

# 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)<br>00015946  | 2 Total pages filed:<br>58  |
| 3 COMMITTEE NAME<br>Nueces County Democratic Executive Committee (CEC)                 |   |  | OFFICE USE ONLY<br>Date Received<br>ELECTRONICALLY FILED<br>10/07/2024<br>Date Hand-delivered or Date Postmarked<br>Receipt # Amount<br>Date Processed<br>Date Imaged |
| 4 COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>6102 Ayers Ste. 107<br><br>Corpus Christi, TX 78415   |  |   |
| 5 CAMPAIGN TREASURER NAME  | MS / MRS / MR FIRST MI<br>Mrs. Stephanie<br>NICKNAME LAST SUFFIX<br>Guerrero Saenz  |  |   |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business)                         | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>6022 Sweet Gum<br><br>Corpus Christi, TX 78415   |  |   |
| 7 CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>6022 Sweet Gum<br><br>Corpus Christi, TX 78415  |  |   |
| 8 CAMPAIGN TREASURER PHONE   | AREA CODE PHONE NUMBER EXTENSION<br>(361) 249-3041  |  |   |
| 9 REPORT TYPE  | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |  |   |
| 10 PERIOD COVERED  | Month Day Year<br>07/01/2024 THROUGH Month Day Year<br>09/26/2024   |  |   |
| 11 ELECTION  | ELECTION DATE<br>Month Day Year<br>11/05/2024   | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input checked="" type="checkbox"/> General <input type="checkbox"/> Special |   |

GO TO PAGE 2

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC  
COVER SHEET PG 2

|   |  |   |
|---|--|---|
| <b>12 COMMITTEE NAME</b><br>Nueces County Democratic Executive Committee (CEC)                          |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00015946   |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)                     | A. Supported Democrat   |
|   |  | B. Opposed  |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)               | A. Supported  |
|   |  | B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.)         |   |
|   | <b>15 CONTRIBUTION TOTALS</b>  | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
|   | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)       | \$ 58,622.00  |
| EXPENDITURE TOTALS  | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>  | \$ 0.00   |
|   | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 38,009.53  |
| CONTRIBUTION BALANCE  | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>        | \$ 39,855.00  |
| OUTSTANDING LOAN TOTALS   | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b> | \$ 0.00   |

## 16 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.

Mrs. Stephanie Guerrero Saenz

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**SUBTOTALS - CEC****FORM CEC**  
**COVER SHEET PG 3**  
3 of 58

