COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00055995	2 Total pages filed: 37
3 COMMITTEE NAME	-	OFFICE USE ONLY
Cameron County Democratic Party Executive Committee (CEC)	Date Received ELECTRONICALLY FILED 07/15/2024
	CITY; STATE; ZIP CODE	1
ADDRESS 1411 N Stuart Place Rd		Date Hand-delivered or Date Postmarked
Change of Address Ste C		
Harlingen, TX 78552		Receipt # Amount
		Date Processed
		Date Imaged
5 CAMPAIGN MS / MRS / MR FIRST		MI
TREASURER NAME Ms. Denise G		
NICKNAME LAST		SUFFIX
Chavez		
6 CAMPAIGN TREASURER STREET ADDRESS STREET STREET); APT / SUITE #; CITY;	STATE; ZIP CODE
(Residence or Business) Brownsville, TX 78526		
7 CAMPAIGN STREET OR PO BOX; TREASURER MAILING ADDRESS 7248 Mulberry St	APT / SUITE #; CITY	/; STATE; ZIP CODE
Change of Address Brownsville, TX 78520		
8 CAMPAIGN AREA CODE PHONE NUMBER TREASURER (956) 371-7378	EXTENSION	
9 REPORT January 15	30th day before election	Final Report
Image: state	8th day before election	10th day after campaign treasurer termination
10 PERIOD COVERED Month Day Year 01/01/2024 <td< th=""><th>Month Day THROUGH 06/30/202</th><th>Year 24</th></td<>	Month Day THROUGH 06/30/202	Year 24
11 ELECTION ELECTION DATE Month Day Year 11/05/2024	Primary Runoff General Special	Other
GC) TO PAGE 2	
Forms provided by Texas Ethics Commission www.	.ethics.state.tx.us	Version V4.1.0.d378aba0

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME				13 File	er ID	(Ethics Commission Filers)
Cameron County Demo	cratic Party Executiv	e Committee	e (CEC)	000	55995	
14 COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Phil Cowen Cameron Appraisal D						3
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOAN	S, OR GUARA	L CONTRIBUTIONS (OTHER NTEES OF LOANS, OR TRONICALLY) ne higher itemization threshold	THAN	\$	76.84
	2. TOTAL POLITIC (OTHER THAN P		IBUTIONS ANS, OR GUARANTEES OF LO	DANS)	\$	50,826.84
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICA	L EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPEN	DITURES		\$	58,893.35
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT		TIONS MAINTAINED AS OF TH	HE LAST DAY	\$	14,186.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPA LAST DAY OF TH		F ALL OUTSTANDING LOANS G PERIOD	S AS OF THE	\$	2,086.55
16 AFFIDAVIT	•				•	
			I swear, or affirm, under pen true and correct and include under Title 15, Election Cod	s all information		
			М	s. Denise G Cł	navez	
				ure of Campaign		er
AFFIX NOTARY	STAMP / SEAL ABOV	E				
Sworn to and subscribed	before me, by the said			, this the		day
			ss my hand and seal of office.	·		
Signature of officer ad	ministering oath	Printed nam	ne of officer administering oath	Title	e of office	er administering oath
Forms provided by Texas E	thics Commission	ww	w.ethics.state.tx.us			Version V4.1.0.d378aba0

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

FORM CEC

ADDENDUM Page 3 of 37

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Cameron County Democra	tic Party Executive C	Committee (CE	EC)		00055995	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Alejandro Garo Place 1	cia-Moreno Cam	eron Appraisal I	District,
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Olga Montes	Commissioner, To	own of Combes	, Place 1
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/37
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	unty Democratic Party Executive Committee (CEC)	00055995	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/23/2024	Hinojosa, Cynthia		\$250.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
Licensed Pro	fessional Counselor	Self	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/23/2024	Hinojosa, Gllberto	/	\$250.00
	Contributor address; City; State; Zip Code		
	······································		
	Brownsville, TX 78520		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)
Attorney		Self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/26/2024	Soros, George (Mr.)		\$50,000.00
	Contributor address; City; State; Zip Code		
	New York, NY 10019		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)
Investor		Self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/23/2024	Trevino, Eddie		\$250.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
	pation / Job title (See Instructions)	Employer (See Instructions	5)
Attorney		Self	

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, _ I Cor	Fees Office Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printin	Overhea g Expens Ig Exper es/Wage	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	·	comp		2	Filer ID (Ethics Commission Filers)
-	Sch: 1/32 Rpt: 6/37	2	Cameron County Democratic Party Executiv	e Cor	nmittee	5	00055995
4	Date	5	Payee name				
	05/11/2024		Aguilar Sanchez, Maria				
6	Amount (\$)	7	Payee address; City; State; Zip	Code			
	\$300.00		2092 S Buckingham				
			Brownsville, TX 78520				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description		
			Salaries/Wages/Contract Labor			outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		-				officeholder living expense
					Contract Labo	or	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office s	sought			Office held
	Date		Payee name				
	03/19/2024		Amazon.com				
	Amount (\$)		Payee address; City; State; Zip	Code			
	\$25.97		410 Terry Avenue				
			Seattle, WA 98109				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description		
	EXPENDITURE		Event Expense				de of Texas. Complete Schedule T. officeholder living expense
					Items for Con		
	Complete ONLY if direct		candidate/Officeholder name Office s	sought			Office held
	expenditure to benefit C/OF	H					
	Date		Payee name				
	01/19/2024		Amazon.com				
	Amount (\$)		Payee address; City; State; Zip	Code			
	\$75.22		410 Terry Avenue				
			Seattle, WA 98109				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T.
