

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

|   |  |   |   |  |                                 |
|---|--|---|---|--|---------------------------------|
| <b>The JC/OH Instruction Guide explains how to complete this form.</b>                              |  | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00084023 | <b>2</b> Total pages filed:<br><br>30         |  |                                 |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR<br>The Honorable                               | FIRST<br>Ysmael D.  | MI  | <b>OFFICE USE ONLY</b><br><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>10/06/2024   |                                 |
|   | NICKNAME   | LAST<br>Fonseca   | SUFFIX<br>Jr.                                 |  |                                 |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;                       |   | ZIP CODE                                      | Date Hand-delivered or Date Postmarked   |                                 |
|   | REDACTED PER 254.0313, GOV'T CODE                            |   |   | Receipt #  |                                 |
|   |  |   |   | Amount   |                                 |
|   |  |   |   | Date Processed   |                                 |
|   |  |   | Date Imaged                                   |  |                                 |
| <b>5</b> CAMPAIGN TREASURER NAME  | MS / MRS / MR<br>Mr.   | FIRST<br>Frank  | MI  |  |                                 |
|   | NICKNAME   | LAST<br>Sabo  | SUFFIX<br>Jr.                                 |  |                                 |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE);                           |   | APT / SUITE #;                                | CITY;  |                                 |
|   |  |   | STATE;  | ZIP CODE   |                                 |
| REDACTED PER 254.0313, GOV'T CODE   |  |   |   |  |                                 |
| <b>7</b> CAMPAIGN TREASURER PHONE   | AREA CODE  | PHONE NUMBER  | EXTENSION                                     |  |                                 |
|   | (956) 345-7616   |   |   |  |                                 |
| <b>8</b> REPORT TYPE  | <input type="checkbox"/> January 15                          |   |   |  |                                 |
|   | <input checked="" type="checkbox"/> 30th day before election |   |   |  |                                 |
|   |  | <input type="checkbox"/> Runoff                             |   | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |                                 |
|   |  | <input type="checkbox"/> July 15                            |   | <input type="checkbox"/> 8th day before election   |                                 |
|   |  | <input type="checkbox"/> Exceeded modified reporting limit  |   | <input type="checkbox"/> Final Report (Attach C/OH-FR)                                     |                                 |
| <b>9</b> PERIOD COVERED   | Month  | Day   | Year  | Month  |                                 |
|   | 07/01/2024   |   |   | Day  |                                 |
|   |  |   | Year  | THROUGH  |                                 |
|   |  |   | 09/26/2024                                    |  |                                 |
| <b>10</b> ELECTION  | ELECTION DATE  |   | ELECTION TYPE                                 |  |                                 |
|   | Month  | Day   | Year  | <input type="checkbox"/> Primary   | <input type="checkbox"/> Runoff |
| 11/05/2024  |  |   | <input checked="" type="checkbox"/> General   | <input type="checkbox"/> Other   |                                 |
|   |  |   | <input type="checkbox"/> Special              |  |                                 |
| <b>11</b> OFFICE  | OFFICE HELD (if any)   |   | <b>12</b> OFFICE SOUGHT (if known)            |  |                                 |
|   | District Judge District 476                                  |   | Court Of Appeals, Justice Place 4 District 13 |  |                                 |

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

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**13** C / OH NAME Fonseca Jr., Ysmael D. (The Honorable) **14** Filer ID (Ethics Commission Filers)  
00084023

**15** NOTICE FROM POLITICAL COMMITTEE(S)  
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

|   |   |
|---|---|
| COMMITTEE TYPE                              | COMMITTEE NAME                                    |
| <input checked="" type="checkbox"/> GENERAL | Judicial Fairness PAC                             |
| <input type="checkbox"/> SPECIFIC           | COMMITTEE ADDRESS                                 |
|   | 919 Congress Ave.<br>Ste. 455<br>Austin, TX 78701 |
|   | COMMITTEE CAMPAIGN TREASURER NAME                 |
|   | Parsley, E. Lee                                   |
|   | COMMITTEE CAMPAIGN TREASURER ADDRESS              |
|   | 919 Congress Ave.<br>Ste. 455<br>Austin, TX 78701 |

|                               |  |    |           |
|-------------------------------|--|----|-----------|
| <b>16</b> CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00      |
|                               | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                       | \$ | 26,893.13 |
| EXPENDITURE TOTALS            | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   | \$ | 0.00      |
|                               | 4. <b>TOTAL POLITICAL EXPENDITURES</b>   | \$ | 30,777.01 |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 16,513.32 |
| OUTSTANDING LOAN TOTALS       | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 0.00      |

**17** AFFIDAVIT

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

The Honorable Ysmael D. Fonseca Jr.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM **JC/OH**  
ADDENDUM

Page 3 of 30

|             |  |          |                            |
|-------------|--|----------|----------------------------|
| C / OH NAME | Fonseca Jr., Ysmael D. (The Honorable) | Filer ID | (Ethics Commission Filers) |
|             |  | 00084023 |                            |

|                                       |   |  |
|---------------------------------------|---|--|
| 17 NOTICE FROM POLITICAL COMMITTEE(S) | .. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures .. |  |
|                                       | COMMITTEE TYPE  | COMMITTEE NAME   |
|                                       | <input checked="" type="checkbox"/> GENERAL   | Texas Alliance for Life PAC                            |
|                                       | <input type="checkbox"/> SPECIFIC   | COMMITTEE ADDRESS                                      |
|                                       |   | 8000 Centre Park Drive<br>Ste. 380<br>Austin, TX 78754 |
|                                       | COMMITTEE CAMPAIGN TREASURER NAME   | Shaw, James  |
|                                       | COMMITTEE CAMPAIGN TREASURER ADDRESS  | 4505 Corazon Cv<br><br>Round Rock, TX 78681            |

