FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088246 46 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Juan Ramon NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Alvarez CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 112 S. 12th Avenue MAILING Amount Receipt # **ADDRESS** Change of Address Edinburg, TX 78539 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. David NAME NICKNAME LAST **SUFFIX** Gorena STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 420 W. University **ADDRESS** (Residence or Business) Edinburg, TX 78539 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 381-5606 **PHONE** REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 05/19/2024 06/30/2024

ELECTION DATE

Year

Day

11/05/2024

OFFICE HELD (if any)

None Hidalgo

Month

10 ELECTION

11 OFFICE

Primary

X General

ELECTION TYPE

12 OFFICE SOUGHT (if known)

District Judge District 332nd

Other

Runoff

Special

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Alvarez, Juan Ramor	ı (Mr.)	14 Filer ID 00088246	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	committees to support the reholder's knowledge or otice of such expenditures.		
Additional Pages COMMITTEE TYPE COMMITTEE NAME				
_	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	(NS)	\$ 0.00
EXPENDITURE TOTALS	· ·	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 119,539.26
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE	LAST DAY OF THE	\$ 119,539.26
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A	AS OF THE LAST DAY	\$ 119,539.26
17 AFFIDAVIT				
		I swear, or affirm, under pen- true and correct and includes under Title 15, Election Code	all information required	
		Mr.	Juan Ramon Alvarez	
		Signature	of Candidate or Officeho	older
AFFIX NOT	TARY STAMP / SEAL AB	OVE		
Sworn to and subsc	ribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	er administering oath	Printed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 46						
18 FILER NAME Alvarez, Juan Ramon (Mr.) 19 Filer ID (Ethics Commission Filers) 00088246						
l	LE SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT			
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$			
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$ 78,422.00			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 119,539.26			
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
9.	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 CONTRIBUTION	ONS	\$			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			

	LOANS (J	UDICIAL)			SCHEDULE E(J)	
	The Instruction Guide explains how to complete this form.			1	pages Schedule E(J): : 1/8 Rpt: 4/46	
2	FILER NAME Alvarez, Juan Ra	amon (Mr.)		3 Filer ID 000882	(Ethics Commission Filers) 46	
4	TOTAL OF UN	IITEMIZED LOANS			\$	
5	Date of loan 05/23/2024	7 Name of lender Out-of-state PA	C (ID#:)	9 Loan Amount (\$) \$3,000.00	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate	
	No	Weslaco, TX 78596			11 Maturity Date	
12	Lender's Principal	Occupation	13 Lender's Job Title			
	Attorney		Attorney			
14	Lender's Employer Alvarez & Canal		15 Law Firm of lender's spous	se (if any)		
16		aw firm of parent(s) (if any)	<u> </u>			
17 Description of Collateral X None		18 Check if personal funds were deposited into political account (See Instructions)				
19 GUARANTOR INFORMATION 20 Name of guarantor		22 Amount Guaranteed (\$)		22 Amount Guaranteed (\$)		
22	X not applicable	21 Guarantor address; City; State;	Zip Code Zip Code			
	Guarantor's Princi					
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's spouse (if any)			
27	If guarantor is child	d, law firm of parent(s) (if any)				

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	n Guide explains how to complete this f	orm.		nges Schedule E(J): 8 Rpt: 5/46
2	FILER NAME Alvarez, Juan Ra	amon (Mr.)		3 Filer ID 000882	(Ethics Commission Filers)
4	TOTAL OF UN	ITEMIZED LOANS			\$
5	Date of loan 05/30/2024	7 Name of lender out-of-state PA Canales, Melisa (Mrs.)	C (ID#:)	9 Loan Amount (\$) \$14,022.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Weslaco, TX 78596			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Attorney		Attorney		
14	Lender's Employer Alvarez & Canal		15 Law Firm of lender's spous	se (if any)	
16	If lender is child, la	w firm of parent(s) (if any)			
17 Description of Collateral X None		18 Check if personal funds we	ere deposited	d into political account (See Instructions)	
N tone		22 Amount Guaranteed (\$)			
13	INFORMATION	20 Name of guarantor			ZZ Amount Guaranteeu (ψ)
23	x not applicable Guarantor's Princi	21 Guarantor address; City; State;	Zip Code Zip Code		
	- Cuarantor 5 i inion	ou. Goodpano.			
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