|  |   |   |
|--|---|---|
| <b>17</b> COMMITTEE NAME<br>Nueces County Democratic Executive Committee (CEC) |   | <b>18</b> Filer ID (Ethics Commission Filers)<br>00015946 |
| <b>19</b> SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE                               |   | SUBTOTAL AMOUNT   |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$ 58,622.00  |
| 2.   | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$ 0.00   |
| 3.   | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                       | \$ 0.00   |
| 4.   | <input checked="" type="checkbox"/> SCHEDULE E: LOANS   | \$ 0.00   |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$ 38,009.53  |
| 6.   | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                | \$ 0.00   |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$  |
| 8.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           | \$ 0.00   |
| 9.   | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$  |
| 10.  | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>           |   | <b>1</b> Total pages Schedule A1:<br>Sch: 1/24 Rpt: 4/58        |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946        |
| <b>4</b> Date<br>09/02/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Anderson, Clifford<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401 | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00            |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired    |   | <b>9</b> Employer (See Instructions)<br>retired                 |
| Date<br>09/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Avila, Corina<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                        | Amount of Contribution (\$)<br><br>\$15.00                      |
| Principal occupation / Job title (See Instructions)<br>Border Patrol Agent |   | Employer (See Instructions)<br>Border Patrol                    |
| Date<br>09/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Barrientos, Gonzalo J.<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411               | Amount of Contribution (\$)<br><br>\$300.00                     |
| Principal occupation / Job title (See Instructions)<br>Attorney            |   | Employer (See Instructions)<br>Hilliard Martinez Gonzalez LLP   |
| Date<br>08/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bass, Rhen<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414                           | Amount of Contribution (\$)<br><br>\$115.00                     |
| Principal occupation / Job title (See Instructions)<br>Accountant          |   | Employer (See Instructions)<br>Corpus Christi Housing Authority |
| Date<br>08/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bell, John (Mr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78418-7178                | Amount of Contribution (\$)<br><br>\$1,000.00                   |
| Principal occupation / Job title (See Instructions)<br>Attorney            |   | Employer (See Instructions)<br>Wood Boykin & Wolter PC          |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/24 Rpt: 5/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946 |
| <b>4</b> Date<br>08/28/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bonilla and Chapa PC Operating Account<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>corpus christi, TX 78405 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,500.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)              |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>09/11/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brown, Giddings<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401  | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |   | Employer (See Instructions)<br>Not Employed              |
| Date<br>09/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burkett Law firm<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401   | Amount of Contribution (\$)<br><br>\$2,500.00            |
| Principal occupation / Job title (See Instructions)                       |   | Employer (See Instructions)                              |
| Date<br>09/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Campbell, Elizabeth<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78410                                      | Amount of Contribution (\$)<br><br>\$15.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |   | Employer (See Instructions)<br>Not Employed              |
| Date<br>09/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Campos, Sylvia<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411   | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Council Member     |   | Employer (See Instructions)<br>City of Corpus Christi    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 3/24 Rpt: 6/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946 |
| <b>4</b> Date<br>09/07/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Canales, Robert<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Retired          |
| Date<br>07/11/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Canales , Yolanda<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                 | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired               |  | Employer (See Instructions)<br>Retired                   |
| Date<br>08/11/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Canales , Yolanda<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                 | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired               |  | Employer (See Instructions)<br>Retired                   |
| Date<br>09/11/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Canales , Yolanda<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                 | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired               |  | Employer (See Instructions)<br>Retired                   |
| Date<br>07/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cavazos, Teresa<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                   | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed              |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 4/24 Rpt: 7/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946 |
| <b>4</b> Date<br>09/16/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Celis Law Group<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,000.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)              |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>07/01/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Clower, George<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78463                    | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>None                      |
| Date<br>07/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Clower, George<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78463                    | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>None                      |
| Date<br>08/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Clower, George<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78463                    | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>None                      |
| Date<br>09/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Clower, George<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78463                    | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>None                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>   |  | <b>1</b> Total pages Schedule A1:<br>Sch: 5/24 Rpt: 8/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946 |
| <b>4</b> Date<br>09/24/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Corales, Edward<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Chrisit, TX 78415 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Lineman                                    |  | <b>9</b> Employer (See Instructions)<br>Pike             |
| Date<br>09/26/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cortez, Julius<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78415                    | Amount of Contribution (\$)<br><br>\$15.00               |
| Principal occupation / Job title (See Instructions)<br>Credit Analyst                                      |  | Employer (See Instructions)<br>Value Bank Texas          |
| Date<br>08/19/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Crawford, Geanine<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                 | Amount of Contribution (\$)<br><br>\$15.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed  |  | Employer (See Instructions)<br>Not Employed              |
| Date<br>09/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Edwards Law Firm PLLC<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78403             | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)                              |
| Date<br>07/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Engen, Erick<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78403                     | Amount of Contribution (\$)<br><br>\$5.00                |
| Principal occupation / Job title (See Instructions)<br>Disaster Assistance Department of Homeland Security |  | Employer (See Instructions)<br>U.S. Government           |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |  |  |
|---|--|--|
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| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946 |
| <b>4</b> Date<br>08/02/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Engen, Erick<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78403 | <b>7</b> Amount of Contribution (\$)<br><br>\$5.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Disaster Assistance Department of Homeland Security |  | <b>9</b> Employer (See Instructions)<br>U.S. Government  |
| Date<br>09/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Engen, Erick<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78403                   | Amount of Contribution (\$)<br><br>\$5.00                |
| Principal occupation / Job title (See Instructions)<br>Disaster Assistance Department of Homeland Security          |  | Employer (See Instructions)<br>U.S. Government           |
| Date<br>07/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Estrada, Laura<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78412                 | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>Teacher  |  | Employer (See Instructions)<br>Corpus Christi ISD        |
| Date<br>08/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Estrada, Laura<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78412                 | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>Teacher  |  | Employer (See Instructions)<br>Corpus Christi ISD        |
| Date<br>09/07/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Estrada, Laura<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78412                 | Amount of Contribution (\$)<br><br>\$30.00               |
| Principal occupation / Job title (See Instructions)<br>Teacher  |  | Employer (See Instructions)<br>Corpus Christi ISD        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 7/24 Rpt: 10/58  |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/25/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Estrada, Laura<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78412 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Teacher   |  | <b>9</b> Employer (See Instructions)<br>Corpus Christi ISD |
| Date<br>07/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Galus, Christine<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                  | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>None                        |
| Date<br>08/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Galus, Christine<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                  | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>None                        |
| Date<br>09/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Galus, Christine<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                  | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>None                        |
| Date<br>09/24/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Garcia, Gloria<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                    | Amount of Contribution (\$)<br><br>\$45.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>Not Employed                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 8/24 Rpt: 11/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>08/20/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gonzales, Graciela<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404 | <b>7</b> Amount of Contribution (\$)<br><br>\$15.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed      |
| Date<br>07/01/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Graham, Coretta<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78466                      | Amount of Contribution (\$)<br><br>\$30.00                |
| Principal occupation / Job title (See Instructions)<br>lawyer                |   | Employer (See Instructions)<br>Self                       |
| Date<br>07/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Guerrero Saenz, Stephanie<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78415            | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>Teacher               |   | Employer (See Instructions)<br>Corpus Christi iSD         |
| Date<br>08/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Guerrero Saenz, Stephanie<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78415            | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>Teacher               |   | Employer (See Instructions)<br>Corpus Christi iSD         |