					Office Supplie		officeholder living expense
						50	
	Complete ONLY if direct	Ļ	candidate/Officeholder name Office s				Office held
	expenditure to benefit C/OF			ouyiil			

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains F	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2			•	3	Filer ID (Ethics Commission Filers)
-	Sch: 2/32 Rpt: 7/37	-	Cameron County Democratic Party Exe	ecutive C	ommittee		00055995
4	Date	5	Payee name				
	01/02/2024		Amazon.com				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le		
	\$9.20		410 Terry Avenue				
			Seattle, WA 98109				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche		(b) Description		
Ĩ	OF	,	Office Overhead/Rental Expense	edule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austir	n, TX	, officeholder living expense
					Items for Off	се	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	lht		Office held
	Date		Payee name				
	03/27/2024		Brownsville Herald				
	Amount (\$)		Payee address; City; State;	Zip Co	le		
	\$325.00		1135 E. Van Buren				
			Brownsville, TX 78520				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Advertising Expense	,	Check if travel	outs	ide of Texas. Complete Schedule T.
	EXPENDITORE						, officeholder living expense
					Convention A	٦d	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	lht		Office held
	Date		Payee name				
	02/28/2024		Campaign Verify				
	Amount (\$)		Payee address; City; State;	Zip Co	le		
	\$95.00		1215 31st St NW				
			Washington, DC 20007				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Fees				ide of Texas. Complete Schedule T.
	EXPENDITORE						, officeholder living expense
					Verification f	ee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	lht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	ILER NAME		·	3	Filer ID (Ethics Commission Filers)
	Sch: 3/32 Rpt: 8/37		Cameron County Democratic Party Ex	ecutive C	committee		00055995
4	Date		Payee name			<u> </u>	
	02/28/2024		Carisma Graphics				
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de		
	\$4,852.04		2100 Central Blvd				
		1	Brownsville, TX 78520				
8	PURPOSE	(a) (Category (See Categories listed at the top of this sch	edule)	(b) Description		
	OF EXPENDITURE		Advertising Expense	iouulo)		outs	ide of Texas. Complete Schedule T.
	EXPENDITORE					ı, TX	, officeholder living expense
					Materials		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	int		Office held
╞	Data						
	Date		Payee name				
	06/17/2024		Chavez, Oziel				
	Amount (\$)			; Zip Co	de		
	\$3,000.00		7248 Mulberry St				
			Brownsville, TX 78526				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	yht		Office held
	Date	I	Payee name				
	06/24/2024		Chavez, Oziel				
	Amount (\$)		Payee address; City; State;	; Zip Co	de		
	\$3,000.00	-	7248 Mulberry St				
		1	Brownsville, TX 78526				
	PURPOSE	(a) (Category (See Categories listed at the top of this sch	iedule)	(b) Description		
	OF EXPENDITURE	2	Salaries/Wages/Contract Labor			ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	Jht		Office held

			EXPENDITURE CATEGORIES FO	R BC	X 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Ov Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	erhea kpense xpens Vages	/Rental Expense Transportati Travel in Dise Travel out of Contract Labor OTHER (en	
1	Total pages Schedule F1:	2			3 Filer ID	(Ethics Commission Filers)
1	Sch: 4/32 Rpt: 9/37		Cameron County Democratic Party Executive	Con		· · · · · · · · · · · · · · · · · · ·
4	Date 04/30/2024		^P ayee name Chavez, Oziel			
6	Amount (\$) \$3,000.00		Payee address; City; State; Zip Co 7248 Mulberry St Brownsville, TX 78526	ode		
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b)	Description Check if travel outside of Texas. Check if Austin, TX, officeholder Contract Labor	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sou	ight	Office	e held
	Date		Payee name			
	03/26/2024		Chavez, Oziel			
	Amount (\$) \$3,000.00		Payee address; City; State; Zip Co 7248 Mulberry St	ode		
	PURPOSE OF EXPENDITURE	(a)	Brownsville, TX 78526 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b)	Description Check if travel outside of Texas. Check if Austin, TX, officeholder Contract Labor	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sou	ught	Office	e held
	Date		Payee name			
	02/27/2024		Chavez, Oziel			
	Amount (\$) \$3,000.00		Payee address; City; State; Zip Co 7248 Mulberry St	ode		
			Brownsville, TX 78526	.		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b)	Description Check if travel outside of Texas. Check if Austin, TX, officeholder Contract Labor	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sou	ıght	Office	e held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 T	otal pages Schedule F1:	2				3	Filer ID (Ethics Commission Filers)
	Sch: 5/32 Rpt: 10/37		Cameron County Democratic Party Exe	ecutive C	committee		00055995
4 C	Date	5	Payee name			I	
0	02/22/2024		Chavez, Oziel				
6 A	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$200.00		7248 Mulberry St				
			Brownsville, TX 78526				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor				ide of Texas. Complete Schedule T.