	LOANS (J	UDICIAL)				SCHEDULE E(J)
	The Instruction	on Guide explains how to complete this f	orm.	1		es Schedule E(J): Rpt: 6/46
2	FILER NAME Alvarez, Juan R	amon (Mr.)		1	er ID 08824	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS		<u> </u>		\$
5	Date of loan 06/01/2024	7 Name of lender	C (ID#:			9 Loan Amount (\$) \$4,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code			10 Interest Rate
	No	Weslaco, TX 78596				11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title			
	Attorney		Attorney			
14	Lender's Employe	r/I aw Firm	15 Law Firm of lender's spous	se (if an	v)	
_	Alvarez & Canal		and a second of the second of	,	,,	
10						
10	in lender is child, is	aw firm of parent(s) (if any)				
17 Description of Collateral		18 Check if personal funds we	ere depo	osited i	into political account	
X None					(See Instructions)	
19 GUARANTOR INFORMATION 20 Name of guarantor		,		,	22 Amount Guaranteed (\$)	
	X not applicable	21 Guarantor address; City; State;	Zip Code			
23	Guarantor's Princi	pal Occupation	24 Guarantor's Job Title			
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if	any)	
27	' If guarantor is chile	d, law firm of parent(s) (if any)	I			

	LOANS (J	IUDICIAL)				SCHEDULE E(J)
	The Instruction Guide explains how to complete this form.		form.	1		ges Schedule E(J): 3 Rpt: 7/46
2	FILER NAME Alvarez, Juan R	amon (Mr.)		1	Filer ID 000882	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS		<u> </u>		\$
5	Date of loan 06/06/2024	7 Name of lender	AC (ID#:)	9 Loan Amount (\$) \$13,400.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code			10 Interest Rate
	No	Weslaco, TX 78596				11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title			
	Attorney		Attorney			
14	Lender's Employe	r/Law Firm	15 Law Firm of lender's spous	se (if	anv)	
_	Alvarez & Canal		20 200 Film of foliage o operation		u,	
10						
10	i il lender is crilla, ia	aw firm of parent(s) (if any)				
17 Description of Collateral		18 Check if personal funds we	ere d	eposited	into political account	
X None					(See Instructions)	
19 GUARANTOR INFORMATION 20 Name of guarantor					22 Amount Guaranteed (\$)	
	X not applicable	21 Guarantor address; City; State;	Zip Code			
23	Guarantor's Princi	pal Occupation	24 Guarantor's Job Title			
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse	e (if any)	
27	' If guarantor is chile	d, law firm of parent(s) (if any)				

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	n Guide explains how to complete this f	orm.	I	nges Schedule E(J): 8 Rpt: 8/46
2	FILER NAME Alvarez, Juan Ra	amon (Mr.)		3 Filer ID 000882	(Ethics Commission Filers)
4	TOTAL OF UN	ITEMIZED LOANS			\$
5	Date of loan 06/12/2024	7 Name of lender out-of-state PA Canales, Melisa (Mrs.)	C (ID#:)	9 Loan Amount (\$) \$15,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Weslaco, TX 78596			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Attorney		Attorney		
14	Lender's Employer Alvarez & Canal		15 Law Firm of lender's spous	se (if any)	
16	If lender is child, la	w firm of parent(s) (if any)	<u> </u>		
17 Description of Collateral		18 Check if personal funds we	ere deposited	d into political account (See Instructions)	
None -					
19 GUARANTOR INFORMATION 20 Name of guarantor 22 Amount Gua		22 Amount Guaranteed (\$)			
23	X not applicable Guarantor's Princi	21 Guarantor address; City; State; pal Occupation	Zip Code 24 Guarantor's Job Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	n Guide explains how to complete this f	orm.	I	iges Schedule E(J): 8 Rpt: 9/46
2	FILER NAME Alvarez, Juan Ra	amon (Mr.)		3 Filer ID 000882	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS			\$
5	Date of loan 06/28/2024	7 Name of lender out-of-state PA Canales, Melisa (Mrs.)	C (ID#:)	9 Loan Amount (\$) \$4,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Weslaco, TX 78596			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Attorney		Attorney		
14	Lender's Employe Alvarez & Canal		15 Law Firm of lender's spous	se (if any)	
16	If lender is child, la	w firm of parent(s) (if any)			
17 Description of Collateral X None		18 Check if personal funds were deposited into political account (See Instructions)			
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
22	X not applicable	21 Guarantor address; City; State;	Zip Code Zip Code		
23	Guarantor's Princi	pai Occupation	24 Guardinoi 3 305 Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	n Guide explains how to complete this f	orm.		nges Schedule E(J): 8 Rpt: 10/46
2	FILER NAME Alvarez, Juan Ra	amon (Mr.)		3 Filer ID 000882	(Ethics Commission Filers)
4	TOTAL OF UN	ITEMIZED LOANS			\$
5	Date of loan 05/24/2024	7 Name of lender Out-of-state PA Gonzalez, Lizette (Mrs.)	C (ID#:)	9 Loan Amount (\$) \$15,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Alamo, TX 78516			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Legal Secretary		Legal Secretary		
14	Lender's Employe		15 Law Firm of lender's spous	e (if any)	
	Alvarez & Canal				
16	If lender is child, la	w firm of parent(s) (if any)			
17 Description of Collateral			18 Check if personal funds we	ere deposited	
	X None				(See Instructions)
19 GUARANTOR INFORMATION 20 Name of guarantor				22 Amount Guaranteed (\$)	
	X not applicable	21 Guarantor address; City; State;	Zip Code		
23	Guarantor's Princi	pal Occupation	24 Guarantor's Job Title		
25	Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	on Guide explains how to complete this f	orm.		nges Schedule E(J): 8 Rpt: 11/46
2	FILER NAME Alvarez, Juan Ra	amon (Mr.)		3 Filer ID 000882	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS			\$
5	Date of loan 05/28/2024	7 Name of lender Out-of-state PA Gonzalez, Lizette (Mrs.)	C (ID#:)	9 Loan Amount (\$) \$10,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Alamo, TX 78516			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		•
	Legal Secretary		Legal Secretary		
14	Lender's Employe	r/Law Firm	15 Law Firm of lender's spous	se (if any)	
	Alvarez & Canal				
16	If lender is child, la	aw firm of parent(s) (if any)			
17	Description of Coll	ateral	18 Check if personal funds we	ere deposited	d into political account
	X None		(See Instructions)		
19 GUARANTOR 20 Name of guarantor		<u> </u>		22 Amount Guaranteed (\$)	
	INFORMATION				
	X not applicable	21 Guarantor address; City; State;	Zip Code		
23	Guarantor's Princi	pal Occupation	24 Guarantor's Job Title		
25	Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/35 Rpt: 12/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/25/2024	ANDRADE, MARIBEL
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,000.00	406 W. LOOP 374
		PALMVIEW, TX 78572
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ĭ	expenditure to benefit C/O	
	Date	Dayso name
	05/25/2024	Payee name Alanis, Maria
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 1406 1st In
	Φ2,000.00	1400 15(
		andra in TV 70570
		palmview, TX 78572
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Get out the vote
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/25/2024	Alaniz, Jerry
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Poll Worker
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/35 Rpt: 13/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/28/2024	Altamirano, Cassandra
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$800.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) a
0	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Get Out The Vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	05/25/2024	Alvarado, Jorge A.
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Signs
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/24/2024	Bazaldua, Brenda Guadalupe Gonzalez
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 135 Paseo Del Prado
	φουο.υυ	133 Faseo Del Flado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
	LAFLINDITORE	Check if Austin, TX, officeholder living expense Get out the vote
		Get out the vote
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (orders a cottogon pot listed above)

