### 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) 00015946	<ul><li>2 Total pages filed:</li><li>58</li></ul>		
3	COMMITTEE NAME		•	OFFICE USE ONLY		
	Nueces County De	emocratic Executive Committee (CEC)		Date Received ELECTRONICALLY FILED		
Ļ	0010417755			10/07/2024		
4	COMMITTEE ADDRESS		TY; STATE; ZIP CODE			
	_	6102 Ayers Ste. 107		Date Hand-delivered or Date Postmarked		
	Change of Address	Corpus Christi, TX 78415		Receipt # Amount		
				Noopen // //		
				Date Processed		
				Date Imaged		
5	CAMPAIGN	MS / MRS / MR FIRST		MI		
	TREASURER NAME	Mrs. Stephanie				
		NICKNAME LAST		SUFFIX		
		Guerrero Sae	nz			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY	STATE; ZIP CODE		
ľ	TREASURER	6022 Sweet Gum		, STATE, ZIF CODE		
	STREET ADDRESS					
	(Residence or Business)	Corpus Christi, TX 78415				
7	CAMPAIGN	STREET OR PO BOX;	APT / SUITE #; CIT	Y; STATE; ZIP CODE		
	TREASURER MAILING	6022 Sweet Gum				
	ADDRESS					
	Change of Address	Corpus Christi, TX 78415				
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
	TREASURER PHONE	(361) 249-3041				
L						
9	REPORT TYPE	January 15 X 3	Oth day before election	Final Report		
			th day before election	10th day after campaign treasurer		
		July 15	unoff	termination		
10	PERIOD	Month Day Year	Month Day	Year		
[	COVERED	-	HROUGH 09/26/202			
11	ELECTION	ELECTION DATE	ELECTION TYPE			
		Month Day Year 11/05/2024	Primary Runoff	Other		
		X X	General Special			
L						
	GO TO PAGE 2					
Fo	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da51f7					

## COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

### FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer I	D (Ethics Commission Filers)
Nueces County Democ	ratic Executive Comr	nittee (CEC)	00015	5946
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Democrat		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOAN	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	\$ 5,768.00
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 58,622.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	5	\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	1	\$ 38,009.53
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY	\$ 39,855.00
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 E REPORTING PERIOD	THE \$	\$ 0.00
16 AFFIDAVIT	•		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mrs. Stephanie	Guerrer	o Saenz
		Signature of Ca		
		, i i i i i i i i i i i i i i i i i i i		
AFFIX NOTARY	STAMP / SEAL ABOV	E		
Sworn to and subscribed	before me, by the said	, tł	nis the	day
of	_, 20, to certif	fy which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title c	of officer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7

### SUBTOTALS - CEC

#### FORM CEC COVER SHEET PG 3 3 of 58

					5 01 50				
17 COM	MITTE	EE NAME	18 Filer ID	(Eth	ics Commission Filers)				
Nuec	es C								
19 SCHE	EDULI		SUBTOTAL AMOUNT						
NAME	NAME OF SCHEDULE								
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	58,622.00				
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00				
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00				
4.	Х	SCHEDULE E: LOANS		\$	0.00				
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	38,009.53				
6.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00				
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$					
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00				
9.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
10.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/24 Rpt: 4/58	
<u>_</u>			!		-	
Z	FILER NAME Nueces Cou	nty Democratic Executive Committee (CEC)		3	Filer ID (Ethics Commission 00015946	on Filers)
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/02/2024	Anderson, Clifford				\$200.00
		6 Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78401				
8	•	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	retired		retired			
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/02/2024	Avila, Corina	-			\$15.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78413				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Border Patro	J Agent	Border Patrol			
_	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/02/2024	Barrientos, Gonzalo J.				\$300.00
	-					
			1			
			1			
		Corpus Christi, TX 78411	1			
	Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney	1	Hilliard Martinez Gonzal	ez	LLP	
_	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	08/22/2024	Bass, Rhen	' !		Amount of Continuation (+)	\$115.00
	00/22/202					Ψ110.00
		Contributor address; City; State; Zip Code	1			
			1			
		Corpus Christi, TX 78414	1			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Accountant		Corpus Christi Housing	Au	thority	
_	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	08/27/2024	Bell, John (Mr.)				\$1,000.00
			1			
			1			
		Corpus Christi, TX 78418-7178				
	•	upation / Job title (See Instructions)	Employer (See Instructions			
	Attorney		Wood Boykin & Wolter F	°C		

MONETARY POLITICAL CONTRIBU	TIONS		SCHEDUI	LE A1
The Instruction Guide explains how to complete the	nis form.		Total pages Schedule A1: Sch: 2/24 Rpt: 5/58	
2 FILER NAME Nueces County Democratic Executive Committee (CEC)			Filer ID (Ethics Commission 00015946	on Filers)
4 Date       5 Full name of contributor       out-of-state PAC         08/28/2024       Bonilla and Chapa PC Operating Account         6 Contributor address; City; State; Zip Code	(ID#:)	7 /	Amount of Contribution (\$)	\$2,500.00
corpus christi, TX 78405 8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions	IS)		
		,		
Date       Full name of contributor       out-of-state PAC         09/11/2024       Brown, Giddings         Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$100.00
Corpus Christi, TX 78401				
Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions Not Employed	iS)		
Date     Full name of contributor     out-of-state PAC       09/16/2024     Burkett Law firm       Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$2,500.00
Corpus Christi, TX 78401				
Principal occupation / Job title (See Instructions)	Employer (See Instructions	ıS)		
Date     Full name of contributor     out-of-state PAC       09/09/2024     Campbell, Elizabeth       Contributor address;     City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$15.00
Corpus Christi, TX 78410 Principal occupation / Job title (See Instructions)	Employer (See Instructions	ls)		
Not Employed	Not Employed			
Date     Full name of contributor     out-of-state PAC       09/16/2024     Campos, Sylvia       Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$25.00
Corpus Christi, TX 78411				
Principal occupation / Job title (See Instructions) Council Member	Employer (See Instructions City of Corpus Christi	is)		

	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 3/24 Rpt: 6/58	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		nty Democratic Executive Committee (CEC)			00015946	,
4	Date	5 Full name of contributor out-of-state PAC (ID:	#:)	7	Amount of Contribution (\$)	
	09/07/2024	Canales, Robert				\$30.00
		6 Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78414				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	d	Retired			
F	Date	Full name of contributor out-of-state PAC (ID	#:)	Γ	Amount of Contribution (\$)	
	07/11/2024	Canales , Yolanda				\$25.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
⊨	Date	Full name of contributor out-of-state PAC (IDa		Γ	Amount of Contribution (\$)	
	08/11/2024	Canales , Yolanda	//			\$25.00
				ł		
		Corpus Christi, TX 78404				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID:	#:)	Γ	Amount of Contribution (\$)	
	09/11/2024	Canales , Yolanda				\$25.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78404				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
F	Date	Full name of contributor out-of-state PAC (ID;	#:)	Γ	Amount of Contribution (\$)	
	07/23/2024	Cavazos, Teresa				\$100.00
	Contributor address; City; State; Zip Code		1			
1		Corpus Christi, TX 78411				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
1	Not Employe	d	Not Employed			
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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/24 Rpt: 7/58 2 FILER NAME Filer ID (Ethics Commission Filers) 3 00015946 Nueces County Democratic Executive Committee (CEC) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/16/2024 Celis Law Group \$2,000.00 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78411 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/01/2024 Clower, George \$25.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78463 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired None Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 07/25/2024 \$25.00 Clower, George Contributor address; City; State; Zip Code Corpus Christi, TX 78463 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired None Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/25/2024 \$25.00 Clower, George Contributor address; City; State; Zip Code Corpus Christi, TX 78463 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired None Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/25/2024 \$25.00 Clower, George Contributor address; City; State; Zip Code Corpus Christi, TX 78463 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired None

The Instruction Guide explains how to complete th	nis form.	1 Total pages Schedule A1: Sch: 5/24 Rpt: 8/58
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)
Nueces County Democratic Executive Committee (CEC)		00015946
4 Date 5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of Contribution (\$)
09/24/2024 Corales, Edward		\$50.00
6 Contributor address; City; State; Zip Code		
Corpus Chrisit, TX 78415		
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions	5)
Lineman	Pike	
Date Full name of contributor out-of-state PAC (	(ID#:)	Amount of Contribution (\$)
09/26/2024 Cortez, Julius		\$15.00
Contributor address; City; State; Zip Code		
Corpus Christi, TX 78415		
Principal occupation / Job title (See Instructions)	Employer (See Instructions	3)
Credit Analyst	Value Bank Texas	
Date Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)
08/19/2024 Crawford, Geanine		\$15.00
Contributor address; City; State; Zip Code		
Corpus Christi TV 79412		
Corpus Christi, TX 78413	Employer (Coo Instructions	
Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions Not Employed	5)
Date Full name of contributor out-of-state PAC (	(ID#:)	Amount of Contribution (\$)
09/06/2024 Edwards Law Firm PLLC		\$1,000.00
Contributor address; City; State; Zip Code		
Corpus Christi, TX 78403		
Principal occupation / Job title (See Instructions)	Employer (See Instructions	( ()
Date Full name of contributor Out-of-state PAC (	(15)	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC ( 07/02/2024 Engen, Erick	(ID#:)	\$5.00
Contributor address; City; State; Zip Code		+
CUITITIDULUI duuress, City, State, Zip Coue		
Corpus Christi, TX 78403		
Principal occupation / Job title (See Instructions)	Employer (See Instructions	l ;)
Disaster Assistance Department of Homeland Security	U.S. Government	,