# SUBTOTALS - JC/OH

|  |   |                                |                            |
|--|---|--------------------------------|----------------------------|
| <b>18 FILER NAME</b><br>Fonseca Jr., Ysmael D. (The Honorable) |   | <b>19 Filer ID</b><br>00084023 | (Ethics Commission Filers) |
| <b>20 SCHEDULE SUBTOTALS</b>                                   |   |                                | <b>SUBTOTAL AMOUNT</b>     |
|  | <b>NAME OF SCHEDULE</b>   |                                |                            |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)             | \$                             | 26,893.13                  |
| 2.   | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$                             |                            |
| 3.   | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)                                    | \$                             |                            |
| 4.   | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)  | \$                             |                            |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$                             | 21,122.44                  |
| 6.   | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$                             |                            |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$                             |                            |
| 8.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           | \$                             | 6,018.41                   |
| 9.   | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                  | \$                             | 3,636.16                   |
| 10.  | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$                             |                            |
| 11.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$                             |                            |
| 12.  | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                             |                            |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 1/12 Rpt: 5/30 |
| <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023    |
| <b>4</b> Date<br>07/15/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Aguilar & Zabarte, LLC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78520 | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00        |
| <b>8</b> Contributor's Principal Occupation                         |  | <b>9</b> Contributor's Job Title                            |
| <b>10</b> Contributor's employer/law firm                           |  | <b>11</b> Law firm of contributor's spouse (if any)         |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |   |
| Date<br>07/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Atlas, Hall & Rodriguez, LLP<br><hr/> Contributor address; City; State; Zip Code<br><br>McAllen, TX 78501                 | Amount of Contribution (\$)<br><br>\$1,000.00               |
| Contributor's Principal Occupation                                  |  | Contributor's Job Title                                     |
| Contributor's employer/law firm                                     |  | Law firm of contributor's spouse (if any)                   |
| If contributor is a child, law firm of parent(s) (if any)           |  |   |
| Date<br>07/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bilbie, Cindy<br><hr/> Contributor address; City; State; Zip Code<br><br>Harlingen, TX 78550                              | Amount of Contribution (\$)<br><br>\$100.00                 |
| Contributor's Principal Occupation<br>Retired                       |  | Contributor's Job Title<br>Retired                          |
| Contributor's employer/law firm<br>N/A                              |  | Law firm of contributor's spouse (if any)                   |
| If contributor is a child, law firm of parent(s) (if any)           |  |   |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b> |  | 1 Total pages Schedule A(J)1:<br>Sch: 2/12 Rpt: 6/30 |
| 2 FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)           |  | 3 Filer ID (Ethics Commission Filers)<br>00084023    |
| 4 Date<br>09/11/2024   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Boyce, William              | 7 Amount of Contribution (\$)<br><br>\$500.00        |
|  | 6 Contributor address; City; State; Zip Code<br><br>Houston, TX 77008  |  |
| 8 Contributor's Principal Occupation<br>Attorney                 |  | 9 Contributor's Job Title<br>Attorney                |
| 10 Contributor's employer/law firm<br>Alexander Dubose Jefferson |  | 11 Law firm of contributor's spouse (if any)         |
| 12 If contributor is a child, law firm of parent(s) (if any)     |  |  |
| Date<br>08/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burton McCumber & Cortez, LLP | Amount of Contribution (\$)<br><br>\$500.00          |
|  | Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78521  |  |
| Contributor's Principal Occupation                               |  | Contributor's Job Title                              |
| Contributor's employer/law firm                                  |  | Law firm of contributor's spouse (if any)            |
| If contributor is a child, law firm of parent(s) (if any)        |  |  |
| Date<br>08/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Caso Law Firm, PLLC           | Amount of Contribution (\$)<br><br>\$2,000.00        |
|  | Contributor address; City; State; Zip Code<br><br>Edinburg, TX 78539   |  |
| Contributor's Principal Occupation                               |  | Contributor's Job Title                              |
| Contributor's employer/law firm                                  |  | Law firm of contributor's spouse (if any)            |
| If contributor is a child, law firm of parent(s) (if any)        |  |  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