					Contract Lab		, officeholder living expense
					Contract Eas	01	
9 C	Complete ONLY if direct		Candidate/Officeholder name O)ffice sou	t		Office held
	expenditure to benefit C/OI				,		
	Date		Payee name				
	2/19/2024		Chavez, Oziel				
	Amount (\$)			Zip Co	10		
	\$200.00		7248 Mulberry St	210 00			
	φ200.00						
			Brownsville, TX 78526				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Salaries/Wages/Contract Labor				ide of Texas. Complete Schedule T. , officeholder living expense
					Contract Lab		
C	Complete ONLY if direct		Candidate/Officeholder name O)ffice sou	jht		Office held
e	expenditure to benefit C/OI	Н					
C	Date		Payee name				
0	2/14/2024		Chavez, Oziel				
A	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$400.00		7248 Mulberry St				
			Brownsville, TX 78526				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Salaries/Wages/Contract Labor				ide of Texas. Complete Schedule T. , officeholder living expense
					Contract Lab		, unicendider living expense
0	Complete ONLY if direct		Candidate/Officeholder name O	Office sou	aht		Office held
	expenditure to benefit C/OI				, ,		

			EXPENDITURE CATEGORIES FOR BOX 8(a)	Γ
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Git/IAwards/Memorials Expense Printing Expense Travel out of District mittee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2		\neg
L.	Sch: 6/32 Rpt: 11/37		Cameron County Democratic Party Executive Committee 00055995	
4	Date 02/08/2024		Payee name Chavez, Oziel	
6	Amount (\$) \$120.00		Payee address; City; State; Zip Code 7248 Mulberry St Brownsville, TX 78526	
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sought Office held	
	Date		Payee name	٦
	03/23/2024		Dollar General	
	Amount (\$) \$5.41		Payee address; City; State; Zip Code 1304 Central Blvd	
	PURPOSE OF EXPENDITURE	(a)	BROWNSVILLE, TX 78520 Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Items for Convention	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sought Office held	
	Date		Payee name	٦
	02/01/2024		Dollar General	
	Amount (\$) \$17.21		Payee address; City; State; Zip Code 1304 Central Blvd	
			BROWNSVILLE, TX 78520	
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Items for Event	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sought Office held	

		EXPENDITURE CATEG	ORIES FOR BOX 8(a))
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Repayment/Reimbu Office Overhead/Rental B Polling Expense Printing Expense Salaries/Wages/Contract	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)
1	Total pages Cabadula F1	-		
T	Total pages Schedule F1: Sch: 7/32 Rpt: 12/37	ameron County Democratic Party E	xecutive Committee	, , , , , , , , , , , , , , , , , , ,
4	Date	ayee name		•
	01/29/2024	oollar General		
6	Amount (\$) \$1.08	ayee address; City; Sta 304 Central Blvd ROWNSVILLE, TX 78520	e; Zip Code	
_			1 a \	
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this s office Overhead/Rental Expense	Che Che	ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense e Supplies
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held
	Date	ayee name		
	01/25/2024	ollar General		
	Amount (\$)	ayee address; City; Stat	e; Zip Code	
	\$7.47	304 Central Blvd ROWNSVILLE, TX 78520		
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this s office Overhead/Rental Expense	Che	ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense e SUpplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held
	Date	ayee name		
	01/18/2024	ollar General		
	Amount (\$) \$4.38	ayee address; City; Sta 304 Central Blvd	e; Zip Code	
		ROWNSVILLE, TX 78520		
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this s office Overhead/Rental Expense	Che	ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense e Supplies
ļ	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Offic Food/Beverage Expense Polli Gift/Awards/Memorials Expense Print	ce Overhe ling Exper nting Expe aries/Wag	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 8/32 Rpt: 13/37		Cameron County Democratic Party Executi	tive Co	mmittee		00055995
4	Date 03/27/2024		Payee name Fiesta Graphics				
6	Amount (\$) \$1,656.22 \$1,656.22 T Payee address; City; State; Zip Code 205 Paredes Line Rd Brownsville, TX 78520						
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense) (b		, тх,	de of Texas. Complete Schedule T. officeholder living expense erials
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	t		Office held
	Date		Payee name				
	01/08/2024		Fiesta Graphics				
	Amount (\$) \$64.95		Payee address; City; State; Zip 205 Paredes Line Rd	p Code			
			Brownsville, TX 78520				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense) (b		, тх,	de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	t		Office held
F	Date		Payee name				
	02/11/2024		Gonzalez, Noe				
	Amount (\$) \$20.00		Payee address; City; State; Zip 224 HIbiscus Ct	p Code			
			Brownsville, TX 78520	i			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor) (b		, тх,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	t		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Food/Beverage F	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F1:	2	-			2	Filer ID (Ethics Commission Filers)
	Sch: 9/32 Rpt: 14/37	2	Cameron County Democratic Party Exec	cutive C	ommittee	3	00055995
4	Date	5	Payee name				
	05/11/2024		Gonzalez, Noe				
6	Amount (\$)	7	Payee address; City; State;	Zip Coo	le		
	\$300.00		224 Hlbiscus Ct				
			Brownsville, TX 78520				
8	PURPOSE	<u> </u>			(b) Decoription		
ľ	OF	(4)	Category (See Categories listed at the top of this sched Salaries/Wages/Contract Labor	dule)	(b) Description Check if travel	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Eabor				officeholder living expense
					Contract Lab	or	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ht		Office held
	Date		Payee name				
	02/11/2024		Gonzalez, Noe				
	Amount (\$)		Payee address; City; State;	Zip Coo	le		
	\$30.00		224 Hlbiscus Ct				
			Brownsville, TX 78520				
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.