	The Instru	ction Guide explains how to co	mplete this for	m.	1	Total pages Schedule A1: Sch: 6/24 Rpt: 9/58	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Nueces Cou	nty Democratic Executive Committee	e (CEC)			00015946	
4	Date	5 Full name of contributor out-	of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/02/2024	Engen, Erick					\$5.00
			Code				
			0000				
		Corpus Christi , TX 78403					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Disaster Ass	istance Department of Homeland Se	curity	U.S. Government			
⊨	Date	Full name of contributor	of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/02/2024	Engen, Erick	01 01410 1 7 10 (12 m	/		(+)	\$5.00
		Contributor address; City; State; Zip					,
			Couc				
		Corpus Christi , TX 78403					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Disaster Ass	istance Department of Homeland Se	curity	U.S. Government			
F	Date	Full name of contributor	of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/25/2024	Estrada, Laura					\$10.00
		Contributor address; City; State; Zip	Code				
		Corpus Christi , TX 78412					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Teacher			Corpus Christi ISD			
Γ	Date	Full name of contributor	of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/25/2024	Estrada, Laura					\$10.00
		Contributor address; City; State; Zip	Code				
		Corpus Christi, TX 78412					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Teacher			Corpus Christi ISD			
	Date	Full name of contributor	of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/07/2024	Estrada, Laura					\$30.00
		Contributor address; City; State; Zip					
L		Corpus Christi, TX 78412					
1		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Teacher			Corpus Christi ISD			

	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 7/24 Rpt: 10/58	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		nty Democratic Executive Committee (CEC)			00015946	,
4	Date	5 Full name of contributor out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	
	09/25/2024	Estrada, Laura				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Corpus Christi , TX 78412				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Teacher		Corpus Christi ISD			
	Date	Full name of contributor out-of-state PAC (ID;	+:)	Γ	Amount of Contribution (\$)	
	07/02/2024	Galus, Christine				\$25.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78413				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	None			
⊨	Date	Full name of contributor out-of-state PAC (IDa	#:)	Г	Amount of Contribution (\$)	
	08/02/2024	Galus, Christine				\$25.00
				ł		
		Corpus Christi, TX 78413				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	None			
F	Date	Full name of contributor out-of-state PAC (ID;	#: )	Γ	Amount of Contribution (\$)	
	09/02/2024	Galus, Christine				\$25.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78413				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	None			
	Date	Full name of contributor out-of-state PAC (ID;	#: )	Γ	Amount of Contribution (\$)	
	09/24/2024	Garcia, Gloria				\$45.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78404				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
⊢						
I						

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/24 Rpt: 11/58	
2	FILER NAME	_		3	Filer ID (Ethics Commission	Filers)
	Nueces Cour	nty Democratic Executive Committee (CEC)			00015946	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/20/2024	Gonzales, Graciela				\$15.00
		6 Contributor address; City; State; Zip Code		$\mathbf{I}$		
		Corpus Christi, TX 78404				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not employe	d	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	07/01/2024	Graham, Coretta				\$30.00
		Contributor address; City; State; Zip Code		$\mathbf{I}$		<b>T</b>
		Corpus Christi, TX 78466				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	lawyer	• • •	Self			
⊢	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	07/02/2024	Guerrero Saenz, Stephanie	/			\$25.00
	•	Contributor address; City; State; Zip Code		$\mathbf{I}$		
		Corpus Christi, TX 78415				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher		Corpus Christi iSD			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/02/2024	Guerrero Saenz, Stephanie				\$25.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78415				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher		Corpus Christi iSD			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/02/2024	Guerrero Saenz, Stephanie				\$25.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78415				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher		Corpus Christi iSD			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 9/24 Rpt: 12/58
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Inty Democratic Executive Committee (CEC)		00015946
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
07/23/2024	Ha, Henry		\$25.00
	6 Contributor address; City; State; Zip Code		1
	Dallas, TX 75219		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	5)
Lead analytic	ics consultant	Wells Fargo	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/07/2024	Ha, Henry	ļ	\$10.00
	Contributor address; City; State; Zip Code		1
1		ļ	
1			
Dringing occu	Dallas, TX 75219		
	upation / Job title (See Instructions) ics consultant	Employer (See Instructions) Wells Fargo	3)
-			
Date 08/15/2024	Full name of contributor out-of-state PAC (ID#: Hammerick, Noreen	)	Amount of Contribution (\$) \$15.00
U0/10/2024			Ψ10.00
	Contributor address; City; State; Zip Code		
1		ļ	
	Corpus Christi, TX 78414		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	5)
Not Employe	эd	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/24/2024	Henderson, Terry	ļ	\$500.00
	Contributor address; City; State; Zip Code		•
l			
	Corpus Christi, TX 78411		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> s)
Not employe		None	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
09/23/2024	Herman and Herman Law Firm		\$15,000.00
	Contributor address; City; State; Zip Code		•
1		ļ	
	Corpus Christi, TX 78404	]	
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	\$)
		<u> </u>	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 10/24 Rpt: 13/58
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	inty Democratic Executive Committee (CEC)		00015946
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
07/15/2024	Hernandez, Lisa		\$20.00
	6 Contributor address; City; State; Zip Code		·
	Corpus Christi, TX 78407		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Teacher		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/15/2024	Hernandez, Lisa		\$20.00
	Contributor address; City; State; Zip Code		·
	Corpus Christi, TX 78407		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Teacher		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/15/2024	Hernandez, Lisa		\$20.00
	Contributor address; City; State; Zip Code		·
	Corpus Christi, TX 78407		
	pation / Job title (See Instructions)	Employer (See Instructions	s)
Teacher		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/23/2024	Hernandez, Robert		\$100.00
	Contributor address; City; State; Zip Code		1
	Corpus Christi, TX 78413		
	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	;d	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/10/2024	Hewitt, Terry		\$50.00
	Contributor address; City; State; Zip Code		1
	Windsor, CT 06095		
	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Self Employe	ed	Priority Fuel Inc.	

Th	e Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 11/24 Rpt: 14/58
2 FILI	ER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Nue	ieces Cou	inty Democratic Executive Committee (CEC)		00015946
4 Dat	te	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/	/18/2024	Higgins, Norman		\$20.00
	l	6 Contributor address; City; State; Zip Code		1
	I			
	I			
		Corpus Christi, TX 78415		l
8 Prin	ncipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Not	ot employe	:d	None	
Date	te	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/	/07/2024	Huerta, Carlos		\$12.00
	I	Contributor address; City; State; Zip Code		1
	I			
	I			
	I	Corpus Christi, TX 78412		
Prin	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Edı	lucator		Texas A&M University C	Corpus Christi
Date	te	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/	/07/2024	Huerta, Carlos		\$12.00
	I	Contributor address; City; State; Zip Code		1
	I			
	I			
		Corpus Christi, TX 78412		
		pation / Job title (See Instructions)	Employer (See Instructions	
Edu	lucator		Texas A&M University C	Corpus Christi
Dat	te	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/	/07/2024	Huerta, Carlos		\$12.00
	I	Contributor address; City; State; Zip Code		1
	I			
1	I			
		Corpus Christi, TX 78412		
Prin	ncipal occu	ipation / Job title (See Instructions)	Employer (See Instructions	
Edu	lucator		Texas A&M University C	Corpus Christi
Dat	te	Full name of contributor X out-of-state PAC (ID#:	C00027342 )	Amount of Contribution (\$)
09/	/15/2024	IBEW PAC Voluntary Fund		\$2,500.00
	I	Contributor address; City; State; Zip Code		1
	I			
	I			
		Washington, DC 20021		
Prin	ncipal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
1				