|  |  |  |
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| <b>The Instruction Guide explains how to complete this form.</b> |  | 1 Total pages Schedule A(J)1:<br>Sch: 3/12 Rpt: 7/30 |
| 2 FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)           |  | 3 Filer ID (Ethics Commission Filers)<br>00084023    |
| 4 Date<br>08/05/2024   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Colvin, Saenz, Rodriguez & Kennamer, LLP | 7 Amount of Contribution (\$)<br>\$1,000.00          |
|  | 6 Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78520  |  |
| 8 Contributor's Principal Occupation                             |  | 9 Contributor's Job Title                            |
| 10 Contributor's employer/law firm                               |  | 11 Law firm of contributor's spouse (if any)         |
| 12 If contributor is a child, law firm of parent(s) (if any)     |  |  |
| Date<br>09/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Contreras, Jesus                           | Amount of Contribution (\$)<br>\$800.00              |
|  | Contributor address; City; State; Zip Code<br><br>Edinburg, TX 78539   |  |
| Contributor's Principal Occupation<br>Attorney                   |  | Contributor's Job Title<br>Attorney                  |
| Contributor's employer/law firm<br>Law Office of Jesse Contreras |  | Law firm of contributor's spouse (if any)            |
| If contributor is a child, law firm of parent(s) (if any)        |  |  |
| Date<br>07/12/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dunkin, Doak                               | Amount of Contribution (\$)<br>\$100.00              |
|  | Contributor address; City; State; Zip Code<br><br>Harlingen, TX 78552  |  |
| Contributor's Principal Occupation<br>Entrepreneur               |  | Contributor's Job Title<br>Small Business Owner      |
| Contributor's employer/law firm<br>Self                          |  | Law firm of contributor's spouse (if any)            |
| If contributor is a child, law firm of parent(s) (if any)        |  |  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 4/12 Rpt: 8/30 |
| <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023    |
| <b>4</b> Date<br>09/01/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Great State Republicans<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Hallettsville, TX 77964 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00      |
| <b>8</b> Contributor's Principal Occupation                         |  | <b>9</b> Contributor's Job Title                            |
| <b>10</b> Contributor's employer/law firm                           |  | <b>11</b> Law firm of contributor's spouse (if any)         |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |   |
| Date<br>08/23/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hacienda West Phase I, LLC<br><hr/> Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78521                  | Amount of Contribution (\$)<br><br>\$500.00                 |
| Contributor's Principal Occupation                                  |  | Contributor's Job Title                                     |
| Contributor's employer/law firm                                     |  | Law firm of contributor's spouse (if any)                   |
| If contributor is a child, law firm of parent(s) (if any)           |  |   |
| Date<br>07/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Harlingen Area Tea Party Association<br><hr/> Contributor address; City; State; Zip Code<br><br>Harlingen, TX 78550          | Amount of Contribution (\$)<br><br>\$75.92                  |
| Contributor's Principal Occupation                                  |  | Contributor's Job Title                                     |
| Contributor's employer/law firm                                     |  | Law firm of contributor's spouse (if any)                   |
| If contributor is a child, law firm of parent(s) (if any)           |  |   |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b> |   | 1 Total pages Schedule A(J)1:<br>Sch: 5/12 Rpt: 9/30 |
| 2 FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)           |   | 3 Filer ID (Ethics Commission Filers)<br>00084023    |
| 4 Date<br>09/10/2024   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Isbell, Dianne | 7 Amount of Contribution (\$)<br><br>\$300.00        |
|  | 6 Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78520                           |  |
| 8 Contributor's Principal Occupation<br>Entrepreneur             |   | 9 Contributor's Job Title<br>Small Business Owner    |
| 10 Contributor's employer/law firm<br>Self                       |   | 11 Law firm of contributor's spouse (if any)         |
| 12 If contributor is a child, law firm of parent(s) (if any)     |   |  |
| Date<br>07/12/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jennings, Steven | Amount of Contribution (\$)<br><br>\$100.00          |
|  | Contributor address; City; State; Zip Code<br><br>Combes, TX 78535                                  |  |
| Contributor's Principal Occupation<br>Retired                    |   | Contributor's Job Title<br>Retired                   |
| Contributor's employer/law firm<br>N/A                           |   | Law firm of contributor's spouse (if any)            |
| If contributor is a child, law firm of parent(s) (if any)        |   |  |
| Date<br>09/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jimenez, Jorge   | Amount of Contribution (\$)<br><br>\$500.00          |
|  | Contributor address; City; State; Zip Code<br><br>Edinburg, TX 78541                                |  |
| Contributor's Principal Occupation<br>Entrepreneur               |   | Contributor's Job Title<br>Small Business Owner      |
| Contributor's employer/law firm<br>Self                          |   | Law firm of contributor's spouse (if any)            |
| If contributor is a child, law firm of parent(s) (if any)        |   |  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 6/12 Rpt: 10/30 |
| <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023     |
| <b>4</b> Date<br>07/12/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kuprel, Charlene<br>.....<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Laguna Vista, TX 78578 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00          |
| <b>8</b> Contributor's Principal Occupation<br>Retired              |  | <b>9</b> Contributor's Job Title<br>Retired                  |
| <b>10</b> Contributor's employer/law firm<br>N/A                    |  | <b>11</b> Law firm of contributor's spouse (if any)          |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |  |
| Date<br>09/20/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Office of Carlos A. Garcia<br>.....<br>Contributor address; City; State; Zip Code<br><br>Mission, TX 78572          | Amount of Contribution (\$)<br><br>\$500.00                  |
| Contributor's Principal Occupation                                  |  | Contributor's Job Title                                      |
| Contributor's employer/law firm                                     |  | Law firm of contributor's spouse (if any)                    |
| If contributor is a child, law firm of parent(s) (if any)           |  |  |
| Date<br>08/30/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Office of Jose W. Hernandez<br>.....<br>Contributor address; City; State; Zip Code<br><br>Edinburg, TX 78539        | Amount of Contribution (\$)<br><br>\$500.00                  |
| Contributor's Principal Occupation                                  |  | Contributor's Job Title                                      |
| Contributor's employer/law firm                                     |  | Law firm of contributor's spouse (if any)                    |
| If contributor is a child, law firm of parent(s) (if any)           |  |  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b> |  | 1 Total pages Schedule A(J)1:<br>Sch: 7/12 Rpt: 11/30 |
| 2 FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)           |  | 3 Filer ID (Ethics Commission Filers)<br>00084023     |
| 4 Date<br>07/12/2024   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lewis, Jeneria                    | 7 Amount of Contribution (\$)<br><br>\$100.00         |
|  | 6 Contributor address; City; State; Zip Code<br><br>Bayview, TX 78566  |   |
| 8 Contributor's Principal Occupation<br>Business Analysis        |  | 9 Contributor's Job Title<br>Manager                  |
| 10 Contributor's employer/law firm<br>Blackbeards' Inc.          |  | 11 Law firm of contributor's spouse (if any)          |
| 12 If contributor is a child, law firm of parent(s) (if any)     |  |   |
| Date<br>09/11/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McCumber, Brad                      | Amount of Contribution (\$)<br><br>\$200.00           |
|  | Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78520  |   |
| Contributor's Principal Occupation<br>Entrepreneur               |  | Contributor's Job Title<br>Small Business Owner       |
| Contributor's employer/law firm<br>Self                          |  | Law firm of contributor's spouse (if any)             |
| If contributor is a child, law firm of parent(s) (if any)        |  |   |
| Date<br>08/12/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nueces County Republican Womens PAC | Amount of Contribution (\$)<br><br>\$500.00           |
|  | Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78466   |   |
| Contributor's Principal Occupation                               |  | Contributor's Job Title                               |
| Contributor's employer/law firm                                  |  | Law firm of contributor's spouse (if any)             |
| If contributor is a child, law firm of parent(s) (if any)        |  |   |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 8/12 Rpt: 12/30 |
| <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)       |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023     |
| <b>4</b> Date<br>09/04/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nye Law Office PLLC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,500.00       |
| <b>8</b> Contributor's Principal Occupation                         |   | <b>9</b> Contributor's Job Title                             |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)          |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |  |
| Date<br>08/08/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ostos, Robert<br><hr/> Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78526                            | Amount of Contribution (\$)<br><br>\$500.00                  |
| Contributor's Principal Occupation<br>Business Owner                |   | Contributor's Job Title<br>President                         |
| Contributor's employer/law firm<br>DIX Industries                   |   | Law firm of contributor's spouse (if any)                    |
| If contributor is a child, law firm of parent(s) (if any)           |   |  |
| Date<br>07/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Petit-Clerc, Guy<br><hr/> Contributor address; City; State; Zip Code<br><br>Harlingen, TX 78550                           | Amount of Contribution (\$)<br><br>\$75.00                   |
| Contributor's Principal Occupation<br>Entrepreneur                  |   | Contributor's Job Title<br>Small Business Owner              |
| Contributor's employer/law firm<br>Self                             |   | Law firm of contributor's spouse (if any)                    |
| If contributor is a child, law firm of parent(s) (if any)           |   |  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