| Date<br>09/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Guerrero Saenz, Stephanie<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78415            | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>Teacher               |   | Employer (See Instructions)<br>Corpus Christi iSD         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 9/24 Rpt: 12/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>07/23/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ha, Henry<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75219        | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Lead analytics consultant |   | <b>9</b> Employer (See Instructions)<br>Wells Fargo       |
| Date<br>08/07/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ha, Henry<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75219                          | Amount of Contribution (\$)<br><br>\$10.00                |
| Principal occupation / Job title (See Instructions)<br>Lead analytics consultant          |   | Employer (See Instructions)<br>Wells Fargo                |
| Date<br>08/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hammerick, Noreen<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414          | Amount of Contribution (\$)<br><br>\$15.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed                       |   | Employer (See Instructions)<br>Not Employed               |
| Date<br>07/24/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Henderson, Terry<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411           | Amount of Contribution (\$)<br><br>\$500.00               |
| Principal occupation / Job title (See Instructions)<br>Not employed                       |   | Employer (See Instructions)<br>None                       |
| Date<br>09/23/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herman and Herman Law Firm<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404 | Amount of Contribution (\$)<br><br>\$15,000.00            |
| Principal occupation / Job title (See Instructions)                                       |   | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 10/24 Rpt: 13/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>07/15/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hernandez, Lisa<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78407 | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Teacher   |  | <b>9</b> Employer (See Instructions)<br>Retired            |
| Date<br>08/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hernandez, Lisa<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78407                   | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Teacher            |  | Employer (See Instructions)<br>Retired                     |
| Date<br>09/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hernandez, Lisa<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78407                   | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Teacher            |  | Employer (See Instructions)<br>Retired                     |
| Date<br>09/23/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hernandez, Robert<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                 | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>09/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hewitt, Terry<br><hr/> Contributor address; City; State; Zip Code<br><br>Windsor, CT 06095                            | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Self Employed      |  | Employer (See Instructions)<br>Priority Fuel Inc.          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 11/24 Rpt: 14/58         |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946           |
| <b>4</b> Date<br>09/18/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Higgins, Norman<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78415  | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00                |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not employed |   | <b>9</b> Employer (See Instructions)<br>None                       |
| Date<br>07/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Huerta, Carlos<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78412                     | Amount of Contribution (\$)<br><br>\$12.00                         |
| Principal occupation / Job title (See Instructions)<br>Educator              |   | Employer (See Instructions)<br>Texas A&M University Corpus Christi |
| Date<br>08/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Huerta, Carlos<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78412                     | Amount of Contribution (\$)<br><br>\$12.00                         |
| Principal occupation / Job title (See Instructions)<br>Educator              |   | Employer (See Instructions)<br>Texas A&M University Corpus Christi |
| Date<br>09/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Huerta, Carlos<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78412                     | Amount of Contribution (\$)<br><br>\$12.00                         |
| Principal occupation / Job title (See Instructions)<br>Educator              |   | Employer (See Instructions)<br>Texas A&M University Corpus Christi |
| Date<br>09/15/2024   | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00027342)<br>IBEW PAC Voluntary Fund<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20021 | Amount of Contribution (\$)<br><br>\$2,500.00                      |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 12/24 Rpt: 15/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>08/08/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>John Marez Campaign<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)              |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>08/27/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>John T. Flood LLP<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401                     | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)                       |  | Employer (See Instructions)                                |
| Date<br>09/20/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jonson, Kenja<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                         | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>Therapist          |  | Employer (See Instructions)<br>Corpus Christi ISD          |
| Date<br>09/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Karner, Chris<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                         | Amount of Contribution (\$)<br><br>\$15.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>07/31/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Klein, Teresa (Dr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Professor          |  | Employer (See Instructions)<br>Del Mar College             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 13/24 Rpt: 16/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>08/31/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Klein, Teresa (Dr.)<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>\$50.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Professor |  | <b>9</b> Employer (See Instructions)<br>Del Mar College    |
| Date<br>07/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Koivula, Carolyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                      | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>None                        |
| Date<br>08/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Koivula, Carolyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                      | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>None                        |
| Date<br>09/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Koivula, Carolyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                      | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>None                        |
| Date<br>07/11/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>LaMantia, Morgan (Sen.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Brownsville, TX 78520                  | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Attorney           |  | Employer (See Instructions)<br>L&F Distributors            |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 14/24 Rpt: 17/58                  |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946                    |
| <b>4</b> Date<br>07/17/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Larkin, Patrick (Mr.)<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404 | <b>7</b> Amount of Contribution (\$)<br><br>\$150.00                        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Professor |  | <b>9</b> Employer (See Instructions)<br>Texas A&M University-Corpus Christi |
| Date<br>08/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Larkin, Patrick (Mr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                   | Amount of Contribution (\$)<br><br>\$150.00                                 |
| Principal occupation / Job title (See Instructions)<br>Professor          |  | Employer (See Instructions)<br>Texas A&M University-Corpus Christi          |
| Date<br>09/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Larkin, Patrick (Mr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                   | Amount of Contribution (\$)<br><br>\$150.00                                 |
| Principal occupation / Job title (See Instructions)<br>Professor          |  | Employer (See Instructions)<br>Texas A&M University-Corpus Christi          |
| Date<br>09/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Laster, Delia<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414                           | Amount of Contribution (\$)<br><br>\$30.00                                  |
| Principal occupation / Job title (See Instructions)<br>Medical Aid        |  | Employer (See Instructions)<br>Corpus Chrust (Christi)                      |
| Date<br>07/24/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Offices of David T. Bright<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401          | Amount of Contribution (\$)<br><br>\$5,000.00                               |
| Principal occupation / Job title (See Instructions)                       |  | Employer (See Instructions)   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 15/24 Rpt: 18/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/12/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Madrid, Miriam<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414 | <b>7</b> Amount of Contribution (\$)<br><br>\$15.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>PT        |   | <b>9</b> Employer (See Instructions)<br>Self               |
| Date<br>09/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Maroney, Marisela<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                | Amount of Contribution (\$)<br><br>\$15.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |   | Employer (See Instructions)<br>Not Employed                |
| Date<br>07/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McAuliffe, Cathleen (Dr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Rockport, TX 78382              | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Professor          |   | Employer (See Instructions)<br>Not Employed                |
| Date<br>08/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McAuliffe, Cathleen (Dr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Rockport, TX 78382              | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Professor          |   | Employer (See Instructions)<br>Not Employed                |
| Date<br>09/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McAuliffe, Cathleen (Dr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Rockport, TX 78382              | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Professor          |   | Employer (See Instructions)<br>Not Employed                |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 16/24 Rpt: 19/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/17/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McDonald, Oneisha<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413 | <b>7</b> Amount of Contribution (\$)<br><br>\$15.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Rep       |  | <b>9</b> Employer (See Instructions)<br>AT&T               |
| Date<br>08/29/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mehle, Donna<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                        | Amount of Contribution (\$)<br><br>\$15.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>07/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mitchell, Hannah<br>Contributor address; City; State; Zip Code<br><br>Corpus Chrisit, TX 78412                    | Amount of Contribution (\$)<br><br>\$5.00                  |
| Principal occupation / Job title (See Instructions)<br>Grants Specialist  |  | Employer (See Instructions)<br>TAMUCC                      |
| Date<br>08/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mitchell, Hannah<br>Contributor address; City; State; Zip Code<br><br>Corpus Chrisit, TX 78412                    | Amount of Contribution (\$)<br><br>\$5.00                  |
| Principal occupation / Job title (See Instructions)<br>Grants Specialist  |  | Employer (See Instructions)<br>TAMUCC                      |
| Date<br>09/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mitchell, Hannah<br>Contributor address; City; State; Zip Code<br><br>Corpus Chrisit, TX 78412                    | Amount of Contribution (\$)<br><br>\$5.00                  |