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

The Instruction Guide explains how to complete this form.       1 Total pages Schedule A1: Sch: 13/24 Rpt: 16/58         2 FILER NAME Nueces County Democratic Executive Committee (CEC)       3 Filer ID (Ethics Commission I 00015946         4 Date 08/31/2024       5 Full name of contributor out-of-state PAC (ID#:) Klein, Teresa (Dr.)       7 Amount of Contribution (\$)         6 Contributor address; City; State; Zip Code       9 Employer (See Instructions) Del Mar College       9 Employer (See Instructions) Del Mar College         Date 07/15/2024       Full name of contributor out-of-state PAC (ID#:) Koivula, Carolyn Contributor address; City; State; Zip Code       Amount of Contribution (\$)	Filers) \$50.00
Nueces County Democratic Executive Committee (CEC)       00015946         4       Date       5       Full name of contributor out-of-state PAC (ID#:) Klein, Teresa (Dr.)       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       6       Corpus Christi, TX 78411       9       Employer (See Instructions) Del Mar College         8       Principal occupation / Job title (See Instructions) Professor       9       Employer (See Instructions) Del Mar College       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:) Koivula, Carolyn       Amount of Contribution (\$)       Amount of Contribution (\$)	\$50.00
Nueces County Democratic Executive Committee (CEC)       00015946         4 Date       5 Full name of contributor       out-of-state PAC (ID#:)       7 Amount of Contribution (\$)         08/31/2024       Klein, Teresa (Dr.)       6 Contributor address; City; State; Zip Code       7         6 Corpus Christi, TX 78411       9 Employer (See Instructions)       9 Employer (See Instructions)         Professor       Del Mar College       Del Mar College         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         07/15/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)	\$50.00
08/31/2024       Klein, Teresa (Dr.)         6       Contributor address; City; State; Zip Code         Corpus Christi, TX 78411       Corpus Christi, TX 78411         8       Principal occupation / Job title (See Instructions) Professor       9       Employer (See Instructions) Del Mar College         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         07/15/2024       Koivula, Carolyn       Out-of-state PAC (ID#:)       Amount of Contribution (\$)	
6       Contributor address; City; State; Zip Code         6       Corpus Christi, TX 78411         8       Principal occupation / Job title (See Instructions) Professor       9       Employer (See Instructions) Del Mar College         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         07/15/2024       Koivula, Carolyn       Amount of Contribution (\$)	
6       Contributor address; City; State; Zip Code         Corpus Christi, TX 78411         8       Principal occupation / Job title (See Instructions)         Professor       9         Employer (See Instructions)         Date       Full name of contributor         07/15/2024       Full name of contributor    Amount of Contribution (\$)	\$10.00
8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Professor       Del Mar College         Date       Full name of contributor       out-of-state PAC (ID#:)         07/15/2024       Koivula, Carolyn	\$10.00
8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Professor       Del Mar College         Date       Full name of contributor       out-of-state PAC (ID#:)         07/15/2024       Koivula, Carolyn	\$10.00
8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Professor       Del Mar College         Date       Full name of contributor       out-of-state PAC (ID#:)         07/15/2024       Koivula, Carolyn	\$10.00
Professor     Del Mar College       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       07/15/2024     Koivula, Carolyn     Amount of Contribution (\$)	\$10.00
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       07/15/2024     Koivula, Carolyn	\$10.00
07/15/2024 Koivula, Carolyn	\$10.00
	\$10.00
Corpus Christi, TX 78411	
Principal occupation / Job title (See Instructions)     Employer (See Instructions)	
Retired None	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         08/15/2024       Koivula, Carolyn	\$10.00
	ΦΤΟ'ΟΟ
Contributor address; City; State; Zip Code	
Corpus Christi, TX 78411	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Retired None	
Date Full name of contributor out-of-state PAC (ID#: ) Amount of Contribution (\$)	
09/15/2024 Koivula, Carolyn	\$10.00
Contributor address; City; State; Zip Code	
Corpus Christi, TX 78411	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Retired None	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)	
	1,000.00
07/11/2024 LaMantia, Morgan (Sen.) \$	
07/11/2024 LaMantia, Morgan (Sen.) \$ Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code Brownsville, TX 78520	
Contributor address; City; State; Zip Code         Brownsville, TX 78520         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	
Contributor address; City; State; Zip Code Brownsville, TX 78520	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 14/24 Rpt: 17/58	
2 FILER NAME Nueces Cou	inty Democratic Executive Committee (CEC)		3 Filer ID (Ethics Commission 00015946	on Filers)
4 Date 07/17/2024	5 Full name of contributor out-of-state PAC (ID#: Larkin, Patrick (Mr.)	)	7 Amount of Contribution (\$)	\$150.00
011111202	6 Contributor address; City; State; Zip Code			Ψ100.00
	Corpus Christi, TX 78404			
8 Principal occu Professor	pation / Job title (See Instructions)	<ul> <li>9 Employer (See Instructions Texas A&amp;M University-C</li> </ul>		
Date 08/17/2024	Full name of contributor out-of-state PAC (ID#: Larkin, Patrick (Mr.) Contributor address; City; State; Zip Code Corpus Christi, TX 78404	)	Amount of Contribution (\$)	\$150.00
Principal occu Professor	upation / Job title (See Instructions)	Employer (See Instructions Texas A&M University-C		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/17/2024	Larkin, Patrick (Mr.) Contributor address; City; State; Zip Code			\$150.00
	Corpus Christi, TX 78404			
Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Texas A&M University-C		
Date 09/17/2024	Full name of contributor out-of-state PAC (ID#: Laster, Delia Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$30.00
	Corpus Christi, TX 78414			
Principal occu Medical Aid	ipation / Job title (See Instructions)	Employer (See Instructions Corpus Chrust (Christi)	;)	
Date 07/24/2024	Full name of contributor       out-of-state PAC (ID#:         Law Offices of David T. Bright         Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5,000.00
	Corpus Christi, TX 78401			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/24 Rpt: 18/58	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		nty Democratic Executive Committee (CEC)			00015946	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	09/12/2024	Madrid, Miriam				\$15.00
		6 Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78414				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	PT		Self			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	09/15/2024	Maroney, Marisela				\$15.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78413				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Not Employe	d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/17/2024	McAuliffe, Cathleen (Dr.)				\$250.00
		Contributor address; City; State; Zip Code		1		
		Rockport, TX 78382				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Professor		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	· )	Γ	Amount of Contribution (\$)	
	08/09/2024	McAuliffe, Cathleen (Dr.)				\$250.00
		Contributor address; City; State; Zip Code		1		
		Rockport, TX 78382				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Professor		Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	09/10/2024	McAuliffe, Cathleen (Dr.)				\$250.00
		Contributor address; City; State; Zip Code		1		
		Rockport, TX 78382				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Professor		Not Employed			
⊢			1			
I						

	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 16/24 Rpt: 19/58	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		nty Democratic Executive Committee (CEC)			00015946	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	09/17/2024	McDonald, Oneisha			• •	\$15.00
		6 Contributor address; City; State; Zip Code		·		
		Corpus Christi, TX 78413				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Rep		AT&T			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/29/2024	Mehle, Donna				\$15.00
		Contributor address; City; State; Zip Code		·		
		Corpus Christi, TX 78411				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	2d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	07/04/2024	Mitchell, Hannah				\$5.00
		Contributor address; City; State; Zip Code		"		
		Corpus Chrisit, TX 78412	1	<u> </u>		
		pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Grants Spec		TAMUCC			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷= 00
	08/04/2024	Mitchell, Hannah				\$5.00
		Contributor address; City; State; Zip Code				
		Corpus Chrisit, TX 78412				
$\vdash$	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>		
	Grants Spec		TAMUCC	5)		
╞				T	tt -f Ωtikution (Φ)	
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$5.00
	09/04/2024	Mitchell, Hannah				ΦΟ.ΟΟ
		Contributor address; City; State; Zip Code				
		Corpus Chrisit, TX 78412				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Grants Spec		TAMUCC	0)		
$\vdash$						

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

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/24 Rpt: 21/58	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Nueces Cou	unty Democratic Executive Committee (CEC)	1		00015946	
4	Date	5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	
	08/10/2024	Ramirez, Nancy		ľ	/ mount of 222	\$7.00
	00.22	6 Contributor address; City; State; Zip Code				÷
		CONTINUTION address, City, State, Zip Couc	1			
			1			
		Corpus Christi, TX 78412	1			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	09/15/2024	Rene C. Flores Campaign Fund	1			\$200.00
		Contributor address; City; State; Zip Code				
			!			
			!			
		Corpus Christi, TX 78401				
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
_			l	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/02/2024	Robledo, Victoria	1			\$30.00
		Contributor address; City; State; Zip Code				
			!			
			1			
L		Clovis, NM 88101		L		
		upation / Job title (See Instructions)	Employer (See Instructions			
	Organizer		Democratic Party of Nev	N N	/lexico	
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/18/2024	Rodgers, Jeremy	!			\$20.00
		Contributor address; City; State; Zip Code				
			1			
			!			
		Corpus Christi, TX 78411		L		
Γ		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Cashier		Cracker Barrell			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Ē	Amount of Contribution (\$)	
	08/27/2024	Rommwatt, Maya	!			\$20.00
		Contributor address; City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			1			
			1			
L		Corpus Christi, TX 78412				
	•	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Campaign D	virector	Defend Our Health	_		
4						

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 19/24 Rpt: 22/58
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	nty Democratic Executive Committee (CEC)		00015946
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/24/2024	Rommwatt, Maya		\$25.0
	6 Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78412		
-	pation / Job title (See Instructions)	9 Employer (See Instructions	is)
Campaign D	irector	Defend Our Health	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/25/2024	Rose, Amanda		\$10.0
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78404		
-	pation / Job title (See Instructions)	Employer (See Instructions	
Program Coo	Program Coordinator Texas A&M Corpus Ch		risti
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/25/2024	Rose, Amanda (Mrs.)	\$10.	
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78404	-	
-	pation / Job title (See Instructions)	Employer (See Instructions	,
Program Coo	ordinator	Texas A&M Corpus Chr	risti
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/25/2024	Rose, Amanda (Mrs.)		\$10.0
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78404		<u> </u>
	pation / Job title (See Instructions)	Employer (See Instructions	,
Program Coo		Texas A&M Corpus Chr	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/09/2024	Sanchez, Melinda		\$30.0
	Contributor address; City; State; Zip Code		
	Cornue Christi TV 79413		
Dringing ogg	Corpus Christi, TX 78413	Employer (See Instructions	
-	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	(S)
Not Employe	<u></u>		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 20/24 Rpt: 23/58
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	nty Democratic Executive Committee (CEC)		00015946
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
09/25/2024	Santos M.D., Juan		\$250.0
	6 Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78418		
Princinal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	
Physician		Self	)
-	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
Date 08/23/2024	Full name of contributor out-of-state PAC (ID#: Sherwood, Mary	)	Amount of Contribution (\$) \$15.0
0812312024	-		φτο.υ
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78412		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ð
Not Employe		Retired	,
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)
09/04/2024	Sico White Hoelscher Harris & Braugh LLP	)	\$5,000.0
001071202-1			\$0,000.0
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78401		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	2)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/31/2024	Snapka, Katherine		\$1,000.0
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78403		
	pation / Job title (See Instructions)	Employer (See Instructions	)
Attorney		Self	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/12/2024	Spann, Dorothy		\$25.0
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78404		
	pation / Job title (See Instructions)	Employer (See Instructions	)
Retired		None	