					Contract Lab		officeholder living expense
					Contract Lab	01	
_	Complete ONIL V if direct		Candidate/Officeholder name Off	fice cours	bt.		Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			fice soug	liit		Office field
╞	_	_					
	Date		Payee name				
	01/25/2024		Gonzalez, Noe				
	Amount (\$)			Zip Coo	le		
	\$30.00		224 HIbiscus Ct				
			Brownsville, TX 78520				
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.
							officeholder living expense
					Contract Lab	or	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ht		Office held
		•					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
_		The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1: Sch: 10/32 Rpt: 15/37	Cameron County Democratic Party Executive Committee	Filer ID (Ethics Commission Filers) 00055995				
4	Date 01/26/2024	Payee name Goodwill Industries					
6	Amount (\$) \$4.06	7 Payee address; City; State; Zip Code					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Items for Office					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/03/2024	Goodwill Industries					
	Amount (\$) \$2.71	Payee address; City; State; Zip Code 1765 Ruben Torres BROWNSVILLE, TX 78521					
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	itside of Texas. Complete Schedule T. IX, officeholder living expense B				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	03/23/2024	HEB					
	Amount (\$) \$15.75	Payee address; City; State; Zip Code 1628 Central Blvd					
		Brownsville, TX 78520					
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense ention				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper	nse	Loan Repa Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reinbursement head/Rental Expense ense gense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2		•		<u> </u>	3	Filer ID (Ethics Commission Filers)
_	Sch: 11/32 Rpt: 16/37		Cameron County Democratic Pa	arty Exe	ecutive C	ommittee		00055995
4	Date	5	Payee name					
4	02/02/2024	5	HEB					
6	Amount (\$)	7	Payee address; City;	State;	Zip Coo	le		
	\$8.98		1628 Central Blvd					
			Brownsville, TX 78520					
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sche	edule)	b) Description		
	OF		Event Expense				outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		·			Check if Austin	, TX,	officeholder living expense
						Items for Eve	ent	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	0	Office soug	ht		Office held
	experiature to benefit C/Or							
	Date		Payee name					
	02/29/2024		Lone Star National Bank					
	Amount (\$)		Payee address; City;	State;	Zip Coo	le		
	\$7.50		3300 N Expwy					
			Brownsville, TX 78520					
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this sche	edule)	b) Description		
	EXPENDITURE		Accounting/Banking					de of Texas. Complete Schedule T.
						Fee	I, IX,	officeholder living expense
						100		
-	Complete ONLY if direct		Candidate/Officeholder name			ht		Office held
	expenditure to benefit C/O		Candidate/Onicenoider name	0	Office soug	n		Onice neid
	Date		Payee name					
	02/26/2024		Lone Star National Bank					
	Amount (\$)		Payee address; City;	State;	Zip Coo	le		
	\$15.00		3300 N Expwy					
			Brownsville, TX 78520					
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this sche	edule)	b) Description		
	EXPENDITURE		Accounting/Banking					de of Texas. Complete Schedule T.
						Wire Fee	I, IX,	officeholder living expense
_		L	Condidate/Officeholder serve		office cours	ht		Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	0	Office soug	in in		Office held

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EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 12/32 Rpt: 17/37 Cameron County Democratic Party Executive Committee 00055995 4 Date 5 Payee name 01/29/2024 Lowe's 6 Amount (\$) Payee address; City; State; Zip Code 7 \$35.55 525 E Ruben Torres **BROWNSVILLE, TX 78520** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Materials for office repairs Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/22/2024 Lowe's Amount (\$) Payee address; City; State; Zip Code \$20.50 525 E Ruben Torres **BROWNSVILLE, TX 78520** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Materials for office repair Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/08/2024 Lowe's Amount (\$) Payee address: City: State; Zip Code \$7.56 525 E Ruben Torres **BROWNSVILLE, TX 78520** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Materials for office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 13/32 Rpt: 18/37 Cameron County Democratic Party Executive Committee 00055995 4 Date 5 Payee name 01/05/2024 Lowe's 6 Amount (\$) Payee address; City; State; Zip Code 7 \$35.80 525 E Ruben Torres **BROWNSVILLE, TX 78520** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Materials for Office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/04/2024 Lowe's Amount (\$) Payee address; City; State; Zip Code \$559.85 525 E Ruben Torres **BROWNSVILLE, TX 78520** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Materials for Office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/21/2024 Michael's Amount (\$) Payee address; City; State; Zip Code \$13.27 571 Morrison Brownsville, TX 78526 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense EXPENDITURE Check if Austin, TX, officeholder living expense Decorations for Convention Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Sch: 14/32 Rpt: 19/37		Cameron County Democratic Party Exec	cutive C	ommittee	00055995	
4	Date 03/23/2024	5	Payee name Mount Calvary Church				