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/35 Rpt: 14/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/20/2024	Caballero, Abel (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$800.00	264 West Mile 13 North
		Weslaco, TX 78599
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Get Out The Vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	05/19/2024	Cano, Albert
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	135 Paseo Del Prado
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Get out the vote
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	05/24/2024	Cano, Mario
_	Amount (\$)	Payee address; City; State; Zip Code
	\$700.00	135 Paseo Del Prado
	Ψ100.00	133 Faseo Dei Flauo
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Get Out The Vote
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		avel Out of District THER (enter a category not listed above)
_		<u> </u>	
1	Total pages Schedule F1: Sch: 4/35 Rpt: 15/46		ler ID (Ethics Commission Filers) 0088246
4	Date	5 Payee name	
	06/13/2024	Carrera, Mike (Mr.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$17,184.26	135 Paseo Del Prado	
		Edinburg, TX 78542	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		of Texas. Complete Schedule T.
	EXPENDITORE		ceholder living expense
		Car Rentals, Food,	Polling Expenses
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiulture to beliefit C/Oi	511	
	Date	Payee name	
	05/20/2024	Casarez, Pablo P. (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,200.00	135 Paseo Del Prado	
		Edinburg, TX 78542	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside to Check if Austin, TX, offi	of Texas. Complete Schedule T.
		Get Out the Vote	certoider living expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
H	Date	Payee name	
	05/25/2024	Castaneda, Linda	
	Amount (\$) \$600.00		
	\$000.00	135 Paseo Dei Plauo	
		Edinburg, TX 78542	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Polling Expense Check if travel outside of Check if Austin, TX, offi	of Texas. Complete Schedule T.
		Poll Watcher	certoider iving expense
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/35 Rpt: 16/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/20/2024	Castillo, Jose
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$800.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out The Vote
		Set out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	05/24/2024	Castillo, Maria Alicia
	Amount (\$)	Payee address; City; State; Zip Code
	\$700.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out The Vote
		Get Out The Vote
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/23/2024	Coronado, Barnabe (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Get Out the Vote
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Giff(Alwards/Me)