L						
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/24 Rpt: 24/58	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)			00015946	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/12/2024	Spann, Dorothy				\$25.00
		6 Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Retired		None			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/12/2024	Spann, Dorothy				\$25.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		None			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/14/2024	Stockman, Christen				\$3.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78413				
┝	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Domestic Er		Self	9		
╞						
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$3.00
	00/14/2024	Stockman, Christen				<b>\$</b> 3.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78413				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Domestic Er		Self			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/14/2024	Stockman, Christen			,	\$3.00
		Contributor address; City; State; Zip Code				
		······				
		Corpus Christi, TX 78413				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Domestic Er	igineer	Self			
┢						

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/24 Rpt: 25/58	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)			00015946	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	07/14/2024	Tansill, Roy				\$15.00
				1		
		Corpus Christi, TX 78418				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	Not Employe	d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/07/2024	Telge, Judy				\$50.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78411				
		pation / Job title (See Instructions)	Employer (See Instructions			
	Director		Coastal Bend Center for	r In	dependent Living	
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/26/2024	Timperlake, Roger				\$200.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78413	i			
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	.d	Not Employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/24/2024	Trevino, Derek				\$20.00
		Contributor address; City; State; Zip Code		1		
		Ormus Christi TV 70411				
	Drinsipal agou	Corpus Christi, TX 78411				
	Sonography	pation / Job title (See Instructions)	Employer (See Instructions Christus Spohn	3)		
				<del>—</del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷75 00
	09/24/2024	Trigo, Betty				\$75.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78413				
$\vdash$	Dringingl occu		Employer (See Instructions			
	Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	3)		

	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 23/24 Rpt: 26/58		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)			00015946	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/17/2024	Tuley, Sarah				\$15.00
		6 Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78413				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/13/2024	Webb Cason Law Firm PC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78401				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/04/2024	Webb, Ann				\$100.00
		Contributor address; City; State; Zip Code				
		Correcto Christi TV 70414				
$\vdash$	Drizzinal agou	Corpus Christi, TX 78414	Employer (Cool Instructions			
	Not employe	pation / Job title (See Instructions)	Employer (See Instructions Not employed	5)		
╘			Not employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢100.00
	08/04/2024	Webb, Ann				\$100.00
		Contributor address; City; State; Zip Code	ſ			
		Corpus Christi, TX 78414				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Not employe	· · · ·	Not employed	,		
⊨	Date				Amount of Contribution (\$)	
	09/04/2024	Full name of contributor out-of-state PAC (ID#: Webb, Ann	/			\$100.00
	00/0 //202	Contributor address; City; State; Zip Code				Ψ±00.00
		Continuation address, City, State, Zip Code				
		Corpus Christi, TX 78414				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not employe		Not employed			
⊢						

	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 24/24 Rpt: 27/58		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Nueces Cou	nty Democratic Executive Committee (CEC)		00015946		
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/13/2024	Webb Jr., Charles				\$2,500.00
		6 Contributor address; City; State; Zip Code		1		
	ļ					
		Corpus Christi, TX 78401				
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	attorney		Webb, Cason & Mannin	g		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	07/25/2024	Westergen, Kathy				\$5.00
		Contributor address; City; State; Zip Code				
	ļ	Corpus Christi, TX 78416				
┝	Dringinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Academic Ac		Del Mar College	5)		
╞			<u> </u>	<u>г</u>	Amount of Contribution (¢)	
	Date 08/25/2024	Full name of contributor out-of-state PAC (ID#: Westergen, Kathy	)		Amount of Contribution (\$)	\$5.00
	0012312024	Contributor address; City; State; Zip Code				ψ0.00
		Contributor address, City, State, Zip Code				
		Corpus Christi, TX 78416				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Academic Ac	dvisor	Del Mar College			
	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>		Amount of Contribution (\$)	
	09/25/2024	Westergren, Mike (Mr.)				\$5.00
		Contributor address; City; State; Zip Code		1		
	ļ					
		Corpus Christi, TX 78404		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	attorney		self	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢15.00
	09/07/2024	Zamora, Porfirio				\$15.00
		Contributor address; City; State; Zip Code				
	ļ					
		Corpus Christi, TX 78414				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Teacher		Corpus Christi ISD	,		
$\vdash$						

# PLEDGED CONTRIBUTIONS

### SCHEDULE **B**

	The	Instruction Guide expl	1	1 Total pages Schedule B: Sch: 1/1 Rpt: 28/58					
2	FILER NAME	Ξ			3	Filer ID	(Ethics (	Commission Filers)	
	Nueces Cou	unty Democratic Executive	Committee (CEC)			00015946			
4	TOTAL OF	UNITEMIZED PLEDGE		\$			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 trave	I I I I I el outside	of Texas. Complete Sch	nedule T.
10	Principal occ	upation / Job title (See Instruc	tions)	11 Employer (See Instru	ictic	ons)			

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
<sup>4</sup> TOTAL OF UNITEMIZED LOANS	\$ 0.00
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:	) <b>9</b> Loan Amount (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code	10 Interest Rate 11 Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) <b>13</b> Employer (Section 2)	See Instructions)
14 Description of Collateral     15 Check if per       None     Image: Check if per	sonal funds were deposited into political account (See Instructions)
16 GUARANTOR 17 Name of guarantor INFORMATION	<b>19</b> Amount Guaranteed (\$)
not applicable <b>18</b> Guarantor address; City; State; Zip Code	
20 Principal occupation 21 Employer (S	See Instructions)