6	Amount (\$) \$100.00						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation for Prayer at Convention					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offi	ice soug	ht	Office held	
	Date		Payee name				
	05/02/2024		NGP VAN				
	Amount (\$)		Payee address; City; State; 2	Zip Cod	е		
	\$106.60		655 15 St NW				
			Ste 650 Washington, DC 20005				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedu Advertising Expense	ule) (el outside of Texas. Complete Schedule T. in, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offi	ice soug	ht	Office held	
	Date		Payee name				
	04/12/2024		NGP VAN				
	Amount (\$) \$106.60		Payee address; City; State; 2 655 15 St NW Ste 650 Washington, DC 20005	Zip Cod	e		
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedu Advertising Expense	ule)		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offi	ice soug	ht	Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 15/32 Rpt: 20/37	Cameron County Democratic Party Executive Committee	00055995			
4	Date 03/04/2024	5 Payee name NGP VAN				
6	Amount (\$) \$106.60	7 Payee address; City; State; Zip Code 655 15 St NW Ste 650 Washington, DC 20005				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense E-mail fee				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	05/10/2024	Providencia Capital				
	Amount (\$) \$1,200.00	Payee address;City;State; Zip Code1801 S 2nd St				
		McAllen, TX 78520				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	03/26/2024	Providencia Capital				
	Amount (\$) \$1,200.00	Payee address;City;State; Zip Code1801 S 2nd St				
		McAllen, TX 78520				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)			
	Sch: 16/32 Rpt: 21/37	Cameron County Democratic Party Executive Committee	00055995			
4	Date 03/11/2024	5 Payee name Providencia Capital				
6	Amount (\$) 7 Payee address; City; State; Zip Code \$1,200.00 1801 S 2nd St McAllen, TX 78520					
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	02/14/2024	Providencia Capital				
	Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1801 S 2nd St				
	PURPOSE	McAllen, TX 78520				
	OF		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/04/2024	Providencia Capital				
	Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1801 S 2nd St				
		McAllen, TX 78520				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	rhead/Renta ense pense ages/Contra	act Labor		Travel in District Travel Out of Dist	uipment & Related Expense
	Total pages Schedule F1:	2					2	Filer ID	(Ethics Commission Filers)
Ľ	Sch: 17/32 Rpt: 22/37		Cameron County Democratic Party Exe	ecutive (`ommitte		З	00055995	
								000000000	
4	Date 06/14/2024		Payee name Public Utilities Board						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$87.61		1425 Robinhood Dr						
			Brownsville, TX 78521						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	odulo)	(b) Desc	crintion			
	OF		Office Overhead/Rental Expense	euule)			outsio	de of Texas. Comp	lete Schedule T.
	EXPENDITURE					check if Austin,	TX,	officeholder living	expense
					Utili	ties			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office he	ld
⊨	Date		Payee name						
	05/15/2024		Public Utilities Board						
	Amount (\$)			Zip Co	de				
	\$77.73		1425 Robinhood Dr						
			Brownsville, TX 78521						
⊢	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Desc	cription			
	OF EXPENDITURE		Office Overhead/Rental Expense	ouuloy	_	•	outsio	de of Texas. Comp	lete Schedule T.
	EXPENDITORE						TX,	officeholder living	expense
					Utili	ties			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office he	ld
		_							
	Date		Payee name						
	04/12/2024		Public Utilities Board						
	Amount (\$)			Zip Co	de				
	\$69.08		1425 Robinhood Dr						
			Brownsville, TX 78521						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Desc	cription			
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Comp	
							TX,	officeholder living	expense
					Utili	1152			
_	Complete ONUM Station	Ĺ	andidate (Office helder					0#==	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	JIIL			Office he	iu
_	-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	Filer ID (Ethics Commission Filers)				
Ĺ	Sch: 18/32 Rpt: 23/37	Cameron County Democratic Party Executive Committee	00055995				
4	Date 03/14/2024	5 Payee name Public Utilities Board					
6	Amount (\$) \$60.77						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Utilities					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/14/2024	Public Utilities Board					
	Amount (\$) \$56.36	Payee address; City; State; Zip Code 1425 Robinhood Dr					
	PURPOSE	Brownsville, TX 78521 (a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Office Overhead/Rental Expense	tside of Texas. Complete Schedule T. X, officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	05/11/2024	Rodriguez, Maria					
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 114 W Saint Francis St					
		Brownsville, TX 78520					
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)		
-	Sch: 19/32 Rpt: 24/37	Cameron County Democratic Party Executive Committee	00055995		
4	Date	Payee name			
	01/02/2024	Rodriguez, Maria			
6	Amount (\$)	Payee address; City; State; Zip Code			
	\$272.50	114 W Saint Francis St			
		Brownsville, TX 78520			
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE		utside of Texas. Complete Schedule T.		
	EXPENDITORE		TX, officeholder living expense		
		Contract Labo	Dr		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	01/24/2024	Sam's Club			
	Amount (\$)	Payee address; City; State; Zip Code			
\$40.00 3570 Alton gloor blvd.					
