ld		
	Date		Payee name									
	04/24/2024		Texas National Bank									
-	Amount (\$)	⊢	Payee address; City;	State	; Zip Co	de						
	\$75,228.89		4908 S Jackson Rd	,	,							
			Edinburg, TX 78539									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the to Loan Repayment/Reimbursen	-	edule)			, TX,	de of Texas. Comp officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Dffice sou	ght			Office he	ld		

EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)			
-	Sch: 12/13 Rpt: 38/39	Esquivel, Orlando J. (Mr.)	00087665			
4	Date 04/17/2024	5 Payee name USPS				
6	Amount (\$) \$85.00	7 Payee address; City; State; Zip Code 410 S Jackson Rd Edinburg, TX 78539				
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense			
9	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	Date	Payee name				
	04/04/2024	WB Liquors				
	Amount (\$) \$670.98	Payee address; City; State; Zip Code 1401 W Kelly Pharr, TX 78577				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense tournament			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held Office held			Office held			
Date Payee name						
	04/08/2024	Walmart				
	Amount (\$) Payee address; City; State; Zip Code \$56.67 724 W University Dr					
		Edinburg, TX 78539				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense Durnament			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Of Food/Beverage Expense Pc Gift/Awards/Memorials Expense Pr	an Repayment/Reimbursement fice Overhead/Rental Expense lling Expense nting Expense laries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
Sch: 13/13 Rpt: 39/39	Esquivel, Orlando J. (Mr.)		00087665		
4 Date	5 Payee name				
04/08/2024	Walmart				
6 Amount (\$) \$30.81	 7 Payee address; City; State; Z 724 W University Dr Edinburg, TX 78539 	ip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Event Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense f tournament		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e sought	Office held		
Date	Payee name				
04/08/2024	Walmart				
Amount (\$)	Payee address; City; State; Z	in Code			
\$183.90	724 W University Dr Edinburg, TX 78539				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Event Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense f tournament		
Complete ONLY if direct expenditure to benefit C/OF		e sought	Office held		