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| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 9/12 Rpt: 13/30 |
| <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)       |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023     |
| <b>4</b> Date<br>07/12/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Shelton, Catherine<br>.....<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78520 | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00          |
| <b>8</b> Contributor's Principal Occupation<br>Retired              |   | <b>9</b> Contributor's Job Title<br>Retired                  |
| <b>10</b> Contributor's employer/law firm<br>N/A                    |   | <b>11</b> Law firm of contributor's spouse (if any)          |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |  |
| Date<br>07/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Simpson, Minerva<br>.....<br>Contributor address; City; State; Zip Code<br><br>Harlingen, TX 78552                       | Amount of Contribution (\$)<br><br>\$20.00                   |
| Contributor's Principal Occupation<br>Mortgage Broker               |   | Contributor's Job Title<br>Manager                           |
| Contributor's employer/law firm<br>Fairway Independent Mortgage     |   | Law firm of contributor's spouse (if any)                    |
| If contributor is a child, law firm of parent(s) (if any)           |   |  |
| Date<br>07/31/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Tejas PAC<br>.....<br>Contributor address; City; State; Zip Code<br><br>Mission, TX 78573                                | Amount of Contribution (\$)<br><br>\$1,022.00                |
| Contributor's Principal Occupation                                  |   | Contributor's Job Title                                      |
| Contributor's employer/law firm                                     |   | Law firm of contributor's spouse (if any)                    |
| If contributor is a child, law firm of parent(s) (if any)           |   |  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 10/12 Rpt: 14/30 |
| <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)       |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023      |
| <b>4</b> Date<br>09/03/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texans for Lawsuit Reform PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701   | <b>7</b> Amount of Contribution (\$)<br><br>\$2,500.00        |
| <b>8</b> Contributor's Principal Occupation                         |   | <b>9</b> Contributor's Job Title                              |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)           |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |   |
| Date<br>08/29/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>The William and Lana Holland Revocable Trust<br><hr/> Contributor address; City; State; Zip Code<br><br>George West, TX 78022 | Amount of Contribution (\$)<br><br>\$200.00                   |
| Contributor's Principal Occupation                                  |   | Contributor's Job Title                                       |
| Contributor's employer/law firm                                     |   | Law firm of contributor's spouse (if any)                     |
| If contributor is a child, law firm of parent(s) (if any)           |   |   |
| Date<br>08/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Williams, Alma<br><hr/> Contributor address; City; State; Zip Code<br><br>Pharr, TX 78577                                     | Amount of Contribution (\$)<br><br>\$5.21                     |
| Contributor's Principal Occupation<br>Nurse                         |   | Contributor's Job Title<br>Nurse                              |
| Contributor's employer/law firm<br>HVHC                             |   | Law firm of contributor's spouse (if any)                     |
| If contributor is a child, law firm of parent(s) (if any)           |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