| Principal occupation / Job title (See Instructions)<br>Grants Specialist  |  | Employer (See Instructions)<br>TAMUCC                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 17/24 Rpt: 20/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/08/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Molina, Jesse<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78410 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>LCDC      |  | <b>9</b> Employer (See Instructions)<br>STARS              |
| Date<br>08/24/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mosiman, Allen<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78412                  | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Clergy             |  | Employer (See Instructions)<br>Parkway Presbyterian        |
| Date<br>07/01/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nora Longoria Campaign<br><hr/> Contributor address; City; State; Zip Code<br><br>McAllen, TX 78504                 | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)                       |  | Employer (See Instructions)                                |
| Date<br>08/21/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Rear, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78415                    | Amount of Contribution (\$)<br><br>\$7.00                  |
| Principal occupation / Job title (See Instructions)<br>None               |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>09/18/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Paloukos, Lisa<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414                  | Amount of Contribution (\$)<br><br>\$40.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>Not Employed                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 18/24 Rpt: 21/58    |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946      |
| <b>4</b> Date<br>08/10/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ramirez, Nancy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78412 | <b>7</b> Amount of Contribution (\$)<br><br>\$7.00            |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed          |
| Date<br>09/15/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rene C. Flores Campaign Fund<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401     | Amount of Contribution (\$)<br><br>\$200.00                   |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                                   |
| Date<br>09/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Robledo, Victoria<br><hr/> Contributor address; City; State; Zip Code<br><br>Clovis, NM 88101                        | Amount of Contribution (\$)<br><br>\$30.00                    |
| Principal occupation / Job title (See Instructions)<br>Organizer             |   | Employer (See Instructions)<br>Democratic Party of New Mexico |
| Date<br>09/18/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rodgers, Jeremy<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                  | Amount of Contribution (\$)<br><br>\$20.00                    |
| Principal occupation / Job title (See Instructions)<br>Cashier               |   | Employer (See Instructions)<br>Cracker Barrel                 |
| Date<br>08/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rommwatt, Maya<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78412                   | Amount of Contribution (\$)<br><br>\$20.00                    |
| Principal occupation / Job title (See Instructions)<br>Campaign Director     |   | Employer (See Instructions)<br>Defend Our Health              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                  |   | <b>1</b> Total pages Schedule A1:<br>Sch: 19/24 Rpt: 22/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)         |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/24/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rommwatt, Maya<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78412 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Campaign Director |   | <b>9</b> Employer (See Instructions)<br>Defend Our Health  |
| Date<br>08/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rose, Amanda<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                     | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Program Coordinator        |   | Employer (See Instructions)<br>Texas A&M Corpus Christi    |
| Date<br>07/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rose, Amanda (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404              | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Program Coordinator        |   | Employer (See Instructions)<br>Texas A&M Corpus Christi    |
| Date<br>09/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rose, Amanda (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404              | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Program Coordinator        |   | Employer (See Instructions)<br>Texas A&M Corpus Christi    |
| Date<br>09/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sanchez, Melinda<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                 | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed               |   | Employer (See Instructions)<br>Not Employed                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 20/24 Rpt: 23/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/25/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Santos M.D., Juan<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78418      | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Physician |   | <b>9</b> Employer (See Instructions)<br>Self               |
| Date<br>08/23/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sherwood, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78412                           | Amount of Contribution (\$)<br><br>\$15.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |   | Employer (See Instructions)<br>Retired                     |
| Date<br>09/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sico White Hoelscher Harris & Braugh LLP<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401 | Amount of Contribution (\$)<br><br>\$5,000.00              |
| Principal occupation / Job title (See Instructions)                       |   | Employer (See Instructions)                                |
| Date<br>08/31/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Snapka, Katherine<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78403                        | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Attorney           |   | Employer (See Instructions)<br>Self                        |
| Date<br>07/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Spann, Dorothy<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                           | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired            |   | Employer (See Instructions)<br>None                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 21/24 Rpt: 24/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>08/12/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Spann, Dorothy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired   |   | <b>9</b> Employer (See Instructions)<br>None               |
| Date<br>09/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Spann, Dorothy<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired            |   | Employer (See Instructions)<br>None                        |
| Date<br>07/14/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Stockman, Christen<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413               | Amount of Contribution (\$)<br><br>\$3.00                  |
| Principal occupation / Job title (See Instructions)<br>Domestic Engineer  |   | Employer (See Instructions)<br>Self                        |
| Date<br>08/14/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Stockman, Christen<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413               | Amount of Contribution (\$)<br><br>\$3.00                  |
| Principal occupation / Job title (See Instructions)<br>Domestic Engineer  |   | Employer (See Instructions)<br>Self                        |
| Date<br>09/14/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Stockman, Christen<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413               | Amount of Contribution (\$)<br><br>\$3.00                  |
| Principal occupation / Job title (See Instructions)<br>Domestic Engineer  |   | Employer (See Instructions)<br>Self                        |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 22/24 Rpt: 25/58                |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946                  |
| <b>4</b> Date<br>07/14/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Tansill, Roy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78418 | <b>7</b> Amount of Contribution (\$)<br><br>\$15.00                       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed                      |
| Date<br>09/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Telge, Judy<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                    | Amount of Contribution (\$)<br><br>\$50.00                                |
| Principal occupation / Job title (See Instructions)<br>Director              |   | Employer (See Instructions)<br>Coastal Bend Center for Independent Living |
| Date<br>09/26/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Timperlake, Roger<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413              | Amount of Contribution (\$)<br><br>\$200.00                               |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                               |
| Date<br>09/24/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Trevino, Derek<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78411                 | Amount of Contribution (\$)<br><br>\$20.00                                |
| Principal occupation / Job title (See Instructions)<br>Sonography            |   | Employer (See Instructions)<br>Christus Spohn                             |
| Date<br>09/24/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Trigo, Betty<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413                   | Amount of Contribution (\$)<br><br>\$75.00                                |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 23/24 Rpt: 26/58 |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/17/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Tuley, Sarah<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78413 | <b>7</b> Amount of Contribution (\$)<br><br>\$15.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed       |
| Date<br>09/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webb Cason Law Firm PC<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401         | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                                |
| Date<br>07/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webb, Ann<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414                      | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Not employed          |   | Employer (See Instructions)<br>Not employed                |
| Date<br>08/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webb, Ann<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414                      | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Not employed          |   | Employer (See Instructions)<br>Not employed                |
| Date<br>09/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webb, Ann<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414                      | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Not employed          |   | Employer (See Instructions)<br>Not employed                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 24/24 Rpt: 27/58    |
| <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC) |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946      |
| <b>4</b> Date<br>09/13/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webb Jr., Charles<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78401 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,500.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>attorney  |  | <b>9</b> Employer (See Instructions)<br>Webb, Cason & Manning |
| Date<br>07/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Westergen, Kathy<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78416                    | Amount of Contribution (\$)<br><br>\$5.00                     |
| Principal occupation / Job title (See Instructions)<br>Academic Advisor   |  | Employer (See Instructions)<br>Del Mar College                |
| Date<br>08/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Westergen, Kathy<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78416                    | Amount of Contribution (\$)<br><br>\$5.00                     |
| Principal occupation / Job title (See Instructions)<br>Academic Advisor   |  | Employer (See Instructions)<br>Del Mar College                |
| Date<br>09/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Westergren, Mike (Mr.)<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404              | Amount of Contribution (\$)<br><br>\$5.00                     |
| Principal occupation / Job title (See Instructions)<br>attorney           |  | Employer (See Instructions)<br>self                           |
| Date<br>09/07/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Zamora, Porfirio<br>Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414                    | Amount of Contribution (\$)<br><br>\$15.00                    |
| Principal occupation / Job title (See Instructions)<br>Teacher            |  | Employer (See Instructions)<br>Corpus Christi ISD             |