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2			• • • • • • •	3	Filer ID (Ethics Commission Filers)			
_	Sch: 1/29 Rpt: 30/58	[	Nueces County Democratic Executive	Committ	tee (CEC)		00015946			
4	Date	5	Payee name		. ,					
	07/26/2024		AT&T							
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$63.66		PO BOX 5001							
			Carol Stream , IL 60197							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.			
					phone	, 17	, officeholder living expense			
					phone					
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght		Office held			
	expenditure to benefit C/OI	Н			-					
	Date		Payee name							
	08/27/2024		AT&T							
	Amount (\$)		Payee address; City; State	· Zin Co	de					
	Amount (\$) Payee address; City; State; Zip Code \$63.66 PO BOX 5001									
	400.00		10 000 0001							
			Carol Stream , IL 60197							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expense	,	Check if travel	outs	ide of Texas. Complete Schedule T.			
	EXPENDITORE					, TX	, officeholder living expense			
					Phone					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	gnt		Office held			
		_								
	Date		Payee name							
	09/26/2024		AT&T							
	Amount (\$)			; Zip Co	de					
	\$63.66		PO BOX 5001							
			Carol Stream , IL 60197							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.			
					phone	, 17	, officeholder living expense			
					priorio					
-	Complete ONLY if direct	L(	Candidate/Officeholder name	Office sou	aht		Office held			
	expenditure to benefit C/Oł				J -					
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburse Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Lat The Instruction Guide explains how to complete this form	nse Transportation Equipment & Related Expense Travel in District Travel Out of District or OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)					
Ĺ	Sch: 2/29 Rpt: 31/58	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date	Payee name						
	08/27/2024	Ard, Karen						
6	Amount (\$)	Int (\$) 7 Payee address; City; State; Zip Code						
	\$38.39	6109 Jessica Drive						
		Corpus Christi, TX 78414						
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	on					
	OF EXPENDITURE		travel outside of Texas. Complete Schedule T.					
			Austin, TX, officeholder living expense					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI							
	Date	Payee name						
	07/26/2024	Beltran, Jo Ann						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$40.00	4613 Bluebell Lane						
		Corpus Christi, TX 78416						
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	on					
	OF EXPENDITURE		travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense					
		Food Pr						
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI	-						
⊨	Date	Payee name						
	08/24/2024	Beltran, Jo Ann						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$51.46	4613 Bluebell Lane						
		Corpus Christi, TX 78416						
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	on					
	OF EXPENDITURE	Office Overhead/Rental Expense	travel outside of Texas. Complete Schedule T.					
			Austin, TX, officeholder living expense					
		Office S	սիհաշջ					
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI		Onice field					
-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
		The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)					
	Sch: 3/29 Rpt: 32/58	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date	ate 5 Payee name						
	08/24/2024	Beltran, Jo Ann						
6	Amount (\$)	Payee address; City; State; Zip Code						
	\$83.34	4613 Bluebell Lane						
		Corpus Christi, TX 78416						
8	PURPOSE	Category (See Categories listed at the top of this schedule)     (b) Description						
	OF EXPENDITURE	Salaries/Wages/Contract Labor	putside of Texas. Complete Schedule T.					
			, TX, officeholder living expense					
		Canvassing						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
Ĵ	expenditure to benefit C/Oł	Candidate/Onicenoider name Onice Sought	Once neid					
	Date							
	08/24/2024	Payee name Beltran, Jo Ann						
Amount (\$) Payee address; City; State; Zip Code								
	\$485.63	4613 Bluebell Lane						
		Corpus Christi, TX 78416						
	PURPOSE	Category (See Categories listed at the top of this schedule)     (b) Description						
	OF EXPENDITURE		outside of Texas. Complete Schedule T.					
		Canvassing	, TX, officeholder living expense					
		Currussing						
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI							
⊨	Date	Payee name						
	08/25/2024	Beltran, Jo Ann						
⊢	Amount (\$)	Payee address; City; State; Zip Code						
	\$50.00	4613 Bluebell Lane						
	400.00							
		Corpus Christi, TX 78416						
	PURPOSE OF	b) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense					
		Book Keeping						
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI							
⊢								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	· · · · ·		•	3	Filer ID (Ethics Commission Filers)	
Ĺ	Sch: 4/29 Rpt: 33/58       Nueces County Democratic Executive Committee (CEC)       00015946							
4	Date	5	Payee name					
	09/07/2024		Beltran, Jo Ann					
6	Amount (\$)	7	Payee address; City; State; Z	Zip Coc	е			
	\$83.33		4613 Bluebell Lane					
			Corpus Christi, TX 78416					
8	PURPOSE	(2)			b) Deceription			
ľ	OF	(a)	Category (See Categories listed at the top of this schedu Salaries/Wages/Contract Labor	ule)	b) Description	outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Salaries/Wages/Contract Labor				, officeholder living expense	
					Canvassing			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Offi	ice soug	ht		Office held	
╞								
	Date		Payee name					
	09/07/2024		Beltran, Jo Ann					
	Amount (\$)		Payee address; City; State; 2	Zip Coc	е			
	\$560.00 4613 Bluebell Lane							
			Corpus Christi, TX 78416					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule)	b) Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Check if travel	outs	ide of Texas. Complete Schedule T.	
	EXPENDITORE		-			n, TX	, officeholder living expense	
					Canvassing			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offi	ice soug	ht		Office held	
	Date		Payee name					
	09/18/2024		Beltran, Jo Ann					
	Amount (\$)		Payee address; City; State; Z	Zip Coc	е			
	\$135.00		4613 Bluebell Lane					
			Corpus Christi, TX 78416					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule)	b) Description			
	OF EXPENDITURE		Reimbursement				ide of Texas. Complete Schedule T.	
							, officeholder living expense	
					Political Sign	S		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Offi	ice soug	ht		Office held	
		•						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Fees         Office           Food/Beverage Expense         Polling           Gift/Awards/Memorials Expense         Printing	Overhea Expens g Expen s/Wage	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2		p-		2	Filer ID (Ethics Commission Filers)		
-	Sch: 5/29 Rpt: 34/58								
4	Date	5	Payee name						
	09/21/2024		Beltran, Jo Ann						
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$83.33		4613 Bluebell Lane						
			Corpus Christi, TX 78416						
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				
-	OF		Salaries/Wages/Contract Labor			outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin,	ΤX,	officeholder living expense		
					Canvassing				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office s	ought			Office held		
_	Date		Payee name						
	09/21/2024		Beltran, Jo Ann						
				0  -					
	Amount (\$)		Payee address; City; State; Zip	Code					
	\$481.25 4613 Bluebell Lane								
			Corpus Christi, TX 78416						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE		Salaries/Wages/Contract Labor			outsi	de of Texas. Complete Schedule T.		
	EXPENDITORE		C C			ΤX,	officeholder living expense		
					Canvassing				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office s	ought			Office held		
-	Date		Payee name						
	07/05/2024		Civitech						
	Amount (\$)		Payee address; City; State; Zip	Code					
	\$53.04		21750 Hardy Oak Suite 104	Coue					
	φ <b>30.</b> 04								
			San Antonio, TX 78258						
	PURPOSE	(2)		(h)	Description				
	OF	(4)	Category (See Categories listed at the top of this schedule) Advertising Expense			outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Auventising Expense				officeholder living expense		
					Event Remine	der	S		
	Complete ONLY if direct		Candidate/Officeholder name Office s	ought			Office held		
	expenditure to benefit C/OI	Н							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees         Office Overhead/Rental Expense         Transportation           Food/Beverage Expense         Polling Expense         Travel in Dis           Gift/Awards/Memorials Expense         Printing Expense         Travel Out or					Solicitation/Fundraising Expense Transportation Equipment & Related Exper Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2							Eilore)
1	Sch: 6/29 Rpt: 35/58	Filer ID (Ethics Commission I 00015946	niers)						
4	Date 08/14/2024	5 Payee name Civitech							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$127.97		21750 Hardy Oak Suite 104	· •					
			San Antonio, TX 78258						
	DUDDOCE				(h)	<u> </u>			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(a)	Description	nutsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Advertising Expense					officeholder living expense	
						Event Remino	der	S	
9         Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office held         Office held         Office held         Office held									
	Date		Payee name						
	07/24/2024		Constant Contact						
	Amount (\$)			; Zip Co	do				
	.,			, zip co	ue				
	\$81.02 Reservoir Place								
			1601 Trapelo Road						
			Waltham, MA 02451						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Advertising Expense					de of Texas. Complete Schedule T. officeholder living expense	
						Email	, 17,	uncenduer inning expense	
						Linai			
_	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	aht			Office held	
	expenditure to benefit C/OI				gin				
_	Data	1							
	Date 08/26/2024		Payee name Constant Contact						
				7. 0					
	Amount (\$)		-	; Zip Co	de				
	\$81.02		Reservoir Place						
			1601 Trapelo Road						
			Waltham, MA 02451						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Advertising Expense					de of Texas. Complete Schedule T.	
							, TX,	officeholder living expense	
						Email			
	0			2.45					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office held	
		-							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense     Event Expense       Accounting/Banking     Fees       Consulting Expense     Food/Beverage E       Contributions/ Donations Made By -     Gift/Awards/Mem       Candidate/Officeholder/Political Committee     Legal Services       Credit Card Payment     The Instruction				Office Pollin se Printi Salar	Overh g Expe ng Expe es/Wag	ayment/Reimbursement     Solicitation/Fundraising Expense       erhead/Rental Expense     Transportation Equipment & Related Expense       opense     Travel in District       xpense     Travel Out of District       Wages/Contract Labor     OTHER (enter a category not listed above)				
1	1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission File									
-	Sch: 7/29 Rpt: 36/58		Nueces County Democratic Executive Committee (CEC)     00015946							
4	Date	5 Payee name								
	09/24/2024		Constant Contact							
6	Amount (\$)	<b>7</b> Pa	ayee address; City;	State; Zip	Code	9				
	\$87.41	R	eservoir Place							
		16	601 Trapelo Road							
		W	altham, MA 02451							
8	PURPOSE	<b>(a)</b> Ca	ategory (See Categories listed at the top of	of this schedule)	(t	Description				
	OF EXPENDITURE		lvertising Expense	,				ide of Texas. Complete Schedule T.		
							ı, TX	, officeholder living expense		
						Email				
9	Complete ONLY if direct	Car	ndidate/Officeholder name	Office	souat	nt		Office held		
ľ	expenditure to benefit C/O			Onice	Jougi	n.				
	Date	Pa	ayee name							
	07/29/2024	С	ricket Wireless -7352							
	Amount (\$)	Pa	ayee address; City;	State; Zip	Code	9				
	\$292.73 4222 Ayers st									
			-							
		С	orpus Christi, TX 78415-5317							
	PURPOSE OF		ategory (See Categories listed at the top of		(ł	Description				
	EXPENDITURE	S	plicitation/Fundraising Expense	e				ide of Texas. Complete Schedule T. , officeholder living expense		
						phone lines	, 17			
						·				
	Complete ONLY if direct	Car	ndidate/Officeholder name	Office	sough	nt		Office held		
	expenditure to benefit C/OI	ł								
F	Date	Pa	ayee name							
	08/28/2024	С	ricket Wireless -7352							
	Amount (\$)	Pa	ayee address; City;	State; Zip	Code	e				
	\$130.00	42	222 Ayers st							
		С	orpus Christi, TX 78415-5317							
	PURPOSE	<b>(a)</b> Ca	ategory (See Categories listed at the top of	of this schedule)	(k	) Description				
	OF EXPENDITURE	G	OTV					ide of Texas. Complete Schedule T.		
						Phones	I, TX	, officeholder living expense		
						FIIUNES				
⊢	Complete ONLY if direct	Car	ndidate/Officeholder name	Office		nt		Office held		
	expenditure to benefit C/OI			Chice	Jugi					
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbur Fees Office Overhead/Rental B Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
-	Sch: 8/29 Rpt: 37/58	Nueces County Democratic Executive Committee (CEC)     00015946						
4	Date 08/31/2024	5 Payee name Curtis Miles						
6	Amount (\$) \$85.00	7 Payee address; City; State; Zip Code 1110 Lum Ave Corpus Christi, TX 78412						
8	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Medical Attention       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dog Bite							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/10/2024	Explosive Advertising						
	Amount (\$) \$350.00							
	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Event Expense       (b) Description 							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/24/2024	Garcia, Rolando						
	Amount (\$) \$503.13	Payee address; City; State; Zip Code 2240 NPID Apt. 12308						
		Corpus Christi, TX 78408						
	PURPOSE OF EXPENDITURE		ption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense assing					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
_	<b>T</b>	-		ompi					
1	Total pages Schedule F1:	2					Filer ID (Ethics Commission Filers)		
	Sch: 9/29 Rpt: 38/58		Nueces County Democratic Executive Commi	ttee	(CEC)		00015946		
4	Date	5	Payee name						
	08/24/2024		Garza, Robert						
6	Amount (\$)	7	Payee address; City; State; Zip C	ode					
	\$83.13		537 Scott Dr.						
			Corpus Christi, TX 78408						
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.		
	EXPENDITORE					TX,	officeholder living expense		
					Canvassing				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office so	ught			Office held		
	Date		Payee name						
	09/21/2024		Garza, Robert						
	Amount (\$)		Payee address; City; State; Zip C	ode					
	\$292.95		537 Scott Dr.						
			Corpus Christi, TX 78408						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF	(,	Salaries/Wages/Contract Labor	()		utsic	de of Texas. Complete Schedule T.		
	EXPENDITURE		Calance, Wagee, Contract Labor		Check if Austin,	TX,	officeholder living expense		
					Canvassing				
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught			Office held		
	expenditure to benefit C/OF	-							
	Date		Payee name						
	09/21/2024		Garza, Sally						
	Amount (\$)		Payee address; City; State; Zip C	ode					
	\$144.00		629 Vera Cruz						
			Corpus Christi, TX 78405						
	PURPOSE	(2)		(h)	Description				
	OF	(a)	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description	utsic	de of Texas. Complete Schedule T.		
	EXPENDITURE		Salaries/Wages/Contract Labor				officeholder living expense		
					Canvassing				
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught			Office held		
expenditure to benefit C/OH									
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Committee     Legal Services       Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)					
	Sch: 10/29 Rpt: 39/58	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date 08/24/2024	5 Payee name Garza, Steve						
6	Amount (\$) \$586.25	Payee address; City; State; Zip Code 2606 montgomery st corpus christi, TX 78405						
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Canvassing								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/07/2024	Garza, Steve						
	Amount (\$) \$980.00	Payee address;City;State;Zip Code2606 Montgomery St.						
		Corpus Christi, TX 78405						
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/07/2024	Garza, Steve						
	Amount (\$) \$113.75	Payee address;City;State;Zip Code2606 Montgomery St.						
		Corpus Christi, TX 78405						
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	· · ·			2	Filer ID (Ethics Commission Filers)	
1	Sch: 11/29 Rpt: 40/58		Nueces County Democratic Executive	Committ	ee (CEC)		00015946	
1	Date				(			
4	09/21/2024	5 Payee name Garza, Steve						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$958.13		2606 Montgomery St.					
			Corpus Christi, TX 78405					
8	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b) Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor	,		vel outs	side of Texas. Complete Schedule T.	
	EXPENDITORE						K, officeholder living expense	
					Canvassin	g		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held	
	Date		Payee name					