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| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 11/12 Rpt: 15/30 |
| <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023      |
| <b>4</b> Date<br>08/13/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wells, Emmett        | <b>7</b> Amount of Contribution (\$)<br>\$250.00              |
|   | <b>6</b> Contributor address; City; State; Zip Code<br><br>Los Fresnos, TX 78566                                 |   |
| <b>8</b> Contributor's Principal Occupation<br>Sales                |  | <b>9</b> Contributor's Job Title<br>Sales Representative      |
| <b>10</b> Contributor's employer/law firm<br>FCC Environmental      |  | <b>11</b> Law firm of contributor's spouse (if any)           |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |   |
| <b>Date</b><br>08/02/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wolfe, Cassandra       | <b>Amount of Contribution (\$)</b><br>\$250.00                |
|   | <b>Contributor address; City; State; Zip Code</b><br><br>Bayview, TX 78566                                       |   |
| <b>Contributor's Principal Occupation</b><br>Entrepreneur           |  | <b>Contributor's Job Title</b><br>Small Business Owner        |
| <b>Contributor's employer/law firm</b><br>Self                      |  | <b>Law firm of contributor's spouse (if any)</b>              |
| <b>If contributor is a child, law firm of parent(s) (if any)</b>    |  |   |
| <b>Date</b><br>09/15/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Yoder, Jennifer (Mrs.) | <b>Amount of Contribution (\$)</b><br>\$5,000.00              |
|   | <b>Contributor address; City; State; Zip Code</b><br><br>Edinburg, TX 78539                                      |   |
| <b>Contributor's Principal Occupation</b><br>Entrepreneur           |  | <b>Contributor's Job Title</b><br>Small Business Owner        |
| <b>Contributor's employer/law firm</b><br>Self                      |  | <b>Law firm of contributor's spouse (if any)</b>              |
| <b>If contributor is a child, law firm of parent(s) (if any)</b>    |  |   |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

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|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 12/12 Rpt: 16/30 |
| <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023      |
| <b>4</b> Date<br>09/15/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Yoder, William (Mr.)<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Edinburg, TX 78539 | <b>7</b> Amount of Contribution (\$)<br><br>\$5,000.00        |
| <b>8</b> Contributor's Principal Occupation<br>Entrepreneur         |  | <b>9</b> Contributor's Job Title<br>Small Business Owner      |
| <b>10</b> Contributor's employer/law firm<br>Self                   |  | <b>11</b> Law firm of contributor's spouse (if any)           |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |   |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

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| <b>1</b> Total pages Schedule F1:<br>Sch: 1/7 Rpt: 17/30     | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)                                    | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023   |
| <b>4</b> Date<br>09/04/2024                                  | <b>5</b> Payee name<br>Antojitos Mexicanos El Bufalo   |  |
| <b>6</b> Amount (\$)<br>\$225.00                             | <b>7</b> Payee address; City; State; Zip Code<br>1826 W. Mile 3 Rd.<br><br>Mission, TX 78573     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Dove Hunt Fundraiser |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>08/21/2024   | Payee name<br>Arrow Display Signs  |  |
| Amount (\$)<br>\$140.73                                      | Payee address; City; State; Zip Code<br>1343 S. Staples St.<br><br>Corpus Christi, TX 78404      |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Display              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>08/26/2024   | Payee name<br>Bank of America  |  |
| Amount (\$)<br>\$4,600.66                                    | Payee address; City; State; Zip Code<br>100 North Tryon Street<br><br>Charlotte, NC 28255        |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Credit Card Payment   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Credit Card Payment  |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/7 Rpt: 18/30 | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023 |
|--|---|--|

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| <b>4</b> Date<br>07/24/2024 | <b>5</b> Payee name<br>Breeden McCumber Group |
|-----------------------------|---|

|                                    |   |
|------------------------------------|---|
| <b>6</b> Amount (\$)<br>\$5,300.00 | <b>7</b> Payee address; City; State; Zip Code<br>1724 Boca Chica Blvd.<br><br>Brownsville, TX 78520 |
|------------------------------------|---|

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|---------------------------------|--|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Signs |
|---------------------------------|--|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                               |
|--------------------|-------------------------------|
| Date<br>07/15/2024 | Payee name<br>Fonseca, Ysmael |
|--------------------|-------------------------------|

|                           |  |
|---------------------------|--|
| Amount (\$)<br>\$1,030.16 | Payee address; City; State; Zip Code<br>P.O. Box 419<br><br>Edinburg, TX 78540 |
|---------------------------|--|

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|-------------------------------|---|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Loan Repayment/Reimbursement | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Reimburse Adobe/MailChimp/HEB |
|-------------------------------|---|---|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                               |
|--------------------|-------------------------------|
| Date<br>08/23/2024 | Payee name<br>Fonseca, Ysmael |
|--------------------|-------------------------------|

|                           |  |
|---------------------------|--|
| Amount (\$)<br>\$1,091.48 | Payee address; City; State; Zip Code<br>P.O. Box 419<br><br>Edinburg, TX 78540 |
|---------------------------|--|

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|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Loan Repayment/Reimbursement | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Reimbursement for printing |
|-------------------------------|---|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/7 Rpt: 19/30 | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023 |
|--|---|--|

|                             |                                      |
|-----------------------------|--------------------------------------|
| <b>4</b> Date<br>07/05/2024 | <b>5</b> Payee name<br>Jasso, Carlos |
|-----------------------------|--------------------------------------|

|                                  |   |
|----------------------------------|---|
| <b>6</b> Amount (\$)<br>\$650.00 | <b>7</b> Payee address; City; State; Zip Code<br>112 E. Cano Street<br><br>Edinburg, TX 78539 |
|----------------------------------|---|

|                                 |  |  |
|---------------------------------|--|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social Media |
|---------------------------------|--|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                             |
|--------------------|-----------------------------|
| Date<br>08/06/2024 | Payee name<br>Jasso, Carlos |
|--------------------|-----------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$650.00 | Payee address; City; State; Zip Code<br>112 E. Cano Street<br><br>Edinburg, TX 78539 |
|-------------------------|--|

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|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social Media |
|------------------------|---|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                             |
|--------------------|-----------------------------|
| Date<br>09/04/2024 | Payee name<br>Jasso, Carlos |
|--------------------|-----------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$650.00 | Payee address; City; State; Zip Code<br>112 E. Cano Street<br><br>Edinburg, TX 78539 |
|-------------------------|--|

|                        |   |   |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social Media |
|------------------------|---|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/7 Rpt: 20/30     | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023  |
| <b>4</b> Date<br>08/21/2024                                  | <b>5</b> Payee name<br>Lone Star National Bank  |   |
| <b>6</b> Amount (\$)<br>\$12.00                              | <b>7</b> Payee address; City; State; Zip Code<br>206 West Ferguson<br><br>Pharr, TX 78577                   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking               | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Checks      |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/30/2024   | Payee name<br>Lone Star National Bank   |   |
| Amount (\$)<br>\$7.50  | Payee address; City; State; Zip Code<br>206 West Ferguson<br><br>Pharr, TX 78577                            |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking               | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Service Fee |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/20/2024   | Payee name<br>McAllen Chamber of Commerce   |   |
| Amount (\$)<br>\$145.00                                      | Payee address; City; State; Zip Code<br>1200 Ash Ave<br><br>McAllen, TX 78501                               |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mailer      |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 5/7 Rpt: 21/30 | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023 |
|--|---|--|

|                             |  |
|-----------------------------|--|
| <b>4</b> Date<br>08/12/2024 | <b>5</b> Payee name<br>McAllen Digital Media |
|-----------------------------|--|

|                                  |   |
|----------------------------------|---|
| <b>6</b> Amount (\$)<br>\$500.00 | <b>7</b> Payee address; City; State; Zip Code<br>1015 W. Kika De La Garza St.<br>Unit #4<br>Mission, TX 78572 |
|----------------------------------|---|

|                                 |  |  |
|---------------------------------|--|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Media Ad |
|---------------------------------|--|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |   |
|--------------------|---|
| Date<br>09/04/2024 | Payee name<br>Republican Club of Bee County |
|--------------------|---|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$100.00 | Payee address; City; State; Zip Code<br>2675 Airport Rd.<br><br>Beeville, TX 78102 |
|-------------------------|--|

|                               |  |   |
|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Dinner Ticket |
|-------------------------------|--|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                                      |
|--------------------|--------------------------------------|
| Date<br>07/15/2024 | Payee name<br>Steve Ray & Associates |
|--------------------|--------------------------------------|

|                           |  |
|---------------------------|--|
| Amount (\$)<br>\$2,000.00 | Payee address; City; State; Zip Code<br>P.O. Box 742<br><br>Corpus Christi, TX 78403 |
|---------------------------|--|

|                               |   |   |
|-------------------------------|---|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Consulting Fees |
|-------------------------------|---|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/7 Rpt: 22/30 | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023 |
|--|---|--|

|                             |   |
|-----------------------------|---|
| <b>4</b> Date<br>08/06/2024 | <b>5</b> Payee name<br>Steve Ray & Associates |
|-----------------------------|---|

|                                    |   |
|------------------------------------|---|
| <b>6</b> Amount (\$)<br>\$2,000.00 | <b>7</b> Payee address; City; State; Zip Code<br>P.O. Box 742<br><br>Corpus Christi, TX 78403 |
|------------------------------------|---|

|                                 |   |   |
|---------------------------------|---|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Consulting Fees |
|---------------------------------|---|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                                      |
|--------------------|--------------------------------------|
| Date<br>09/13/2024 | Payee name<br>Steve Ray & Associates |
|--------------------|--------------------------------------|

|                           |  |
|---------------------------|--|
| Amount (\$)<br>\$2,000.00 | Payee address; City; State; Zip Code<br>P.O. Box 742<br><br>Corpus Christi, TX 78403 |
|---------------------------|--|

|                        |  |  |
|------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Consulting Fees |
|------------------------|--|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                      |
|--------------------|----------------------|
| Date<br>08/22/2024 | Payee name<br>WinRed |
|--------------------|----------------------|

|                       |  |
|-----------------------|--|
| Amount (\$)<br>\$0.21 | Payee address; City; State; Zip Code<br>P.O. Box 9891<br><br>Arlington, VA 22219 |
|-----------------------|--|

|                        |  |  |
|------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Online Donation Fee |
|------------------------|--|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 7/7 Rpt: 23/30            | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023  |
| <b>4</b> Date<br>09/16/2024   | <b>5</b> Payee name<br>WinRed   |   |
| <b>6</b> Amount (\$)<br>\$19.70                                     | <b>7</b> Payee address; City; State; Zip Code<br>P.O. Box 9891<br><br>Arlington, VA 22219                   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Online Donation Fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought   |
|   |   | Office held   |