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 28/58

2 FILER NAME  
Nueces County Democratic Executive Committee (CEC)

3 Filer ID (Ethics Commission Filers)  
00015946

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:  
Sch: 1/1 Rpt: 29/58

2 FILER NAME  
Nueces County Democratic Executive Committee (CEC)

3 Filer ID (Ethics Commission Filers)  
00015946

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID#: \_\_\_\_\_)

9 Loan Amount (\$)

6 Is lender a  
financial  
institution?

8 Lender address; City; State; Zip Code

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ None

15 Check if personal funds were deposited into political account  
(See Instructions)

☐

16 GUARANTOR  
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☐ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

# 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.

|   |  |  |
|---|--|--|
| 1 Total pages Schedule F1:<br>Sch: 1/29 Rpt: 30/58    | 2 FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | 3 Filer ID (Ethics Commission Filers)<br>00015946  |
| 4 Date<br>07/26/2024                                  | 5 Payee name<br>AT&T   |  |
| 6 Amount (\$)<br>\$63.66                              | 7 Payee address; City; State; Zip Code<br>PO BOX 5001<br><br>Carol Stream , IL 60197               |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental 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>phone |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought<br>Office held   |
| Date<br>08/27/2024                                    | Payee name<br>AT&T   |  |
| Amount (\$)<br>\$63.66                                | Payee address; City; State; Zip Code<br>PO BOX 5001<br><br>Carol Stream , IL 60197                 |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental 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>Phone |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought<br>Office held   |
| Date<br>09/26/2024                                    | Payee name<br>AT&T   |  |
| Amount (\$)<br>\$63.66                                | Payee address; City; State; Zip Code<br>PO BOX 5001<br><br>Carol Stream , IL 60197                 |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental 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>phone |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought<br>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: 2/29 Rpt: 31/58           | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>08/27/2024   | <b>5</b> Payee name<br>Ard, Karen   |   |
| <b>6</b> Amount (\$)<br>\$38.39                                     | <b>7</b> Payee address; City; State; Zip Code<br>6109 Jessica Drive<br><br>Corpus Christi, TX 78414       |   |
| <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<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>Office Supplies |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>07/26/2024  | Payee name<br>Beltran, Jo Ann   |   |
| Amount (\$)<br>\$40.00  | Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416                |   |
| PURPOSE OF EXPENDITURE  | <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>Food Prep       |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/24/2024  | Payee name<br>Beltran, Jo Ann   |   |
| Amount (\$)<br>\$51.46  | Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416                |   |
| 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<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>Office Supplies |
| 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: 3/29 Rpt: 32/58           | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>08/24/2024   | <b>5</b> Payee name<br>Beltran, Jo Ann   |   |
| <b>6</b> Amount (\$)<br>\$83.34                                     | <b>7</b> Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416      |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/24/2024  | Payee name<br>Beltran, Jo Ann  |   |
| Amount (\$)<br>\$485.63   | Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416               |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (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>Canvassing           |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/25/2024  | Payee name<br>Beltran, Jo Ann  |   |
| Amount (\$)<br>\$50.00  | Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416               |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (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>Book Keeping Payroll |
| 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: 4/29 Rpt: 33/58           | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>09/07/2024   | <b>5</b> Payee name<br>Beltran, Jo Ann   |   |
| <b>6</b> Amount (\$)<br>\$83.33                                     | <b>7</b> Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416      |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing      |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>09/07/2024  | Payee name<br>Beltran, Jo Ann  |   |
| Amount (\$)<br>\$560.00   | Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416               |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>09/18/2024  | Payee name<br>Beltran, Jo Ann  |   |
| Amount (\$)<br>\$135.00   | Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416               |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>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>Political Signs |
| 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: 5/29 Rpt: 34/58           | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>09/21/2024   | <b>5</b> Payee name<br>Beltran, Jo Ann   |   |
| <b>6</b> Amount (\$)<br>\$83.33                                     | <b>7</b> Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416      |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing      |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>09/21/2024  | Payee name<br>Beltran, Jo Ann  |   |
| Amount (\$)<br>\$481.25   | Payee address; City; State; Zip Code<br>4613 Bluebell Lane<br><br>Corpus Christi, TX 78416               |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>07/05/2024  | Payee name<br>Civitech   |   |
| Amount (\$)<br>\$53.04  | Payee address; City; State; Zip Code<br>21750 Hardy Oak Suite 104<br><br>San Antonio, TX 78258           |   |
| 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>Event Reminders |
| 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: 6/29 Rpt: 35/58           | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                               | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>08/14/2024   | <b>5</b> Payee name<br>Civitech   |   |
| <b>6</b> Amount (\$)<br>\$127.97                                    | <b>7</b> Payee address; City; State; Zip Code<br>21750 Hardy Oak Suite 104<br><br>San Antonio, TX 78258 |   |
| <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>Event Reminders |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>07/24/2024  | Payee name<br>Constant Contact  |   |
| Amount (\$)<br>\$81.02  | Payee address; City; State; Zip Code<br>Reservoir Place<br>1601 Trapelo Road<br>Waltham, MA 02451       |   |
| 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>Email           |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/26/2024  | Payee name<br>Constant Contact  |   |
| Amount (\$)<br>\$81.02  | Payee address; City; State; Zip Code<br>Reservoir Place<br>1601 Trapelo Road<br>Waltham, MA 02451       |   |
| 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>Email           |
| 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: 7/29 Rpt: 36/58           | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>09/24/2024   | <b>5</b> Payee name<br>Constant Contact   |   |
| <b>6</b> Amount (\$)<br>\$87.41                                     | <b>7</b> Payee address; City; State; Zip Code<br>Reservoir Place<br>1601 Trapelo Road<br>Waltham, MA 02451  |   |
| <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>Email       |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>07/29/2024  | Payee name<br>Cricket Wireless -7352  |   |
| Amount (\$)<br>\$292.73   | Payee address; City; State; Zip Code<br>4222 Ayers st<br><br>Corpus Christi, TX 78415-5317                  |   |
| 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>phone lines |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/28/2024  | Payee name<br>Cricket Wireless -7352  |   |
| Amount (\$)<br>\$130.00   | Payee address; City; State; Zip Code<br>4222 Ayers st<br><br>Corpus Christi, TX 78415-5317                  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>GOTV                             | <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>Phones      |
| 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: 8/29 Rpt: 37/58           | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>08/31/2024   | <b>5</b> Payee name<br>Curtis Miles  |  |
| <b>6</b> Amount (\$)<br>\$85.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1110 Lum Ave<br><br>Corpus Christi, TX 78412            |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Medical Attention             | <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>Dog Bite           |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/10/2024  | Payee name<br>Explosive Advertising  |  |
| Amount (\$)<br>\$350.00   | Payee address; City; State; Zip Code<br>5350 S. Staples St.<br><br>Corpus Christi, TX 78411              |  |
| PURPOSE OF EXPENDITURE  | <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>TV for watch party |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/24/2024  | Payee name<br>Garcia, Rolando  |  |
| Amount (\$)<br>\$503.13   | Payee address; City; State; Zip Code<br>2240 NPID Apt. 12308<br><br>Corpus Christi, TX 78408             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing         |
| 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: 9/29 Rpt: 38/58           | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>08/24/2024   | <b>5</b> Payee name<br>Garza, Robert   |  |
| <b>6</b> Amount (\$)<br>\$83.13                                     | <b>7</b> Payee address; City; State; Zip Code<br>537 Scott Dr.<br><br>Corpus Christi, TX 78408           |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/21/2024  | Payee name<br>Garza, Robert  |  |
| Amount (\$)<br>\$292.95   | Payee address; City; State; Zip Code<br>537 Scott Dr.<br><br>Corpus Christi, TX 78408                    |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/21/2024  | Payee name<br>Garza, Sally   |  |
| Amount (\$)<br>\$144.00   | Payee address; City; State; Zip Code<br>629 Vera Cruz<br><br>Corpus Christi, TX 78405                    |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| 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: 10/29 Rpt: 39/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>08/24/2024   | <b>5</b> Payee name<br>Garza, Steve   |  |
| <b>6</b> Amount (\$)<br>\$586.25                                    | <b>7</b> Payee address; City; State; Zip Code<br>2606 montgomery st<br><br>corpus christi, TX 78405                           |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                      | <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>Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |  |
| Date<br>09/07/2024  | Candidate/Officeholder name<br>Office sought<br>Office held   |  |
| Amount (\$)<br>\$980.00   | Payee name<br>Garza, Steve<br><br>Payee address; City; State; Zip Code<br>2606 Montgomery St.<br><br>Corpus Christi, TX 78405 |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                      | <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>Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |  |
| Date<br>09/07/2024  | Candidate/Officeholder name<br>Office sought<br>Office held   |  |
| Amount (\$)<br>\$113.75   | Payee name<br>Garza, Steve<br><br>Payee address; City; State; Zip Code<br>2606 Montgomery St.<br><br>Corpus Christi, TX 78405 |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                      | <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>Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |  |