	08/24/2024		Guerrero Saenz, Diego					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
\$695.63 60			6022 Sweet Gum	•				
			Corpus Christi, TX 78415					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)	(b) Description	vel outs	side of Texas. Complete Schedule T.	
					Canvassin		K, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		candidate/Officeholder name C	Dffice sou	ght		Office held	
	Date		Payee name					
	09/07/2024		Guerrero Saenz, Diego					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$1,548.75		6022 Sweet Gum					
			Corpus Christi, TX 78415					
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Salaries/Wages/Contract Labor				side of Texas. Complete Schedule T.	
					Canvassin		c, officeholder living expense	
					Currussin	ษ		
-	Complete ONLY if direct	Ļ	andidate/Officeholder name C	Office sour	aht		Office held	
Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office held         Office held         Office held						Onice neiu		
-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 12/29 Rpt: 41/58		Nueces County Democratic Executive C	Committ	ee (	(CEC)	-	00015946
4	Date	5	Payee name			,		
	09/21/2024		Guerrero Saenz, Diego					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$1,528.10		6022 Sweet Gum					
			Corpus Christi, TX 78415					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Complete Schedule T.
							, TX,	officeholder living expense
						Canvassing		
_								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Of	office sou	JUL			Office held
	Date		Payee name					
	07/12/2024		Gulf Coast Mailing & Printing					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$560.74 PO BOX 9312							
			Corpus Christi, TX 78469					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Printing Expense					de of Texas. Complete Schedule T.
							, TX,	officeholder living expense
						Walk Piece		
_	Operation ONITY if all a st							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	office soug	JUL			Office held
	Date		Payee name					
	08/09/2024		Gulf Coast Mailing & Printing					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$10,283.75		PO BOX 9312					
			Corpus Christi, TX 78469					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schere	edule)	(b)	Description		de ef Teures, Oemericae Oeheedude T
	EXPENDITURE		Printing Expense					de of Texas. Complete Schedule T. officeholder living expense
						Walk Piece	, 17,	
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name Of	office sour	aht			Office held
	expenditure to benefit C/Oł							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           -         Gift/Awards/Memorials Expense         Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	-			2	Filer ID (Ethics Commission Filers)	
1	Sch: 13/29 Rpt: 42/58		Nueces County Democratic Executive	Committ	tee (CEC)	3	00015946	
1	Date		Payee name					
4	09/16/2024		HEB #139					
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de			
	\$150.00		5801 Weber Rd.					
			Corpus Christi, TX 78415					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description			
	OF		Gift/Awards/Memorials Expense	iouulo)		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE					, TX,	officeholder living expense	
					Gift Cards			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held	
	Date		Payee name					
	09/11/2024		Henry, Cory					
	Amount (\$)		Payee address; City; State	; Zip Co	de			
	\$151.55		5525 S. Alameda Apt. 221					
			Corpus Christi, TX 78412					
PURPOSE OF EXPENDITURE			<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Salaries/Wages/Contract Labor</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> </ul>					
					Canvassing			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ght		Office held	
	Date		Payee name					
	09/21/2024		Henry, Cory					
	Amount (\$)		Payee address; City; State	; Zip Co	de			
	\$170.63		5525 S. Alameda Apt. 221	·				
			Corpus Christi, TX 78412					
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.	
						, TX,	officeholder living expense	
					Canvassing			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)					
	Sch: 14/29 Rpt: 43/58	Nueces County Democratic Executive Committee (CEC)	00015946					
4	Date 08/02/2024	Payee name Herrejon's Bakery						
6	Amount (\$) \$49.92							
8	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense       (b) Description         Image: Check if Austin, TX, officeholder living expense       Image: Check if Austin, TX, officeholder living expense         EXPENDITURE       Image: Check if Austin, TX, officeholder living expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/12/2024	Herrejon's Bakery						
	Amount (\$) \$62.39	Payee address;       City;       State;       Zip Code         9       3829 Crosstown Expy						
	PURPOSE OF EXPENDITURE	OF Ecod/Beverage Expanse						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/03/2024	Home Depot #6584						
	Amount (\$) \$24.90	Payee address; City; State; Zip Code 5041 S. Padre Island Dr						
		Corpus Christi, TX 78411						
	PURPOSE OF EXPENDITURE		ıtside of Texas. Complete Schedule T. IX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services The Instruction Guide e	Office Ove Polling Ex nse Printing E Salaries/V	xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	Total pages Schedule F1:					<b>3</b> Filer ID (Ethics Commission Filers)		
	Sch: 15/29 Rpt: 44/58		nty Democratic Exe	00015946				
4	Date	5 Payee name						
	08/09/2024	Jason's Deli						
6	Amount (\$)	Payee addres		State; Zip Co	ode			
	\$269.41	5325 Sarato	ga Blvd. Suite 200					
		Corpus Chris	sti, TX 78413					
8	PURPOSE	Category (Se	e Categories listed at the top	of this schedule)	(b) Description			
	OF		age Expense	of this schedule)		outside of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austir	n, TX, officeholder living expense		
					Donor Meeti	ng		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offic	ceholder name	Office sou	ight	Office held		
⊨	Date							
		Payee name						
09/21/2024 Martinez, Danny								
Amount (\$) Payee address; City; State; Zip Code								
	\$130.00 4918 Concord							
		Corpus Chris	sti, TX 78415					
	PURPOSE	Category (Se	e Categories listed at the top	of this schedule)	(b) Description			
	OF		ges/Contract Labor			outside of Texas. Complete Schedule T.		
	EXPENDITURE		9		Check if Austir	n, TX, officeholder living expense		
					Security			
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ıght	Office held		
	expenditure to benefit C/OI							
	Date	Payee name						
	08/24/2024	Martinez, Je	sse					
	Amount (\$)	Payee addres	s; City;	State; Zip Co	ode			
	\$835.63		wood Rd. Trlr 248	онно, шр ос				
	φ000.00	102 0. 01011						
		Compute Chris	ati TV 70400					
		Corpus Crin	sti, TX 78406		1			
	PURPOSE OF		e Categories listed at the top		(b) Description			
	EXPENDITURE	Salaries/Wa	ges/Contract Labor			outside of Texas. Complete Schedule T. n, TX, officeholder living expense		
					Canvassing	i, TX, oncenolder living expense		
					Canvassing			
⊢	Complete ONUM Station	Demeliale to 1011	a haldan na	0#:				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offic	enoluer name	Office sou	ignt	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           / -         Gift/Awards/Memorials Expense         Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Total pages Schedule F1:	2					2	Filer ID (Ethics Commission Filers)
	Sch: 16/29 Rpt: 45/58							00015946
4	Date 09/07/2024		<sup>p</sup> ayee name Martinez, Jesse					
_								
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$813.75		702 S. Clarkwood Rd. Trlr 248					
			Corpus Christi, TX 78406					
8	PURPOSE	(a) (	Category (See Categories listed at the top	of this schedule)	(k	) Description		
	OF		Salaries/Wages/Contract Labor	or this schedule)	ľ		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austir	ı, TX	, officeholder living expense
						Canvassing		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office	sough	it		Office held
	Date	F	Payee name					
	09/23/2024		Martinez, Jesse					
Amount (\$) Payee address; City; State; Zip Code								
\$857.80 702 S. Clarkwood Rd. Trlr 248								
		(	Corpus Christi, TX 78406					
	PURPOSE OF	(a) (	Category (See Categories listed at the top	of this schedule)	(k	Description		
	EXPENDITURE	:	Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T. , officeholder living expense
							1, 1 A	, onceroider living expense
						Currussing		
L	Complete ONIL V if direct		andidata/Office helder respect	Office				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	-	andidate/Officeholder name	Office	sougr	IL		Office held
	Date		Payee name					
	08/24/2024		Miles, Curtis					
	Amount (\$)	I	Payee address; City;	State; Zip	Code	9		
	\$30.63	_	L110 Lum Ave					
		(	Corpus Christi, TX 78412					
	PURPOSE OF		Category (See Categories listed at the top	of this schedule)	(k	) Description		
	EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T.
							1, IX,	, officeholder living expense
						Canvassing		
L		Ļ						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	sough	It		Office held
		•						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Total pages Schedule F1:	2	· · · ·			2	Filer ID (Ethics Commission Filers)	
ľ	Sch: 17/29 Rpt: 46/58		Nueces County Democratic Executive (	00015946				
4	Date			00111111				
-	09/07/2024	5	Payee name Miles, Curtis					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$603.75		1110 Lum Ave					
			Corpus Christi, TX 78412					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.	
						, TX,	officeholder living expense	
					Canvassing			
9	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	abt		Office held	
9	expenditure to benefit C/OI			nice sou	ym		Onice heid	
⊨	Data							
	Date		Payee name					
	08/29/2024		Office Depot					
	Amount (\$)			Zip Co	de			
	\$16.21 1737 S Staples St							
			Corpus Christi, TX 78404					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T. officeholder living expense	
					Office Supplie			
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	ght		Office held	
	expenditure to benefit C/OI	Н						
⊨	Date		Pavee name					
	09/03/2024		Office Depot					
-	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$155.82		1737 S Staples St					
			Corpus Christi, TX 78404					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T.	
							officeholder living expense	
					Office Supplie	5		
	Complete ONL V if direct	Ļ	Candidate/Officeholder name C		aht		Office held	
Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office held         Office held         Office held								
-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)						
1	Sch: 18/29 Rpt: 47/58	Nueces County Democratic Executive Committee (CEC)	00015946						
4	Date 09/03/2024	5 Payee name Office Depot							
6	Amount (\$) \$110.56	7       Payee address;       City;       State;       Zip Code         \$110.56       1737 S Staples St         Corpus Christi, TX 78404							
8	8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description         Image: Check if Austin, TX, officeholder living expense       Image: Check if Austin, TX, officeholder living expense         Image: OF EXPENDITURE       Office Overhead/Rental Expense       Image: Check if Austin, TX, officeholder living expense         Image: Office Supplies       Office Supplies								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/09/2024	Office Depot							
	Amount (\$) \$197.90	Payee address; City; State; Zip Code 1737 S Staples St							
		Corpus Christi, TX 78404							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense S						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/21/2024	Olvera, Michael							
	Amount (\$) \$130.00	Payee address; City; State; Zip Code 405 Eugina							
		Orange Grove, TX 78382							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           Gift/Awards/Memorials Expense         Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME		-		3	Filer ID (Ethics Commission Filers)	
	Sch: 19/29 Rpt: 48/58		Nueces County Democratic Executive	Committ	ee ((	CEC)		00015946	
4	Date	5	Payee name			,			
	07/02/2024		Papa Johns #4855						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$73.52		4037 Saratoga Blvd.						
			Corpus Christi, TX 78413						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Event Expense	,	[		outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE				[	<b>—</b>	, TX,	officeholder living expense	
					I	Food			
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held	
	Date		Payee name						
	08/24/2024		Parga Guerrero, Samuel						
Amount (\$) Payee address; City; State; Zip Code									
\$367.50 6022 Sweet Gum									
	\$307.50		0022 Sweet Guin						
			Corpus Christi, TX 78415						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Į			de of Texas. Complete Schedule T.	
					l	Canvassing	, IX,	officeholder living expense	
						Canvassing			
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	wht			Office held	
	expenditure to benefit C/Oł			Juice Soui	JIII			Onice heid	
		1							
	Date		Payee name						
	09/07/2024		Parga Guerrero, Samuel						
	Amount (\$)			Zip Co	de				
	\$589.05		6022 Sweet Gum						
			Corpus Christi, TX 78415						
	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Į			de of Texas. Complete Schedule T.	
					[		, TX,	officeholder living expense	
					(	Canvassing			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held	
		•							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 20/29 Rpt: 49/58	Nueces County Democratic Executive Committee (CEC)     00015946						
4	Date     5     Payee name       09/21/2024     Parga Guerrero, Samuel							
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$315.00       6022 Sweet Gum       6022 Sweet Gum       Corpus Christi, TX 78415							
8	8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Canvassing							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/29/2024	Pest Control Services Inc.						
	Amount (\$) \$81.19	Payee address; City; State; Zip Code 5011 Ambassador Rd.						
	DUDDOGE	Corpus Christi, TX 78416						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/01/2024	Pizza Hut						
	Amount (\$)     Payee address;     City;     State;     Zip Code       \$38.41     4001 Saratoga Blvd. Suite 103							
		Corpus Christi, TX 78413						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           By -         Gift/Awards/Memorials Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 21/29 Rpt: 50/58		Nueces County Democratic Execut	tive Comm	ittee	(CEC)		00015946	
4	Date	5	Payee name						
	07/30/2024		Pizza Patron						
6	Amount (\$)	7	Payee address; City; S	tate; Zip C	Code				
	\$32.47		4918 Ayers St. Suite 107						
			Corpus Christi, TX 78415						
8	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description			
	OF EXPENDITURE		Food/Beverage Expense	,		Check if travel	outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE						I, TX,	officeholder living expense	
						Pizza			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ought			Office held	
	Date		Payee name						
	07/15/2024		Reliant Energy						
	Amount (\$)	┢	Payee address; City; S	tate; Zip C	Code				
	\$98.03		PO Box 650475	·····, —·[- ·					
	\$00.00								
			Dallas, TX 75265-0475						
	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T.	
							I, IX,	officeholder living expense	
						Electric			
	Complete ONLY if direct		Candidate/Officeholder name	Office so				Office held	
	expenditure to benefit C/OI			Once so	Juyin			Onice neid	
	Date		Payee name						
	08/12/2024		Reliant Energy						
_									
	Amount (\$)			tate; Zip C	Code				
	\$136.28		PO Box 650475						
			Dallas, TX 75265-0475						
	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T.	
						<u> </u>	I, TX,	officeholder living expense	
						Electric			
	Osmalata Obli V K. "	L		<i></i>	<u> </u>				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	bught			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           By -         Gift/Awards/Memorials Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
_	Sch: 22/29 Rpt: 51/58	00015946						
4	Date	5	Payee name			<u> </u>		
	09/11/2024		Reliant Energy					
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de			
	\$169.82		PO Box 650475					
			Dallas, TX 75265-0475					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T. , officeholder living expense	
					Electric	, 17		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name C	Dffice sou	ght		Office held	
	Date		Payee name					
	07/03/2024		Sam's Club					
	Amount (\$) Payee address; City; State; Zip Code							
	\$292.09		4833 South Padre Island Drive					
			Corpus Christi, TX 78411					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description			
	EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense	
					July 4th Ever			
	Complete ONLY if direct		Candidate/Officeholder name	Dffice sou	aht		Office held	
	expenditure to benefit C/OI	H			5			
	Date		Payee name					
	07/04/2024		Sam's Club					
-	Amount (\$)		Payee address; City; State;	; Zip Co	de			
	\$101.37		4833 South Padre Island Drive					
			Corpus Christi, TX 78411					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description			
	EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense	
					July 4th Ever			
-	Complete ONLY if direct	L(	Candidate/Officeholder name C	Office sou	ght		Office held	
	expenditure to benefit C/OI				-			

			EXPENDITURE CATEGO	RIES FOF	R BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense 1 y - Gift/Awards/Memorials Expense Printing Expense 1				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 23/29 Rpt: 52/58		Nueces County Democratic Executive	Commit	tee (CEC)		00015946			
4	Date	5	Payee name		. ,					
	09/03/2024		Sam's Club							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode					
	\$30.61		4833 South Padre Island Drive							
			Corpus Christi, TX 78411							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF		Food/Beverage Expense	iouuloj		el outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE					tin, TX	, officeholder living expense			
					Water					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght		Office held			
	Date		Payee name							
	09/09/2024 Sam's Club									
	Amount (\$) Payee address; City; State; Zip Code									
	\$110.35 4833 South Padre Island Drive									
			Corpus Christi, TX 78411							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense			
					Reception	un, 17	, Uniceriolider living expense			
					Reception					
_	Complete <u>ONLY</u> if direct		Candidate/Officeholder name	Office sou	laht		Office held			
	expenditure to benefit C/OF			Onice Sou	igint		Office field			
		_								
	Date		Payee name							
	07/01/2024		Stellar Point							
	Amount (\$)		Payee address; City; State	; Zip Co	ode					
	\$1,100.00		6102 Ayers							
			Suite 106							
			Corpus Christi, TX 78415							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	aodulo)	(b) Description					
	OF		Office Overhead/Rental Expense	leuule)		el outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Aus	tin, TX	, officeholder living expense			
					Rent					
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ıght		Office held			
	expenditure to benefit C/OF	H								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)							
-	Sch: 24/29 Rpt: 53/58	Nueces County Democratic Executive Committee (CEC)	00015946							
4	Date 08/26/2024	5 Payee name Stellar Point								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$1,100.00	6102 Ayers								
		Suite 106								
		Corpus Christi, TX 78415								
8	DUDDOSE									
U	OF EXPENDITURE									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/02/2024	Stellar Point								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,100.00	6102 Ayers								
		Suite 106								
		Corpus Christi, TX 78415								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/03/2024	Taqueria Mi Casita								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$51.09	2033 Airline Rd.								
		Corpus Christi, TX 78412								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Total pages Schedule F1:	2			inpie		2	Filer ID (Ethics Commission Filers)		
	Sch: 25/29 Rpt: 54/58		Nueces County Democratic Executive	Committ	<u></u> (		٦ ا	00015946		
	•		-	Commu		020)		00013340		
4	Date 09/07/2024	5     Payee name       024     Tasby, Eric								
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de					
	\$131.25		5938 Parkland Dr.							
			Corpus Christi, TX 78413							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description				
	OF		Salaries/Wages/Contract Labor	cuuic)	. ,		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		5		ĺ	Check if Austin	, тх,	officeholder living expense		
						Canvassing				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght			Office held		
⊨	Date		Payee name							
	09/21/2024		Tasby, Eric							
Amount (\$) Payee address; City; State; Zip Code										
	\$669.38		5938 Parkland Dr.	,p						
	\$000.00									
			Corpus Christi, TX 78413							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description				
	EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Complete Schedule T. , officeholder living expense		
						5938 Parklan				
⊢	Complete ONLY if direct		Candidate/Officeholder name C	Dffice sou	thr			Office held		
	expenditure to benefit C/Oł				gin					
⊨	Data	-								
	Date 08/19/2024		Payee name Texas Democratic Party							
	Amount (\$)			; Zip Co	de					
	\$60.00		PO Box 116							
			Austin, TX 78767							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense					de of Texas. Complete Schedule T.		
								officeholder living expense		
						Bumper Stick	ers			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held		

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 26/29 Rpt: 55/58 Nueces County Democratic Executive Committee (CEC) 00015946 4 Date 5 Payee name 08/01/2024 Texas State Museum of Asian Cultures 6 Amount (\$) Payee address; City; State; Zip Code 7 \$150.00 1809 N. Chaparral St. Corpus Christi, TX 78401 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense EXPENDITURE Check if Austin, TX, officeholder living expense Venue Complete ONLY if direct Candidate/Officeholder name Office sought Office held 9 expenditure to benefit C/OH Date Payee name 08/19/2024 The Print Shop Amount (\$) Payee address; City; State; Zip Code \$541.25 3906 S. Jackson Rd Edingburg, TX 78539 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Printing Expense EXPENDITURE Check if Austin, TX, officeholder living expense **Political Signs** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/03/2024 The Print Shop Amount (\$) Payee address: City: State; Zip Code \$1,520.91 3906 S. Jackson Rd Edingburg, TX 78539 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Printing Expense EXPENDITURE Check if Austin, TX, officeholder living expense **Political Signs** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       ommittee     Legal Services       Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	<b>3</b> Filer ID (Ethics Commission Filers)							
ľ	Sch: 27/29 Rpt: 56/58	Nueces County Democratic Executive Committee (CEC)	00015946							
4	Date	Payee name								
	09/19/2024	The Print Shop								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$1,363.95	3906 S. Jackson Rd								
		Edingburg, TX 78539								
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Printing Expense Check if travel o	utside of Texas. Complete Schedule T.							
			TX, officeholder living expense							
		Political Signs	5							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
Ľ	expenditure to benefit C/O	oundrate/onicenolder nume								
	Date	Payee name								
	09/23/2024 The Print Shop									
	Amount (\$)	Payee address; City; State; Zip Code								
	\$270.63 3906 S. Jackson Rd									
		Edingburg, TX 78539								
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)       (b) Description								
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
		Political Signs								
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
	expenditure to benefit C/OI									
	Date	Payee name								
	07/01/2024	USPS								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$170.00	802 N. Tancahua St.								
		Corpus Christi, TX 78401								
	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description								
	EXPENDITURE		outside of Texas. Complete Schedule T.							
			TX, officeholder living expense							
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
	expenditure to benefit C/Oł	Calculate, Shiotholdor Harro Childe Sought								
⊢										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Tod/Beverage Expense         Polling Expense         Tod/Beverage Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME		-	3	<b>3</b> Filer ID (Ethics Commission Filers)			
	Sch: 28/29 Rpt: 57/58		Nueces County Democratic Executive	Committ	ee (CEC)		00015946			
4	Date	5	Payee name							
	08/16/2024		Walmart							
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$36.13		1821 S. Padre Island Dr.							
			Corpus Christi, TX 78416							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Descripti	ion				
	OF EXPENDITURE		Food/Beverage Expense				utside of Texas. Complete Schedule T.			
					Water	if Austin, T	TX, officeholder living expense			
					waler					
9	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	nht		Office held			
ľ	expenditure to benefit C/OI			Since Sou	Jur		Onice neid			
⊨	Data	<u> </u>								
	Date 08/29/2024		Payee name Walmart							
	Amount (\$)			; Zip Co	de					
	\$16.08 1821 S. Padre Island Dr.									
			Corpus Christi, TX 78416							
⊢	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Descripti	ion				
	OF EXPENDITURE		Food/Beverage Expense	,	Check i	if travel ou	utside of Texas. Complete Schedule T.			
	EXPENDITORE					if Austin, T	TX, officeholder living expense			
					Water					
				2.4%						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	gnt		Office held			
╘		_								
	Date		Payee name							
	09/16/2024		Walmart							
	Amount (\$)			; Zip Co	de					
	\$21.44		1821 S. Padre Island Dr.							
			Corpus Christi, TX 78416							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Descripti					
	EXPENDITURE		Food/Beverage Expense				itside of Texas. Complete Schedule T. IX, officeholder living expense			
					Water	II Auslin, I	x, oncenolder living expense			
					. alo					
⊢	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name C	Office sou	aht		Office held			
	expenditure to benefit C/Oł						C			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Total pages Schedule F1:	2				3	Filer ID (Ethics Commission Filers)			
ľ	Sch: 29/29 Rpt: 58/58	2	Nueces County Democratic Executive Committee (CEC)     00015946							
4	Date	5	Payee name							
	09/23/2024	Walmart								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$16.08		1821 S. Padre Island Dr.							
			Corpus Christi, TX 78416							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Food/Beverage Expense				de of Texas. Complete Schedule T.			
						, TX,	officeholder living expense			
					Water					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ght		Office held			
⊨	Date		Pavee name							
	09/21/2024		,							
	Amount (\$)			Zip Co	de					
	\$306.26		357 Palmetto St.							
			Corpus Christi, TX 78412							
_	PURPOSE	(a)	-		(b) Description					
	OF	(~)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)		outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE		Salaries, Wages, Contract Labor		Check if Austin,	, тх,	officeholder living expense			
					Canvassing					
	Complete ONLY if direct		Candidate/Officeholder name O	Office sou	ght		Office held			
	expenditure to benefit C/OI	H								
	Date		Payee name							
	07/03/2024		Worley Printing Co Inc							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$339.33		3217 N IH 35							
			Austin , TX 78722							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Printing Expense				de of Texas. Complete Schedule T.			
	EXPENDITORE					, тх,	officeholder living expense			
					Stationary					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ght		Office held			