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |  |   |                                  |  |  |
|--|--|---|----------------------------------|--|--|
| <b>1</b> Total pages Schedule F4:<br>Sch: 1/4 Rpt: 24/30   |  | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)                             |                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023   |  |
| <b>4</b> CREDIT CARD ISSUER  |  | Name of financial institution<br>Bank of America  |                                  | <b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                               |  |
| <b>6</b> PAYMENT   |  | (a) Amount Charged<br>\$117.26  | (b) Date of Charge<br>08/30/2024 | (c) Date(s) Credit Card Issuer Paid  |  |
| <b>7</b> PAYEE   |  | (a) Payee name<br>Mailchimp c/o The Rocket  |                                  | (b) Payee address; City, State, Zip Code<br>675 Ponce De Leon Ave NW<br>Ste. 5000<br>Atlanta, GA 30308 |  |
| <b>8</b> PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |  | (a) Category (See Categories listed at the top of this schedule)<br>Email Service         |                                  | (b) Description<br>Newsletter  |  |
|  |  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.       |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                              |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  | Candidate/Officeholder name   |                                  | Office sought  |  |
|  |  |   |                                  | Office held  |  |
| <b>PAYMENT</b>   |  | (a) Amount Charged<br>\$93.72   | (b) Date of Charge<br>09/09/2024 | (c) Date(s) Credit Card Issuer Paid  |  |
| <b>PAYEE</b>   |  | (a) Payee name<br>HEB   |                                  | (b) Payee address; City, State, Zip Code<br>2700 W. Freddy Gonzalez Dr.<br>Edinburg, TX 78539          |  |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |                                  | (b) Description<br>Dove Hunt Fundraiser  |  |
|  |  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.       |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                              |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |                                  | Office sought  |  |
|  |  |   |                                  | Office held  |  |
| <b>PAYMENT</b>   |  | (a) Amount Charged<br>\$325.46  | (b) Date of Charge<br>09/09/2024 | (c) Date(s) Credit Card Issuer Paid  |  |
| <b>PAYEE</b>   |  | (a) Payee name<br>Aguilar's Meat Market   |                                  | (b) Payee address; City, State, Zip Code<br>1306 E. University Dr.<br>Edinburg, TX 78539               |  |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |                                  | (b) Description<br>Dove Hunt Fundraiser  |  |
|  |  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.       |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                              |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |                                  | Office sought  |  |
|  |  |   |                                  | Office held  |  |



# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|          |   |   |  |   |   |
|----------|---|---|--|---|---|
| <b>1</b> | Total pages Schedule F4:<br>Sch: 2/4 Rpt: 25/30   | <b>2</b>  | FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable) | <b>3</b>  | Filer ID (Ethics Commission Filers)<br>00084023                 |
| <b>4</b> | CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |  | <b>5</b>  | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$ |
| <b>6</b> | PAYMENT   | (a) Amount Charged<br>\$43.30   | (b) Date of Charge<br>09/13/2024                     | (c) Date(s) Credit Card Issuer Paid   |   |
| <b>7</b> | PAYEE   | (a) Payee name<br>The Print Shop  |  | (b) Payee address; City, State, Zip Code<br>3906 S. Jackson Rd.<br>Edinburg, TX 78539 |   |
| <b>8</b> | PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Printing Expense                 |  | (b) Description<br>Postcards  |   |
|          |   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                     |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense             |   |
| <b>9</b> | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |  | Office sought   | Office held   |
| <b>6</b> | PAYMENT   | (a) Amount Charged<br>\$28.26   | (b) Date of Charge<br>08/20/2024                     | (c) Date(s) Credit Card Issuer Paid<br>08/26/2024                                     |   |
| <b>7</b> | PAYEE   | (a) Payee name<br>Walmart   |  | (b) Payee address; City, State, Zip Code<br>4101 S. McColl Rd<br>Edinburg, TX 78539   |   |
| <b>8</b> | PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense |  | (b) Description<br>Mailer Supplies  |   |
|          |   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                     |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense             |   |
|          |   | Candidate/Officeholder name   |  | Office sought   | Office held   |
| <b>6</b> | PAYMENT   | (a) Amount Charged<br>\$189.80  | (b) Date of Charge<br>08/21/2024                     | (c) Date(s) Credit Card Issuer Paid<br>08/26/2024                                     |   |
| <b>7</b> | PAYEE   | (a) Payee name<br>USPS  |  | (b) Payee address; City, State, Zip Code<br>410 S. Jackson Rd.<br>Edinburg, TX 78539  |   |
| <b>8</b> | PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense |  | (b) Description<br>Postage  |   |
|          |   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                     |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense             |   |
|          |   | Candidate/Officeholder name   |  | Office sought   | Office held   |

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

|  |   |   |   |  |   |
|--|---|---|---|--|---|
| <b>1</b>   | Total pages Schedule F4:<br>Sch: 3/4 Rpt: 26/30   | <b>2</b>  | FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)                      | <b>3</b>   | Filer ID (Ethics Commission Filers)<br>00084023                 |
| <b>4</b>   | CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |   | <b>5</b>   | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$ |
| <b>6</b>   | PAYMENT   | (a) Amount Charged<br>\$289.96  | (b) Date of Charge<br>09/20/2024  | (c) Date(s) Credit Card Issuer Paid  |   |
| <b>7</b>   | PAYEE   | (a) Payee name<br>Southwest   |   | (b) Payee address; City, State, Zip Code<br>2702 Love Field Dr<br>Dallas, TX 75235 |   |
| <b>8</b>   | PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District  |   | (b) Description<br>Houston Meet-And-Greet and Fundraiser                           |   |
|  |   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.         |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense          |   |
| <b>9</b>   | Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   |   | Office sought  | Office held   |
| <b>PAYMENT</b>   | (a) Amount Charged<br>\$4,113.50  | (b) Date of Charge<br>08/21/2024  | (c) Date(s) Credit Card Issuer Paid<br>08/26/2024                         |  |   |
| <b>PAYEE</b>   | (a) Payee name<br>The Print Shop  | (b) Payee address; City, State, Zip Code<br>3906 S. Jackson Rd.<br>Edinburg, TX 78539       |   |  |   |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule)<br>Printing Expense                              |   | (b) Description<br>Signs  |  |   |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                               |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |   |
| Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |   | Office sought   | Office held  |   |
| <b>PAYMENT</b>   | (a) Amount Charged<br>\$269.10  | (b) Date of Charge<br>08/23/2024  | (c) Date(s) Credit Card Issuer Paid<br>08/26/2024                         |  |   |
| <b>PAYEE</b>   | (a) Payee name<br>Neely Printing and More   | (b) Payee address; City, State, Zip Code<br>1011 Louisiana Ave.<br>Corpus Christi, TX 78404 |   |  |   |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule)<br>Printing Expense                              |   | (b) Description<br>Signs  |  |   |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                               |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |   |
| Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |   | Office sought   | Office held  |   |

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |  |   |  |   |
|--|---|--|---|--|---|
| <b>1</b>   | Total pages Schedule F4:<br>Sch: 4/4 Rpt: 27/30   | <b>2</b>   | FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)                      | <b>3</b>   | Filer ID (Ethics Commission Filers)<br>00084023                 |
| <b>4</b>   | CREDIT CARD ISSUER  | Name of financial institution<br>see previous  |   | <b>5</b>   | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$ |
| <b>6</b>   | PAYMENT   | (a) Amount Charged<br>\$332.10   | (b) Date of Charge<br>08/27/2024  | (c) Date(s) Credit Card Issuer Paid  |   |
| <b>7</b>   | PAYEE   | (a) Payee name<br>Lowe's Home Improvement  |   | (b) Payee address; City, State, Zip Code<br>2802 W. University Dr.<br><br>Edinburg, TX 78539 |   |
| <b>8</b>   | PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Advertising Expense |   | (b) Description<br>Sign posting materials  |   |
|  |   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.        |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                    |   |
| <b>9</b>   | Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  |   | Office sought  | Office held   |
| <b>PAYMENT</b>   | (a) Amount Charged<br>\$64.94   | (b) Date of Charge<br>08/28/2024   | (c) Date(s) Credit Card Issuer Paid                                       |  |   |
| <b>PAYEE</b>   | (a) Payee name<br>Adobe, Inc.   | (b) Payee address; City, State, Zip Code<br>345 Park Ave<br><br>San Jose, CA 95110-2704    |   |  |   |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Software                                   |  | (b) Description<br>Software Use   |  |   |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                               |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |   |
| Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |  | Office sought   | Office held  |   |
| <b>PAYMENT</b>   | (a) Amount Charged<br>\$151.01  | (b) Date of Charge<br>08/30/2024   | (c) Date(s) Credit Card Issuer Paid                                       |  |   |
| <b>PAYEE</b>   | (a) Payee name<br>Party With Us RGV   | (b) Payee address; City, State, Zip Code<br>3600 N. Birch St.<br><br>Pharr, TX 78577       |   |  |   |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Event Expense                              |  | (b) Description<br>Dove Hunt Fundraiser                                   |  |   |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                               |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |   |
| Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |  | Office sought   | Office held  |   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule G:<br>Sch: 1/3 Rpt: 28/30  | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023  |
| <b>4</b> Date<br>08/17/2024  | <b>5</b> Payee name<br>Adobe, Inc.   |   |
| <b>6</b> Amount (\$)<br>\$32.46<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>345 Park Ave<br><br>San Jose, CA 95110-2704                                 |   |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                    | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Stock Images |
|  | <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |   |
| Date<br>07/17/2024   | Payee name<br>Adobe, Inc.  |   |
| Amount (\$)<br>\$32.46<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>345 Park Ave<br><br>San Jose, CA 95110-2704  |   |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                               | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Stock Images            |
|  | <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |   |
| Date<br>07/29/2024   | Payee name<br>Adobe, Inc.  |   |
| Amount (\$)<br>\$64.94<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>345 Park Ave<br><br>San Jose, CA 95110-2704  |   |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                               | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Creative Cloud          |
|  | <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule G:<br>Sch: 2/3 Rpt: 29/30   | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023   |
| <b>4</b> Date<br>09/26/2024   | <b>5</b> Payee name<br>Fonseca, Ysmael   |  |
| <b>6</b> Amount (\$)<br>\$2,544.68<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>P.O. Box 419<br><br>Edinburg, TX 78540            |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District      | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mileage for Reporting Period: 3885 @65.5 cents per mile |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought                      Office held   |
| Date<br>07/30/2024  | Payee name<br>Mailchimp c/o The Rocket Science Group, LLC  |  |
| Amount (\$)<br>\$117.26<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended            | Payee address; City; State; Zip Code<br>675 Ponce De Leon Ave NW<br>Ste. 5000<br>Atlanta, GA 30308 |  |
| <b>PURPOSE OF EXPENDITURE</b>   | Category (See Categories listed at the top of this schedule)<br>Advertising Expense                | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Newsletter   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought                      Office held   |
| Date<br>08/10/2024  | Payee name<br>The Print Shop   |  |
| Amount (\$)<br>\$422.18<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended            | Payee address; City; State; Zip Code<br>3906 S. Jackson Rd.<br><br>Edinburg, TX 78539              |  |
| <b>PURPOSE OF EXPENDITURE</b>   | Category (See Categories listed at the top of this schedule)<br>Printing Expense                   | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Signs  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought                      Office held   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule G:<br>Sch: 3/3 Rpt: 30/30   | <b>2</b> FILER NAME<br>Fonseca Jr., Ysmael D. (The Honorable)                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084023   |
| <b>4</b> Date<br>08/13/2024   | <b>5</b> Payee name<br>The Print Shop  |  |
| <b>6</b> Amount (\$)<br>\$422.18<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>3906 S. Jackson Rd.<br><br>Edinburg, TX 78539 |  |
| <b>8</b> <b>PURPOSE OF EXPENDITURE</b>  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense    | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Signs |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought                      Office held   |