# 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: 11/29 Rpt: 40/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/21/2024   | <b>5</b> Payee name<br>Garza, Steve  |  |
| <b>6</b> Amount (\$)<br>\$958.13                                    | <b>7</b> Payee address; City; State; Zip Code<br>2606 Montgomery St.<br><br>Corpus Christi, TX 78405     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>08/24/2024  | Payee name<br>Guerrero Saenz, Diego  |  |
| Amount (\$)<br>\$695.63   | Payee address; City; State; Zip Code<br>6022 Sweet Gum<br><br>Corpus Christi, TX 78415                   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/07/2024  | Payee name<br>Guerrero Saenz, Diego  |  |
| Amount (\$)<br>\$1,548.75   | Payee address; City; State; Zip Code<br>6022 Sweet Gum<br><br>Corpus Christi, TX 78415                   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| 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: 12/29 Rpt: 41/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/21/2024   | <b>5</b> Payee name<br>Guerrero Saenz, Diego   |  |
| <b>6</b> Amount (\$)<br>\$1,528.10                                  | <b>7</b> Payee address; City; State; Zip Code<br>6022 Sweet Gum<br><br>Corpus Christi, TX 78415          |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>07/12/2024  | Payee name<br>Gulf Coast Mailing & Printing  |  |
| Amount (\$)<br>\$560.74   | Payee address; City; State; Zip Code<br>PO BOX 9312<br><br>Corpus Christi, TX 78469                      |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing 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>Walk Piece |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>08/09/2024  | Payee name<br>Gulf Coast Mailing & Printing  |  |
| Amount (\$)<br>\$10,283.75  | Payee address; City; State; Zip Code<br>PO BOX 9312<br><br>Corpus Christi, TX 78469                      |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing 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>Walk Piece |
| 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: 13/29 Rpt: 42/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/16/2024   | <b>5</b> Payee name<br>HEB #139  |  |
| <b>6</b> Amount (\$)<br>\$150.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>5801 Weber Rd.<br><br>Corpus Christi, TX 78415          |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials 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>Gift Cards |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/11/2024  | Payee name<br>Henry, Cory  |  |
| Amount (\$)<br>\$151.55   | Payee address; City; State; Zip Code<br>5525 S. Alameda Apt. 221<br><br>Corpus Christi, TX 78412         |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/21/2024  | Payee name<br>Henry, Cory  |  |
| Amount (\$)<br>\$170.63   | Payee address; City; State; Zip Code<br>5525 S. Alameda Apt. 221<br><br>Corpus Christi, TX 78412         |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| 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: 14/29 Rpt: 43/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>08/02/2024   | <b>5</b> Payee name<br>Herrejon's Bakery  |   |
| <b>6</b> Amount (\$)<br>\$49.92                                     | <b>7</b> Payee address; City; State; Zip Code<br>3829 Crosstown Expy<br><br>Corpus Christi, TX 78415      |   |
| <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>Event     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/12/2024  | Payee name<br>Herrejon's Bakery   |   |
| Amount (\$)<br>\$62.39  | Payee address; City; State; Zip Code<br>3829 Crosstown Expy<br><br>Corpus Christi, TX 78415               |   |
| 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>Reception |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>07/03/2024  | Payee name<br>Home Depot #6584  |   |
| Amount (\$)<br>\$24.90  | Payee address; City; State; Zip Code<br>5041 S. Padre Island Dr<br><br>Corpus Christi, TX 78411           |   |
| 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<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>Water     |
| 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: 15/29 Rpt: 44/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>08/09/2024   | <b>5</b> Payee name<br>Jason's Deli  |   |
| <b>6</b> Amount (\$)<br>\$269.41                                    | <b>7</b> Payee address; City; State; Zip Code<br>5325 Saratoga Blvd. Suite 200<br><br>Corpus Christi, TX 78413 |   |
| <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>Donor Meeting |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>09/21/2024  | Payee name<br>Martinez, Danny  |   |
| Amount (\$)<br>\$130.00   | Payee address; City; State; Zip Code<br>4918 Concord<br><br>Corpus Christi, TX 78415                           |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor       | <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>Security      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/24/2024  | Payee name<br>Martinez, Jesse  |   |
| Amount (\$)<br>\$835.63   | Payee address; City; State; Zip Code<br>702 S. Clarkwood Rd. Trlr 248<br><br>Corpus Christi, TX 78406          |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor       | <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>Canvassing    |
| 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: 16/29 Rpt: 45/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/07/2024   | <b>5</b> Payee name<br>Martinez, Jesse   |  |
| <b>6</b> Amount (\$)<br>\$813.75                                    | <b>7</b> Payee address; City; State; Zip Code<br>702 S. Clarkwood Rd. Trlr 248<br><br>Corpus Christi, TX 78406 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor       | <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>Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/23/2024  | Payee name<br>Martinez, Jesse  |  |
| Amount (\$)<br>\$857.80   | Payee address; City; State; Zip Code<br>702 S. Clarkwood Rd. Trlr 248<br><br>Corpus Christi, TX 78406          |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor              | (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>Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>08/24/2024  | Payee name<br>Miles, Curtis  |  |
| Amount (\$)<br>\$30.63  | Payee address; City; State; Zip Code<br>1110 Lum Ave<br><br>Corpus Christi, TX 78412                           |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor              | (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>Canvassing        |
| 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: 17/29 Rpt: 46/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>09/07/2024   | <b>5</b> Payee name<br>Miles, Curtis  |   |
| <b>6</b> Amount (\$)<br>\$603.75                                    | <b>7</b> Payee address; City; State; Zip Code<br>1110 Lum Ave<br><br>Corpus Christi, TX 78412             |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <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>Canvassing      |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/29/2024  | Payee name<br>Office Depot  |   |
| Amount (\$)<br>\$16.21  | Payee address; City; State; Zip Code<br>1737 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>Office Overhead/Rental 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>Office Supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/03/2024  | Payee name<br>Office Depot  |   |
| Amount (\$)<br>\$155.82   | Payee address; City; State; Zip Code<br>1737 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>Office Overhead/Rental 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>Office Supplies |
| 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: 18/29 Rpt: 47/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>09/03/2024   | <b>5</b> Payee name<br>Office Depot   |   |
| <b>6</b> Amount (\$)<br>\$110.56                                    | <b>7</b> Payee address; City; State; Zip Code<br>1737 S Staples St<br><br>Corpus Christi, TX 78404        |   |
| <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<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>Office Supplies |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/09/2024  | Payee name<br>Office Depot  |   |
| Amount (\$)<br>\$197.90   | Payee address; City; State; Zip Code<br>1737 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>Office Overhead/Rental 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>Office Supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/21/2024  | Payee name<br>Olvera, Michael   |   |
| Amount (\$)<br>\$130.00   | Payee address; City; State; Zip Code<br>405 Eugina<br><br>Orange Grove, TX 78382                          |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <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>Security        |
| 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: 19/29 Rpt: 48/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>07/02/2024   | <b>5</b> Payee name<br>Papa Johns #4855  |  |
| <b>6</b> Amount (\$)<br>\$73.52                                     | <b>7</b> Payee address; City; State; Zip Code<br>4037 Saratoga Blvd.<br><br>Corpus Christi, TX 78413     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <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>Food       |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>08/24/2024  | Payee name<br>Parga Guerrero, Samuel   |  |
| Amount (\$)<br>\$367.50   | Payee address; City; State; Zip Code<br>6022 Sweet Gum<br><br>Corpus Christi, TX 78415                   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/07/2024  | Payee name<br>Parga Guerrero, Samuel   |  |
| Amount (\$)<br>\$589.05   | Payee address; City; State; Zip Code<br>6022 Sweet Gum<br><br>Corpus Christi, TX 78415                   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <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>Canvassing |