		Brownsville, TX 78520			
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense	utside of Texas. Complete Schedule T.		
			TX, officeholder living expense		
		Office SUpplie	es		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	01/08/2024	Sam's Club			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$13.98	3570 Alton gloor blvd.			
		Brownsville, TX 78520			
	PURPOSE	b) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE		utside of Texas. Complete Schedule T.		
			TX, officeholder living expense		
		Items for the o	onice		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		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: 20/32 Rpt: 25/37	Cameron County Democratic Party Executive Committee	00055995		
4	Date 01/03/2024	5 Payee name Sam's Club			
ľ	Amount (\$) \$166.30	7 Payee address; City; State; Zip Code 3570 Alton gloor blvd.			
	φ100.30				
		Brownsville, TX 78520			
	DUDDOOF				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	tside of Texas. Complete Schedule T.		
	EXPENDITURE		X, officeholder living expense		
		Office Supplies	6		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	06/05/2024	Scale to Win			
Amount (\$) Payee address; City; State; Zip Code					
	\$547.85 13742 Harper St				
		Santa Ana , CA 92703			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Advertising Expense	tside of Texas. Complete Schedule T.		
			X, officeholder living expense		
		Texting			
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI	5			
	Date	Payee name			
	05/03/2024	Scale to Win			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$343.19	13742 Harper St			
		Santa Ana , CA 92703			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense		
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI				
⊢					

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) 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: 21/32 Rpt: 26/37 Cameron County Democratic Party Executive Committee 00055995 4 Date 5 Payee name 04/13/2024 Scale to Win 6 Amount (\$) Payee address; City; State; Zip Code 7 \$426.28 13742 Harper St Santa Ana , CA 92703 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Texting Complete ONLY if direct Candidate/Officeholder name Office sought Office held 9 expenditure to benefit C/OH Date Payee name 03/08/2024 Scale to Win Amount (\$) Payee address; City; State; Zip Code \$1,248.93 13742 Harper St Santa Ana , CA 92703 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense E-mail Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/04/2024 Simply Good Amount (\$) Payee address; City; State; Zip Code \$13.51 1710 SH 100 Port Isabel, TX 78578 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Items for Office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Bevrage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)			
-	Sch: 22/32 Rpt: 27/37	Cameron County Democratic Party Executive Committee	00055995			
4	Date 01/19/2024	5 Payee name Simply Good				
6	Amount (\$) 7 Payee address; City; State; Zip Code \$75.22 1710 SH 100 Port Isabel, TX 78578					
8	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date 04/26/2024	Payee name Sout				
	Amount (\$) \$451.26	Payee address; City; State; Zip Code 2702 Love Field Dallas, TX 75235				
	PURPOSE OF EXPENDITURE	Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense o Convention in El Paso			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	06/10/2024	Spectrum				
	Amount (\$) \$85.29	Payee address; City; State; Zip Code 2309 W Lincoln Ave Ste B Harlingen, TX 78552				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Off Food/Beverage Expense Po Gift/Awards/Memorials Expense Pri	fice Overhe olling Exper inting Expe alaries/Wag	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 23/32 Rpt: 28/37		Cameron County Democratic Party Execu	utive Co	mmittee		00055995
4	Date	5	Payee name			I	
	05/10/2024		Spectrum				
6	Amount (\$)	7	Payee address; City; State; Zi	ip Code	•		
	\$85.29		2309 W Lincoln Ave				
			Ste B				
			Harlingen, TX 78552				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	_{e)} (b) Description		
	OF EXPENDITURE Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Utilities						
9	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held						
	Date		Payee name				
	04/10/2024		Spectrum				
	Amount (\$)		Payee address; City; State; Zi	ip Code	•		
	\$85.29		2309 W Lincoln Ave				
			Ste B				
			Harlingen, TX 78552				
PURPOSE OF EXPENDITURE			Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense	_{e)} (b			de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	e sough	t		Office held
	Date		Payee name				
	03/11/2024		Spectrum				
	Amount (\$)		Payee address; City; State; Zi	ip Code	;		
	\$85.29		2309 W Lincoln Ave				
			Ste B				
			Harlingen, TX 78552				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	_{e)} (b	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	e sough	t		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 24/32 Rpt: 29/37	Cameron County Democratic Party Executive Committee	00055995						
4	Date 02/12/2024	5 Payee name Spectrum							
6	Amount (\$) \$145.67	7 Payee address; City; State; Zip Code 2309 W Lincoln Ave Ste B Harlingen, TX 78552							
8	PURPOSE OF EXPENDITURE	OF Office Overhead/Rental Expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/10/2024	Spectrum							
	Amount (\$) \$78.27	Payee address; City; State; Zip Code 2309 W Lincoln Ave Ste B Harlingen, TX 78552							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/11/2024	Staple's							
	Amount (\$) \$324.72	Payee address; City; State; Zip Code 2436 Pablo Kisel							
		Brownsville, TX 78521							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense 2 S						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 25/32 Rpt: 30/37	Cameron County Democratic Party Executive Committee	00055995						