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	,
1 Total pages Schedule F1: Sch: 6/35 Rpt: 17/46	Alvarez, Juan Ramon (Mr.) O0088246
4 Date	5 Payee name
05/24/2024	Crum, San Juanita
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,780.00	135 Paseo Del Prado
	Edinburg, TX 78542
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Cot out the custom
	Get out the vote
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief 6/01	•
Date	Payee name
05/25/2024	Elizondo, Sylvia
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	135 Paseo Del Prado
	Edinburg, TX 78542
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Get out the vote
	Get out the vote
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· ·
Date	Payee name
05/24/2024	Escamilla, Lupita
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	135 Paseo Del Prado
Φ300.00	100 i 4000 Dei Fiauo
	Ediahum TV 705 40
	Edinburg, TX 78542
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Poll Worker
	F OII WOLKEL
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
,	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/35 Rpt: 18/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/25/2024	Estrada, David Carreon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out the Vote
		Set out the vote
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	05/24/2024	Felix, Fernando
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,250.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Get out the vote
		Cot out the vote
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date	Payee name
	05/25/2024	Flores, Anna
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Poll Manager/food
	Complete ONLY if direct	Candidate/Officeholder name Office acusts
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	,
1 Total pages Schedule F1:	
Sch: 8/35 Rpt: 19/46	Alvarez, Juan Ramon (Mr.) 00088246
4 Date	5 Payee name
05/24/2024	Flores, Anna
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$750.00	135 Paseo Del Prado
	Edinburg, TX 78542
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Delta Polls
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
05/28/2024	Flores, Anna
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	135 Paseo Del Prado
	Edinburg, TX 78542
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Food and Drink
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialture to beliefft C/OI	'
Date	Payee name
05/25/2024	Flores, Jay Dee
Amount (\$)	Payee address; City; State; Zip Code
\$400.00	135 Paseo Del Prado
	Edinburg, TX 78542
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
Di Libilone	Check if Austin, TX, officeholder living expense
	Poll Worker
Complete CNII V if diret	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/35 Rpt: 20/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/28/2024	Flores, SYLVIA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	2509 paseo encantado
		mission, TX 78572
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Poll watcher
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_		
	Date	Payee name
	05/25/2024	Flores, SYLVIA
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	2509 paseo encantado
		mission, TX 78572
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign consultant
		campaigh consultant
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Device same
	05/24/2024	Payee name Flores, Yesenia
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	135 Paseo Del Prado
		Edinburg, TX 78542
l	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	PURPOSE OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	OF	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Get Out The Vote
	OF	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Get Out The Vote Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Get Out The Vote Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Get Out The Vote Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/35 Rpt: 21/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/19/2024	Galvan, Sandra R. (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out the Vote
		Get out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	05/28/2024	Garcia, Angie
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Poll Worker
		1 on worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date 05/24/2024	Payee name
		Garcia, Anita
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,680.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get out the vote
		Get out the vote
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/35 Rpt: 22/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/21/2024	Garcia, Aurelio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out The Vote
		Get out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊨	Date	Payee name
	05/19/2024	Garcia, Humberto
	Amount (\$)	
	\$675.00	135 Paseo De Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Poll Worker
		1 on Worker
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	05/24/2024	Garcia, Juan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
	φ500.00	133 Paseo Del Flado
		Edinburg TV 70540
		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Poll Worker
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

l	Credit Card Payment	The Instruction Guide explains how to com	ple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 12/35 Rpt: 23/46	Alvarez, Juan Ramon (Mr.)		00088246
4	Date	5 Payee name		<u> </u>
	05/24/2024	Garcia, Juan		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
l	\$500.00	135 Paseo Del Prado		
		Edinburg, TX 78542		
8	PURPOSE	(6) 0 .	b)	Description
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Fees	,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Poll Expenses
L				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht	Office held
L				
	Date	Payee name		
	05/24/2024	Garcia, Mauricio Jose		
l	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$300.00	135 Paseo Del Prado		
		Edinburg, TX 78542		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Get Out The Vote
				out out the vote
⊢	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
l	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·		
H	Date	Payee name		
	05/24/2024	Garza, Belinda		
H	Amount (\$)	Payee address; City; State; Zip Cod	او	
l	\$600.00	135 Paseo Del Prado		
l	¥355.65	200 / 0000 2011 / 0000		
		Edinburg, TX 78542		
┝	PURPOSE		'b\	Description .
l	OF	(a) Category (See Categories listed at the top of this schedule) Fees	,D)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	rees		Check if Austin, TX, officeholder living expense
l				Get out the vote
L				
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
L	expenditure to benefit C/OI	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/35 Rpt: 24/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/25/2024	Garza, Irene
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	1018 e mcintyre
		edinburg , TX 78541
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get out the vote
		Set out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
<u> </u>	Data	
	Date	Payee name
	06/24/2024	Garza, Marcello (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Cot Out the Vote
		Get Out the Vote
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	05/24/2024	Garza, Ruth
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ	Cot Out The Nets
		Get Out The Vote
	Complete ONLY if alias -t	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Gift/Awards/Memo Legal Services The Instruction	rials Expense Guide explains		/ages	/Contract Labor		Travel Out of OTHER (ente	District r a category not lis	ted above)
1	Total pages Cabadyla 51:	12	EILED MANAS					11.0.0.0	-	Filor ID	(Ethiop Com	umiccion Filera)
	Total pages Schedule F1:				· \				3		•	mission Filers)
	Sch: 14/35 Rpt: 25/46	L	Alvarez, Ju	an Ramon (M	r.)					00088246)	
4	Date	5	Payee name									
	05/19/2024		Gonzalez, 3	Jaime								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$600.00		135 Paseo			•						
			Edinburg T	V 70E 12								
Ļ		_	Edinburg, T									
8	PURPOSE OF	(a)			at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Polling Exp	ense				Check if travel of Check if Austin			omplete Schedule	Г.
								Get Out the V			ing exhelise	
								Jot Out the V		-		
Ļ	Complete ONII V if alias -t	Ц	Condidate /Off	oobolder resiss		Office as:	ab+			Office -	hold	
9	Complete ONLY if direct expenditure to benefit C/OI		Januidate/Offi	ceholder name	. (Office sou	ynt			Office	nela	
L												
	Date		Payee name									
	05/23/2024		Gonzalez, 3	lessica Lynn								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$500.00		135 Paseo	Del Prado								
			Edinburg, T	Y 705/12								
_	DUDD05-						<i>a</i> :					
	PURPOSE OF	(a) 			at the top of this sch	nedule)	(b)	Description	OI :+	do of Tour-	malate Caklist	.
	EXPENDITURE		Polling Exp	ense				Check if travel of Check if Austin			omplete Schedule ing expense	1.
								Poll Worker	, 17,	, officeriolaer liv	ing expense	
								. On WORKE				
\vdash	Complete ONLY if direct	Ц	Candidata/Offi	ceholder name	. ,	Office sou	ab+			Office	hold	
	Complete ONLY if direct expenditure to benefit C/OI		Janunate/UIII	cenoidei Haiffe	. (Onice Sou	yııl			Office	nciu	
L		_										
	Date		Payee name									
	05/26/2024		Guajardo, F	Roberto								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$600.00		135 Paseo	Del Prado								
			Edinburg, T	X 78542								
_	DUDDOCE	(2)				<u> </u>	/h\	December				
	PURPOSE OF	^(a)		ee Categories listed	at the top of this sch	nedule)	(n)	Description Check if travel	nutci	de of Texas Co	omplete Schedule	т
	EXPENDITURE		Fees					Check if Austin				
								Get out the v			- •	
									•			
_	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	. (Office sou	aht			Office	held	
	expenditure to benefit C/OI			- 5	•	50 500	g. 11					
_												

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		<u> </u>
1	Total pages Schedule F1: Sch: 15/35 Rpt: 26/46	2 FILER NAME Alvarez, Juan Ramon (Mr.) 3 Filer ID (Ethics Commission Filers) 00088246
4	Date	5 Payee name
	05/25/2024	Guerrero, Estella
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Get out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	05/24/2024	Hernandez, Agripina
	Amount (\$)	
	\$400.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Poll Worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit 6/61	<u>'</u>
	Date	Payee name
	05/23/2024	Hernandez, Felipe, Jr.
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
		-
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if the relevant of Taylor Campiloto School of Taylor Campiloto Scho
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Poll Worker
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries/V	Vages	/Contract Labor		Travel Out of Di OTHER (enter a	strict category not listed above	e)
1	Total pages Schedule F1:	2 FILER NAME	:				3	Filer ID	(Ethics Commission	Filers)
_	Sch: 16/35 Rpt: 27/46		an Ramon (Mr.)					00088246	(,
_			an ramon (wii.)					00000240		
4	Date	5 Payee name								
	05/24/2024	Hernandez	Suhei							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$1,000.00	135 Paseo	Del Prado							
		Edinburg, T	Y 79542							
			X 70342							
8	PURPOSE OF	· ·	ee Categories listed at the to	p of this schedule)	(b)	Description				
	EXPENDITURE	Fees				=			plete Schedule T.	
						Get out the vo		officeholder living	g expense	
						Get out the vi	Jie			
9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ıght			Office h	eld	
	experiulture to benefit C/Oi	1								
	Date	Payee name								
	05/21/2024	Jasso, Carl	os (Mr.)							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	nde					
	\$1,000.00	_	9th Avenue							
	Ψ1,000.00	1403 3000	3017 Wellac							
		edinburg, T	X 78539							
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE	Consulting	Expense			=			plete Schedule T.	
						ш		officeholder living	g expense	
						Edinburg Con	isu	ıtanı		
	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ıght			Office h	eld	
	experialiture to benefit 6/01	1								
	Date	Payee name								
	05/24/2024	Jasso, Carl	os (Mr.)							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$1,000.00	1	9th Avenue	O.a.o,p	,					
	Ψ1,000.00	1403 3000	3017 Wende							
		edinburg, T	X 78539							
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE	Consulting	Expense			ш			plete Schedule T.	
	LXI LINDITORL							officeholder livin	g expense	
						Campaign Ma	ana	ıger		
	Complete ONLY if direct		ceholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	٦								
										1070 0

SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries	/Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAMI	<u> </u>				3	Filer ID	(Ethics Commission Filers)
	Sch: 17/35 Rpt: 28/46		an Ramon (Mr.)					00088246	
4	Date	5 Payee name							
	05/24/2024	Jorge, Alva	rado						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode				
	\$1,000.00	135 Paseo	Del Prado						
		Edinburg, 1	X 78542						
8	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees				_		de of Texas. Com	
						Get out the vo		officeholder living	expense
						Oct out the vi	oic		
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	uaht			Office he	7ld
	expenditure to benefit C/OI		iocholaci Hamo	011100 00	agni			011100 110	, i
H	Date	Payee name							
	05/28/2024	Lozano, Ad							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$1,700.00	135 Paseo	•	, ,					
	, , , , , , , , , , , , , , , , , , ,								
		Edinburg, 1	X 78542						
	PURPOSE OF	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
	EXPENDITURE	Food/Beve	rage Expense					de of Texas. Com officeholder living	
						Food/Beverage			
						•			
	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	Н							
	Date	Payee name							
	05/19/2024	MERCADO	, IRENE						
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$1,000.00	910 S. 3RD	AVE.						
		EDINBURG	G , TX 78539						
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Polling Exp	ense					de of Texas. Com	•
						Get out the V		officeholder living	expense
						Jet out the V	Jie	•	
_	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	l uaht			Office he	eld
	expenditure to benefit C/O			C.1100 30	~9·11			000 110	

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/35 Rpt: 29/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
L	05/25/2024	Martinez, Angelica
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get out the vote
		Get out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/24/2024	Martinez, Gilbert
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$1,600.00	135 Paseo Del Prado
		edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out the Vote
		Cot out the vote
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/20/2024	Martinez, Javier
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out The Vote
		Get Out The Vote
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
1		

SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mpl	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME		3 F	iler ID	(Ethics Commission Filers)
	Sch: 19/35 Rpt: 30/46	Alvarez, Juan Ramon (Mr.)			00088246	
4	Date	5 Payee name		I		
	05/19/2024	Mendoza, Dora Olivares (Mrs.)				
6	Amount (\$)	7 Payee address; City; State; Zip Co	de			
	\$1,600.00	4809 Curry Rd.				
		Edinburg, TX 78542				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Consulting Expense		Check if travel outside	e of Texas. Com	plete Schedule T.
	EXPENDITURE			Check if Austin, TX, o	fficeholder living	expense
				Get Out the Vote		
_	2					
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	gnt		Office he	21 0
	Date	Payee name				
	05/22/2024	Moreno, Javier (Mr.)				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$500.00	135 Paseo Del Prado				
		Edinburg, TX 78542				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Polling Expense		Check if travel outside		
				Check if Austin, TX, o	iliceriolder living	expense
				Set Sut the Vote		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	l aht		Office he	eld
	expenditure to benefit C/O		· • · · ·			
	Date	Payee name				
	05/24/2024	Munoz, Linda				
	Amount (\$)	Payee address; City; State; Zip Co	nda			
	\$900.00	135 Paseo Del Prado	Juc			
	Ψ300.00	100 1 4000 2011 1440				
		Edinburg, TX 78542				
	DUDD005	-	4.			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(a)	Description Check if travel outside	of Texas Com	nlete Schedule T
	EXPENDITURE	Consulting Expense		Check if Austin, TX, o		
				Get Out the Vote		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght		Office he	eld
	expenditure to benefit C/O	1				
_						

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
_	Sch: 20/35 Rpt: 31/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/25/2024	Murillo, Caridad (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,900.00	206 West 3rd Street
		San Juan, TX 78589
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get out the vote
		Get out the vote
_	0 1: 0 1: 0	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/25/2024	Murillo, Mario (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	1013 E. 13th Street
		San Juan, TX 78589
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		poll watcher
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/24/2024	Noyola, Roxanne
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out The Vote
		Get Out The Vote
	Complete ONLY if direct	Condidate/Officeholder name Office pought
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/35 Rpt: 32/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/24/2024	ORTIZ, ORALIA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	4908 AMELIA LANE
		DONNA, TX 78537
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense get out the vote
		get out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
H	Date	Payee name
	05/22/2024	Ocana, Francisca
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
	Φ1,000.00	133 Paseo Dei Piauo
		F. I. J TV 70540
L		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Get out the vote
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/24/2024	Ochoa, Esperanza
H	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
	φου.υυ	100 1 4300 2011 1440
		Edinburg, TX 78542
L	PURPOSE	I m.
	OF	(a) Category (See Categories listed at the top of this schedule) Dolling Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Poll Watcher
一	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	1
一		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/35 Rpt: 33/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	06/06/2024	Palacio De Destiny
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,470.00	1502 N. Border Ave.
		Weslao, TX 78596
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Watch Party Food/Beverage
		vvaicii i arty i ood/Deverage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	05/25/2024	Palomin, Raul (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	312 West Adkins St.
		Edcouch, TX 78538
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out The Vote
		Get Out The Vote
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	Date	Payee name
	05/24/2024	Parra, San Juanita
	Amount (\$)	Payee address; City; State; Zip Code
	\$700.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out The Vote
		Get Out The Vote
	Operation ONLY if allowed	Our stide to 10 ff as health are nown.
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/35 Rpt: 34/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/23/2024	Patricia, Balli
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get out the vote
		Set out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	dandidate/Oniceriolder flame Onice sought Onice neid
_		
	Date	Payee name
	05/24/2024	Pena, Rosa
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Get out the vote
		Cot out the vote
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Data	
	Date	Payee name
	05/24/2024	Perez, Esmeralda
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Poll worker
	Complete ONLY if allowers	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees Food/Beverage Expense

Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/35 Rpt: 35/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/22/2024	Pineda, Jessica
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
L		Edinburg, TX 78542
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Get out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/23/2024	Quintero, Yolanda M.
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get Out The Vote
		Set out the vote
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/25/2024	RODRIGUEZ, LETICIA
	Amount (\$)	Payee address; City; State; Zip Code
	\$700.00	115 W 9TH ST
		SAN JUAN, TX 78589
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Get out the vote
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	
\vdash	•	
1		

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
ㄴ			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 25/35 Rpt: 36/46	Alvarez, Juan Ramon (Mr.)	00088246
4	Date	5 Payee name	
	05/25/2024	Ramirez, Guadalupe	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5,250.00	135 Paseo Del Prado	
	,		
		Edinburg, TX 78542	
Ļ			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	(=
	EXPENDITURE	Consulting Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Campaign C	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
٦	expenditure to benefit C/O		Office field
⊨			
	Date	Payee name	
	05/28/2024	Ramos, David	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$750.00	135 Paseo Del Prado	
		Edinburg, TX 78542	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE		n, TX, officeholder living expense
		Get out the V	/ote
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	05/22/2024	Reyes, Librada	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$600.00	135 Paseo Del Prado	
		Edinburg, TX 78542	
	DUDD 0.05		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 003	n, TX, officeholder living expense
		Get out the v	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
\vdash			
1			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/35 Rpt: 37/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/31/2024	Rocha, Natali Yvette
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Poll Worker
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_	Data	
	Date	Payee name
	05/25/2024	Rodriguez, Hilda
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Poll worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/25/2024	Rodriguez, Jesus
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Poll Watcher
	Operation ONE V. C. P.	Overfield to 100% and believe to 100% and 100% a
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
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SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/35 Rpt: 38/46	Alvarez, Juan Ramon (Mr.)
4	Date	5 Payee name
	05/24/2024	Rodriguez, Laura
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$700.00	135 Paseo Del Prado
	Ψ100.00	100 1 4300 2011 1440
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Poll Worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	05/25/2024	SALINAS, ARTURO (Mr.)
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	135 Paseo Del Prado
	\$1,500.00	133 Paseo Dei Piado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Cot Out The Nate
		Get Out The Vote
┡	0 1: 0 1: 0	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	05/30/2024	Saenz, Marissa
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Get Out The Vote
dash		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T. 1 0 1 1 54	<u> </u>	_
1	Total pages Schedule F1: Sch: 28/35 Rpt: 39/46	2 FILER NAME Alvarez, Juan Ramon (Mr.) 3 Filer ID (Ethics Commission Filers) 00088246	
4	Date	5 Payee name	\neg
	05/23/2024	Salas, Michelle LeAnn	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	135 Paseo Del Prado	
		Edinburg, TX 78542	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense	
		Get out the vote	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_	Date	Payee name	=
	06/10/2024	Payee name Salazar, Cabriol Michael (Mr.)	
		Salazar, Gabriel Michael (Mr.)	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	1417 Kendalia	
		San Antonio, TX 78224	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Data Consulting	
		Data Consulting	
			_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
H	Date	Payeo namo	=
		Payee name Sanahar, Rama (Mr.)	
	05/22/2024	Sanchez, Romo (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	135 Paseo Del Prado	
		Edinburg, TX 78542	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Get Out The Vote	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/35 Rpt: 40/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/24/2024	Sandoval, Erica
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Get out the vote
		Set out the vote
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Data	
	Date	Payee name
	05/24/2024	Segura, Alicia
	Amount (\$)	Payee address; City; State; Zip Code
	\$850.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LAFEINDITORE	Check if Austin, TX, officeholder living expense
		Get out the vote
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/25/2024	Soliz, Nelida
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Poll Worker
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiorare to beliefft C/O	'

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/35 Rpt: 41/46	Alvarez, Juan Ramon (Mr.)	00088246
4	Date	5 Payee name	
	05/28/2024	Suarez, Jose Angel	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$600.00	135 Paseo Del Prado	
		Edinburg, TX 78542	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Polling Expense	outside of Texas. Complete Schedule T.
		Check if Austin, Poll Worker	, TX, officeholder living expense
		I dii worker	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Cindo itela
_	Date	Payee name	
	05/22/2024	Synesi, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	-
	\$3,500.00	135 Paseo Del Prado	
	40,000.00	130 1 4300 23.11 1443	
		Edinburg, TX 78542	
	DUDDOCE	<u> </u>	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Advertising Expenses	outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	, TX, officeholder living expense
		Marketing Exp	pense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	05/24/2024	Tanguma, Cynthia	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$750.00	135 Paseo Del Prado	
		Edinburg, TX 78542	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense	outside of Texas. Complete Schedule T.
	EXI ENDITORE		, TX, officeholder living expense
		Get Out The V	voie
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

Candidate/Officeholder/Pol Credit Card Payment	ical Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F	.: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 31/35 Rpt: 42/4	Alvarez, Juan Ramon (Mr.) 00088246
4 Date	5 Payee name
05/24/2024	Turner, Sabrina (Ms.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.0	135 Paseo Del Prado
	Edinburg, TX 78542
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Get Out The Vote
	Get Gut The Vote
O Commission ONII V if divers	Candidate/Office helder norms Office south
9 Complete <u>ONLY</u> if direct expenditure to benefit C	
Date	Payee name
05/24/2024	Uribe, Rolando
Amount (\$)	Payee address; City; State; Zip Code
\$650.0	135 Paseo Del Prado
	Edinburg, TX 78542
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Poll Worker
	1 oil Worker
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C	
Date	Payee name
06/06/2024	VALADEZ, ANNETTE
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.0	2106 northgate drive
	weslaco, TX 78599
PURPOSE	weslaco, TX 78599 (a) Category (See Categories listed at the top of this schedule) (b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weslaco Camp Food and Drink
OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weslaco Camp Food and Drink Candidate/Officeholder name Office sought Office held
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weslaco Camp Food and Drink Candidate/Officeholder name Office sought Office held
OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weslaco Camp Food and Drink Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Cor The Instruction Guide explains how to complete t	,
1	Total nagge Schodule F1:		3 Filer ID (Ethics Commission Filers)
_	Total pages Schedule F1: Sch: 32/35 Rpt: 43/46	Alvarez, Juan Ramon (Mr.)	00088246
4	Date	Payee name	
	05/24/2024	VALADEZ, ANNETTE	
6	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 2106 northgate drive	
	, _,,,,,,,,,		
		weslaco, TX 78599	
8	PURPOSE	(b) Category (See Categories listed at the top of this schedule)	escription
	OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
		VV	eslaco Camp Manager
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Oł		
	Date	Payee name	
	05/25/2024	VILLALON, BRENDA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,350.00	407 HAWK ST	
		SULLIVAN , TX 78595	
	PURPOSE OF	(b) December 2 (See Categories listed at the top of this schedule)	escription
	EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gr	et out the Vote
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/25/2024	VILLALON, BRENDA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,350.00	407 HAWK ST	
		SULLIVAN, TX 78595	
_	PURPOSE		perviption
	OF		escription Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense
		Ge	et Out The Vote
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/O		

SCHEDULE F1

Advertising Expense EAccounting/Banking FOOSulting Expense FOOTsibutions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 33/35 Rpt: 44/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/23/2024	Valdez, Jessie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Poll Worker
		1 on Worker
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
_		
	Date	Payee name
	05/28/2024	Velasquez, Bertha
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Poll watcher
		1 on waterier
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	05/25/2024	Villalon, Christopher
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	135 Paseo Del Prado
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Get out the Vote
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to con	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 34/35 Rpt: 45/46	Alvarez, Juan Ramon (Mr.)		00088246
4	Date	5 Payee name		·
	05/25/2024	Villalon, Ruben		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$4,000.00	135 Paso Del Prado		
		Edinburg, TX 78542		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Get Out The Vote
				Get Gut The Vote
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/O		9110	Since hold
_	Date	Payee name		
	05/22/2024	Villalon, Ruben		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$2,000.00	135 Paseo Del Prado	uc	
	Ψ2,000.00	100 1 0000 0011 1000		
		Edinburg, TX 78542		
	PURPOSE	_	(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense		Check if Austin, TX, officeholder living expense
				Get out the vote
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office souç	ght	Office held
	experience to borionic Grou			
	Date	Payee name		
	05/28/2024	Villanueva, Concepcion		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$1,000.00	135 Paseo Del Prado		
		Edinburg, TX 78542		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Get Out the Vote
	Complete ONLY if direct	L Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O			
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 35/35 Rpt: 46/46	Alvarez, Juan Ramon (Mr.) 00088246
4	Date	5 Payee name
	05/24/2024	Ybarra, Melissa
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	135 Paseo Del Prado
		Edinburg, TX 78542
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Poll Worker
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held