| 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: 20/29 Rpt: 49/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/21/2024   | <b>5</b> Payee name<br>Parga Guerrero, Samuel   |  |
| <b>6</b> Amount (\$)<br>\$315.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>6022 Sweet Gum<br><br>Corpus Christi, TX 78415           |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <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>Canvassing   |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/29/2024  | Payee name<br>Pest Control Services Inc.  |  |
| Amount (\$)<br>\$81.19  | Payee address; City; State; Zip Code<br>5011 Ambassador Rd.<br><br>Corpus Christi, TX 78416               |  |
| 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<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>Pest Control |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/01/2024  | Payee name<br>Pizza Hut   |  |
| Amount (\$)<br>\$38.41  | Payee address; City; State; Zip Code<br>4001 Saratoga Blvd. Suite 103<br><br>Corpus Christi, TX 78413     |  |
| 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>Pizza        |
| 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: 21/29 Rpt: 50/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>07/30/2024   | <b>5</b> Payee name<br>Pizza Patron   |  |
| <b>6</b> Amount (\$)<br>\$32.47                                     | <b>7</b> Payee address; City; State; Zip Code<br>4918 Ayers St. Suite 107<br><br>Corpus Christi, TX 78415 |  |
| <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>Pizza    |
| <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>Reliant Energy  |  |
| Amount (\$)<br>\$98.03  | Payee address; City; State; Zip Code<br>PO Box 650475<br><br>Dallas, TX 75265-0475                        |  |
| 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<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>Electric |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/12/2024  | Payee name<br>Reliant Energy  |  |
| Amount (\$)<br>\$136.28   | Payee address; City; State; Zip Code<br>PO Box 650475<br><br>Dallas, TX 75265-0475                        |  |
| 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<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>Electric |
| 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: 22/29 Rpt: 51/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/11/2024   | <b>5</b> Payee name<br>Reliant Energy   |  |
| <b>6</b> Amount (\$)<br>\$169.82                                    | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 650475<br><br>Dallas, TX 75265-0475               |  |
| <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<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>Electric       |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/03/2024  | Payee name<br>Sam's Club  |  |
| Amount (\$)<br>\$292.09   | Payee address; City; State; Zip Code<br>4833 South Padre Island Drive<br><br>Corpus Christi, TX 78411     |  |
| 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>July 4th Event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/04/2024  | Payee name<br>Sam's Club  |  |
| Amount (\$)<br>\$101.37   | Payee address; City; State; Zip Code<br>4833 South Padre Island Drive<br><br>Corpus Christi, TX 78411     |  |
| 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>July 4th Event |
| 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: 23/29 Rpt: 52/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>09/03/2024   | <b>5</b> Payee name<br>Sam's Club  |   |
| <b>6</b> Amount (\$)<br>\$30.61                                     | <b>7</b> Payee address; City; State; Zip Code<br>4833 South Padre Island Drive<br><br>Corpus Christi, TX 78411 |   |
| <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>Water     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>09/09/2024  | Payee name<br>Sam's Club   |   |
| Amount (\$)<br>\$110.35   | Payee address; City; State; Zip Code<br>4833 South Padre Island Drive<br><br>Corpus Christi, TX 78411          |   |
| 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>Reception |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>07/01/2024  | Payee name<br>Stellar Point  |   |
| Amount (\$)<br>\$1,100.00   | Payee address; City; State; Zip Code<br>6102 Ayers<br>Suite 106<br>Corpus Christi, TX 78415                    |   |
| 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<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>Rent      |
| 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: 24/29 Rpt: 53/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>08/26/2024   | <b>5</b> Payee name<br>Stellar Point  |  |
| <b>6</b> Amount (\$)<br>\$1,100.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>6102 Ayers<br>Suite 106<br>Corpus Christi, TX 78415      |  |
| <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<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>Rent |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/02/2024  | Payee name<br>Stellar Point   |  |
| Amount (\$)<br>\$1,100.00   | Payee address; City; State; Zip Code<br>6102 Ayers<br>Suite 106<br>Corpus Christi, TX 78415               |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental 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>Rent        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>09/03/2024  | Payee name<br>Taqueria Mi Casita  |  |
| Amount (\$)<br>\$51.09  | Payee address; City; State; Zip Code<br>2033 Airline Rd.<br><br>Corpus Christi, TX 78412                  |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage 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>Canvassing  |
| 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: 25/29 Rpt: 54/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>09/07/2024   | <b>5</b> Payee name<br>Tasby, Eric  |   |
| <b>6</b> Amount (\$)<br>\$131.25                                    | <b>7</b> Payee address; City; State; Zip Code<br>5938 Parkland Dr.<br><br>Corpus Christi, TX 78413          |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor    | <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>Canvassing        |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/21/2024  | Payee name<br>Tasby, Eric   |   |
| Amount (\$)<br>\$669.38   | Payee address; City; State; Zip Code<br>5938 Parkland Dr.<br><br>Corpus Christi, TX 78413                   |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor    | <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>5938 Parkland Dr. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/19/2024  | Payee name<br>Texas Democratic Party  |   |
| Amount (\$)<br>\$60.00  | Payee address; City; State; Zip Code<br>PO Box 116<br><br>Austin, TX 78767                                  |   |
| 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>Bumper Stickers   |
| 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: 26/29 Rpt: 55/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                              | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>08/01/2024   | <b>5</b> Payee name<br>Texas State Museum of Asian Cultures  |   |
| <b>6</b> Amount (\$)<br>\$150.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>1809 N. Chaparral St.<br><br>Corpus Christi, TX 78401 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <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>Venue           |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/19/2024  | Payee name<br>The Print Shop   |   |
| Amount (\$)<br>\$541.25   | Payee address; City; State; Zip Code<br>3906 S. Jackson Rd<br><br>Edingburg, TX 78539                  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing 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>Political Signs |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>09/03/2024  | Payee name<br>The Print Shop   |   |
| Amount (\$)<br>\$1,520.91   | Payee address; City; State; Zip Code<br>3906 S. Jackson Rd<br><br>Edingburg, TX 78539                  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing 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>Political Signs |
| 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: 27/29 Rpt: 56/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                          | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>09/19/2024   | <b>5</b> Payee name<br>The Print Shop  |   |
| <b>6</b> Amount (\$)<br>\$1,363.95                                  | <b>7</b> Payee address; City; State; Zip Code<br>3906 S. Jackson Rd<br><br>Edingburg, TX 78539     |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing 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>Political Signs |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  |   |
| Date<br>09/23/2024  | Candidate/Officeholder name<br>Office sought<br>Office held  |   |
| Payee name<br>The Print Shop  |  |   |
| Amount (\$)<br>\$270.63   | Payee address; City; State; Zip Code<br>3906 S. Jackson Rd<br><br>Edingburg, TX 78539              |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Printing 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>Political Signs        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  |   |
| Date<br>07/01/2024  | Candidate/Officeholder name<br>Office sought<br>Office held  |   |
| Payee name<br>USPS  |  |   |
| Amount (\$)<br>\$170.00   | Payee address; City; State; Zip Code<br>802 N. Tanchua St.<br><br>Corpus Christi, TX 78401         |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental 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>PO BOX                 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  |   |
|   |  |   |



