

POLITICAL PARTY REPORT REGARDING FUNDS FROM CORPORATIONS AND LABOR ORGANIZATIONS

FORM PTY-CORP
COVER SHEET PG 1

Form PTY-CORP Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:														
3 POLITICAL PARTY NAME	HIDALGO COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE		<div style="border: 2px solid red; padding: 10px; margin: 10px auto; width: 80%;"> <p style="color: red; font-size: 1.5em; font-weight: bold;">RECEIVED</p> <p style="color: red;">10/8/24</p> <p style="color: red;">Texas Ethics Commission</p> </div>														
4 STATE OR COUNTY PARTY	<input type="checkbox"/> State <input checked="" type="checkbox"/> County <u>Hidalgo</u>																
5 POLITICAL PARTY TYPE	<input checked="" type="checkbox"/> Democratic <input type="checkbox"/> Republican <input type="checkbox"/> Other: _____ <div style="text-align: center; font-size: 0.8em;">(Party name)</div>																
6 POLITICAL PARTY MAILING ADDRESS	<div style="display: flex; justify-content: space-between;"> ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE </div> <p>PO Box 4585, McAllen, TX 78502-4585</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Change of Address </div>																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; padding: 5px;">Date Received</td> <td colspan="3" rowspan="4" style="text-align: center; vertical-align: middle;"> <div style="border: 2px solid red; padding: 10px; margin: 10px auto; width: 80%;"> <p style="color: red; font-size: 1.5em; font-weight: bold;">RECEIVED</p> <p style="color: red;">10/8/24</p> <p style="color: red;">Texas Ethics Commission</p> </div> </td> </tr> <tr> <td style="padding: 5px;">Date Hand-delivered or Date Postmarked via email</td> </tr> <tr> <td style="padding: 5px;">Receipt #</td> <td style="padding: 5px;">Amount \$</td> </tr> <tr> <td style="padding: 5px;">Date Processed</td> <td style="padding: 5px;">Date Imaged</td> </tr> </table>				Date Received	<div style="border: 2px solid red; padding: 10px; margin: 10px auto; width: 80%;"> <p style="color: red; font-size: 1.5em; font-weight: bold;">RECEIVED</p> <p style="color: red;">10/8/24</p> <p style="color: red;">Texas Ethics Commission</p> </div>			Date Hand-delivered or Date Postmarked via email	Receipt #	Amount \$	Date Processed	Date Imaged					
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Date Hand-delivered or Date Postmarked via email																	
Receipt #				Amount \$													
Date Processed				Date Imaged													
7 POLITICAL PARTY CHAIR	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:25%;">FIRST</td> <td style="width:15%;">MI</td> <td style="width:20%;">NICKNAME</td> <td style="width:20%;">LAST</td> <td style="width:15%;">SUFFIX</td> </tr> <tr> <td colspan="6" style="text-align: center; padding: 5px;">Richard Gonzales</td> </tr> </table>			TITLE	FIRST	MI	NICKNAME	LAST	SUFFIX	Richard Gonzales							
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Richard Gonzales																	
8 CHAIR MAILING ADDRESS	<div style="display: flex; justify-content: space-between;"> ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE </div> <p>814 Del Oro Drive, Pharr, TX 78577</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Change of Address </div>																
9 CHAIR STREET ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE </div> <p>814 Del Oro Drive, Pharr, TX 78577</p>																
10 CHAIR PHONE	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">AREA CODE</td> <td style="width:40%;">PHONE NUMBER</td> <td style="width:35%;">EXTENSION</td> </tr> <tr> <td style="text-align: center; padding: 5px;">(956)</td> <td style="text-align: center; padding: 5px;">207-3909</td> <td></td> </tr> </table>			AREA CODE	PHONE NUMBER	EXTENSION	(956)	207-3909									
AREA CODE	PHONE NUMBER	EXTENSION															
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11 REPORT TYPE	<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 </div> <div> <input type="checkbox"/> 8th day before primary election <input type="checkbox"/> 50th day before general election </div> </div>																
12 PERIOD COVERED	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Month</td> <td style="width:10%;">Day</td> <td style="width:15%;">Year</td> <td style="width:10%; text-align: center;">THROUGH</td> <td style="width:10%;">Month</td> <td style="width:10%;">Day</td> <td style="width:15%;">Year</td> </tr> <tr> <td style="text-align: center; padding: 5px;">01</td> <td style="text-align: center; padding: 5px;">/ 01</td> <td style="text-align: center; padding: 5px;">/ 2024</td> <td></td> <td style="text-align: center; padding: 5px;">06</td> <td style="text-align: center; padding: 5px;">/ 30</td> <td style="text-align: center; padding: 5px;">/ 2024</td> </tr> </table>			Month	Day	Year	THROUGH	Month	Day	Year	01	/ 01	/ 2024		06	/ 30	/ 2024
Month	Day	Year	THROUGH	Month	Day	Year											
01	/ 01	/ 2024		06	/ 30	/ 2024											

GO TO PAGE 2

**POLITICAL PARTY REPORT:
TOTALS AND SIGNATURE**

**FORM PTY-CORP
COVER SHEET PG 2**

13 POLITICAL PARTY NAME

HIDALGO COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE

14 Filer ID (Ethics Commission Filers)

15 TOTALS

1. TOTAL CONTRIBUTIONS FROM CORPORATE OR
LABOR ORGANIZATIONS
(OTHER THAN LOANS OR GUARANTEES OF LOANS)

\$ 0.00

2. TOTAL EXPENDITURES FROM CORPORATE OR
LABOR ORGANIZATION CONTRIBUTIONS

\$ 0.00

3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST
DAY OF REPORTING PERIOD

\$ 100.00

A political party must file a report on Form PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions.

16 SIGNATURE

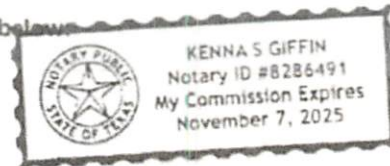
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 19, Election Code.


Signature of Political Party Chair (Declarant)

Please complete either option below

(1) Affidavit

AFFIX NOTARY STAMP / SEAL ABOVE



Sworn to and subscribed before me, by the said Richard Gonzales, this the 15th
day of July, 2024, to certify which, witness my hand and seal of office.


Signature of officer administering oath

Kenna S Giffin
Printed name of officer administering oath

Notary Public
Title of officer administering oath

OR