4	Date 03/23/2024	5 Payee name Starbucks							
6	Amount (\$) \$85.00	7 Payee address; City; State; Zip Code 1465 E Ruben Torres Brownsville, TX 78520							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Coffee for Convention									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/29/2024	Sunoco							
	Amount (\$) \$34.85	Payee address; City; State; Zip Code 200 Morrison Rd Brownsville, TX 78521							
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense fiCe						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	05/01/2024	Target							
	Amount (\$) \$40.24	Payee address; City; State; Zip Code 301 Morrison							
		Brownsville, TX 78526							
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense CS						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

			EXPENDITURE CATEGORIES FOR	R BC	DX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Over Pool/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing E mittee Legal Services Salaries/V	erhead pense xpens Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Exp Travel in District Travel Out of District OTHER (enter a category not listed above	
			The Instruction Guide explains how to co	mple	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Sch: 26/32 Rpt: 31/37		Cameron County Democratic Party Executive	Com	nmittee		00055995	
4	Date	5	Payee name					
	03/12/2024		Target					
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode				
-	\$31.25		301 Morrison					
			Prownsyille TX 79526					
			Brownsville, TX 78526					
8	PURPOSE OF		Category (See Categories listed at the top of this schedule)	(b)	Description			
	EXPENDITURE		Office Overhead/Rental Expense				le of Texas. Complete Schedule T. officeholder living expense	
					Office Supplie		onceriolder inning expense	
9	Complete ONLY if direct		andidate/Officeholder name Office sou	l			Office held	
ľ	expenditure to benefit C/OI			igin			Office field	
	Date		Payee name					
	01/04/2024		Target					
	Amount (\$)		Payee address; City; State; Zip Co	ode				
	\$259.80		301 Morrison					
			Brownsville, TX 78526					
_	PURPOSE		Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF		Office Overhead/Rental Expense	(5)		outsic	le of Texas. Complete Schedule T.	
	EXPENDITURE				Check if Austin	, тх,	officeholder living expense	
					Office SUppli	es		
	Complete ONLY if direct		andidate/Officeholder name Office sou	Ight			Office held	
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	01/04/2024		Target					
			-	, do				
	Amount (\$) \$10.81		Payee address; City; State; Zip Co	Jue				
	\$10.81		301 Morrison					
			Brownsville, TX 78526	_				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense				le of Texas. Complete Schedule T.	
							officeholder living expense	
					ITems for offi	LE		
	0 11 0 0 0 0	L		Ļ			0///	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sou	ight			Office held	
	superioratione to benefit C/OI							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 27/32 Rpt: 32/37		Cameron County Democratic Party Exe	ecutive C	comi	mittee		00055995
4	Date	5	Payee name					
	01/01/2024		Texas Democratic Party					
6	Amount (\$)	7		Zip Co	de			
	\$7,140.64		4818 East Ben White Blvd. Suite 104					
			Austin, TX 78741					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	EXPENDITURE		Printing Expense		ļ			de of Texas. Complete Schedule T. officeholder living expense
					I			Ballot By Mail
							0.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Dffice sou	ght			Office held
	Date		Payee name					
	03/23/2024		Texas Southmost College					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$1,350.00		80 Fort Brown					
			Brownsville, TX 78520					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) י	Description		de ef Teure Convolute Colordade T
	EXPENDITURE		Event Expense		l			de of Texas. Complete Schedule T. officeholder living expense
					I			/ for Convention
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Dffice sou	ght			Office held
	Date		Payee name					
	01/31/2024		Texas Thrift Store					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$14.04		2990 Boca Chica					
			Brownsvilel, TX 78521					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense		ļ			de of Texas. Complete Schedule T. officeholder living expense
					I	Items for Offic		uniceriolder living expense
-	Complete ONLY if direct	L(Candidate/Officeholder name C	Office sou	ght			Office held
	expenditure to benefit C/OI	Н						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens ttee Legal Services The Instruction Guide e:		Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FI	LER NAME			-	3	Filer ID (Ethics Commission Filers)
-	Sch: 28/32 Rpt: 33/37		ameron County Democratic Pa	urty Exe	ecutive Co	ommittee		00055995
4	Date		ayee name	-				
_	01/16/2024		exas Thrift Store					
6	Amount (\$)	7 Pá	ayee address; City;	State;	Zip Cod	e		
	\$13.61	29	990 Boca Chica					
		В	rownsvilel, TX 78521					
8	PURPOSE	(a) C	ategory (See Categories listed at the top of	of this sche	edule) (b) Description		
	OF EXPENDITURE		ffice Overhead/Rental Expense		,			ide of Texas. Complete Schedule T.
								, officeholder living expense
						Items for Offi	се	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	O	office soug	nt		Office held
	Date		ayee name					
	01/05/2024	Т	exas Thrift Store					
	Amount (\$)	Pa	ayee address; City;	State;	Zip Cod	е		
	\$14.04	29	990 Boca Chica					
		В	rownsvilel, TX 78521					
	PURPOSE	(a) C	ategory (See Categories listed at the top of	of this sche	edule) (b) Description		
	OF EXPENDITURE		ffice Overhead/Rental Expense		,			ide of Texas. Complete Schedule T.
	EXPENDITORE							, officeholder living expense
						Items for office	ce	
								0///
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	0	office soug	IL		Office held
_								
	Date		ayee name					
	01/02/2024		exas Thrift Store					
	Amount (\$)		ayee address; City;	State;	Zip Cod	9		
	\$17.87	29	990 Boca Chica					
		В	rownsvilel, TX 78521					
	PURPOSE	(a) C	ategory (See Categories listed at the top of	of this sche	edule) (b) Description		
	OF EXPENDITURE	0	ffice Overhead/Rental Expense	e				ide of Texas. Complete Schedule T.
						Items for Offi		, officeholder living expense
							00	
┣-	Complete ONLY if direct	Car	ndidate/Officeholder name	0	office soug	at		Office held
	expenditure to benefit C/OI			0	mee soug	n		Onice neid
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	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 29/32 Rpt: 34/37	Cameron County Democratic Party Executive Committee	00055995						
4	Date 02/28/2024	Payee name Textedly							
6	Amount (\$) \$284.06	7 Payee address; City; State; Zip Code 2536 E Workman Ave Corvina CA, TX 91791 Convertina							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Texting									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/26/2024	Under Construction Contract Services							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$400.00	5563 Whisperwind Brownsville, TX 78526							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense İCE						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/29/2024	United Airlines							
	Amount (\$) \$636.38	Payee address;City;State;Zip Code233 S Wacker Dr							
		Chicago, IL 60606							
	PURPOSE OF EXPENDITURE	Expense Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense meeting in Houston, TX						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Corr	Fees Offi Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prir	fice Overhea Iling Expens nting Expen laries/Wage	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2				3	Filer ID (Ethics Commission Filers)			
-	Sch: 30/32 Rpt: 35/37		Cameron County Democratic Party Executive Committee				00055995			
4	Date 03/23/2024		Payee name VFW Post 2035							
6	Amount (\$) \$100.00		Payee address; City; State; Zip Code 1801 Veterans Blvd Brownsville, TX 78521							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sought			Office held			
	Date		Payee name							
	03/23/2024		Vega, Seth							
	Amount (\$) \$325.00		Payee address; City; State; Zi 218 E Harding St	ip Code						
			Harlingen, TX 78550							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Salaries/Wages/Contract Labor	₂₎ (b)		TX,	le of Texas. Complete Schedule T. officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sought			Office held			
	Date		Payee name							
	01/10/2024		Wal-mart							
	Amount (\$) \$77.46		Payee address; City; State; Zi 2333 Boca Chica Blvd.	ip Code						
			Brownsville, TX 78521							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense	e) (b)		TX,	le of Texas. Complete Schedule T. officeholder living expense CC			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sought			Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Corr	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2				2	Filer ID (Ethics Commission Filers)
1	Sch: 31/32 Rpt: 36/37		Cameron County Democratic Party Exe	ecutive C	Committee		00055995
4	Date 01/08/2024		Payee name Wal-mart				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
-	\$62.11		2333 Boca Chica Blvd.	p 00.			
	<i>QUELEE</i>						
			Brownsville, TX 78521				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.
					Items for Offi		, officeholder living expense
_	Complete ONIL V if direct		andidate (Office helder recess				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	Jur		Office held
	Date	I	Payee name				
	01/02/2024		Wal-mart				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$11.28		2333 Boca Chica Blvd.				
			Brownsville, TX 78521				
_	PURPOSE	(a)	Category (See Categories listed at the top of this sche	e dule)	(b) Description		
	OF		Office Overhead/Rental Expense	edule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austin	I, TX	, officeholder living expense
					Items for the	Off	fice
	Complete ONLY if direct		andidate/Officeholder name C	Office sou	ght		Office held
	expenditure to benefit C/OI	Η					
	Date		Payee name				
	03/11/2024		Whitman, Benjamin				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$3,939.46		16984 Crystal Ln				
			2				
			Harlingen, TX 78552				
	PURPOSE		Category (See Categories listed at the top of this sche		(b) Description		
	OF		Salaries/Wages/Contract Labor	edule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austin	I, TX	, officeholder living expense
					Salary		
	Complete ONLY if direct		andidate/Officeholder name C	Office sou	ght		Office held
	expenditure to benefit C/OI	Н					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	Repayment/Reimbursement Solicitation/Fundraising Expense Overhead/Rental Expense Transportation Equipment & Related Expense g Expense Travel in District geXyense Travel out of District oorHead/Contract Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)						
1	Sch: 32/32 Rpt: 37/37	Cameron County Democratic Party Executive							
4	Date 02/21/2024	5 Payee name Whitman, Benjamin							
6	Amount (\$) \$3,939.46	 7 Payee address; City; State; Zip Code 16984 Crystal Ln Harlingen, TX 78552 							
8	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office so	sought Office held						
	Date	Payee name							
	01/04/2024	Whitman, Benjamin							
	Amount (\$) \$3,939.46	Payee address; City; State; Zip C 16984 Crystal Ln	Code						
		Harlingen, TX 78552							
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office so	sought Office held						
	Date	Payee name							
	01/03/2024	Whitman, Benjamin							
	Amount (\$) \$140.66	Payee address; City; State; Zip C 16984 Crystal Ln	Code						
		Harlingen, TX 78552							
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office so	sought Office held						