# 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: 28/29 Rpt: 57/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946  |
| <b>4</b> Date<br>08/16/2024   | <b>5</b> Payee name<br>Walmart  |   |
| <b>6</b> Amount (\$)<br>\$36.13                                     | <b>7</b> Payee address; City; State; Zip Code<br>1821 S. Padre Island Dr.<br><br>Corpus Christi, TX 78416                     |   |
| <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>Water |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>08/29/2024  | Candidate/Officeholder name Office sought Office held   |   |
| Amount (\$)<br>\$16.08  | Payee name<br>Walmart<br><br>Payee address; City; State; Zip Code<br>1821 S. Padre Island Dr.<br><br>Corpus Christi, TX 78416 |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage 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>Water        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>09/16/2024  | Candidate/Officeholder name Office sought Office held   |   |
| Amount (\$)<br>\$21.44  | Payee name<br>Walmart<br><br>Payee address; City; State; Zip Code<br>1821 S. Padre Island Dr.<br><br>Corpus Christi, TX 78416 |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage 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>Water        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# 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: 29/29 Rpt: 58/58          | <b>2</b> FILER NAME<br>Nueces County Democratic Executive Committee (CEC)                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015946   |
| <b>4</b> Date<br>09/23/2024   | <b>5</b> Payee name<br>Walmart  |  |
| <b>6</b> Amount (\$)<br>\$16.08                                     | <b>7</b> Payee address; City; State; Zip Code<br>1821 S. Padre Island Dr.<br><br>Corpus Christi, TX 78416 |  |
| <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>Water      |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>09/21/2024  | Payee name<br>Wickham, Ian  |  |
| Amount (\$)<br>\$306.26   | Payee address; City; State; Zip Code<br>357 Palmetto St.<br><br>Corpus Christi, TX 78412                  |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <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>Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/03/2024  | Payee name<br>Worley Printing Co Inc  |  |
| Amount (\$)<br>\$339.33   | Payee address; City; State; Zip Code<br>3217 N IH 35<br><br>Austin , TX 78722                             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing 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>Stationary |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |