#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00085609 3 COMMITTEE NAME **OFFICE USE ONLY** Northern Cameron County Democrats Date Received **ELECTRONICALLY FILED** 10/27/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 24336 Preston Trail Date Hand-delivered or Date Postmarked Change of Address Harlingen, TX 78552 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Nancy NAME NICKNAME LAST **SUFFIX** Fly Guenther STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 24336 Preston Tr. STREET **ADDRESS** (Residence or Business) Harlingen, TX 78552 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 24336 Preston Tr. MAILING **ADDRESS** Harlingen, TX 78552 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 567-0346 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/27/2024 10/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME   |   |   | 13 Filer ID    | (Ethics Commission Filers) |
|---|---|---|----------------|----------------------------|
| Northern Cameron Co   | ounty Democrats   |   | 00085609       |                            |
| 14 COMMITTEE<br>ACTIVITY  | 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  |                |                            |
|   | Measures  (Describe by date and location of election and nature of issue.)              |   |                |                            |
|   |   | B. Opposed  |                |                            |
|   | Officeholders     Assisted     (Identify by name or, if applicable, classify by party.) |   |                |                            |
| 15 CONTRIBUTION<br>TOTALS   | PLEDGES, LOANS,<br>CONTRIBUTIONS N<br>X check here if this report                       | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold | \$             | 0.00                       |
|   | 2. TOTAL POLITICA<br>(OTHER THAN PLE  | AL CONTRIBUTIONS<br>EDGES, LOANS, OR GUARANTEES OF LOANS)   | \$             | 2,027.00                   |
| EXPENDITURE<br>TOTALS   | 3. TOTAL UNITEMIZE  | D POLITICAL EXPENDITURES  | \$             | 0.00                       |
|   | 4. TOTAL POLITICA   | L EXPENDITURES  | \$             | 7,777.60                   |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITICAL OF THE REPORTIN  | CONTRIBUTIONS MAINTAINED AS OF THE LAST<br>G PERIOD   | DAY \$         | 13,374.53                  |
| OUTSTANDING<br>LOAN TOTALS  | •   | AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD   | THE \$         | 0.00                       |
| 16 AFFIDAVIT  |   |   | I              |                            |
|   |   | I swear, or affirm, under penalty of pe<br>true and correct and includes all infor<br>under Title 15, Election Code.                  |                |                            |
|   |   | Mrs. Nancy  | Fly Guenther   |                            |
|   |   | Signature of Car  | mpaign Treasu  | rer                        |
| AFFIX NOTAR   | Y STAMP / SEAL ABOVE  |   |                |                            |
|   |   | , th  | nis the        | day                        |
| of  | , 20, to certify  | which, witness my hand and seal of office.  |                |                            |
| Signature of officer a  | administering oath  | Printed name of officer administering oath  | Title of offic | cer administering oath     |

## **SUBTOTALS - GPAC**

# FORM **GPAC**COVER SHEET PG 3

|              |        |  |              |                   | 3 of 20   |
|--------------|--------|--|--------------|-------------------|-----------|
| 17 CC        | MMITTE | E NAME   | 18 Filer ID  | (Ethics Commissio | n Filers) |
| l            |        | Cameron County Democrats   | 00085609     | (                 |           |
| <b>19</b> SC | HEDULI | SUBTOTALS  |              |                   |           |
| NA           | ME OF  | SCHEDULE   |              | SUBTOTAL A        | MOUNT     |
| 1.           | Х      | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      |              | \$                | 2,027.00  |
| 2.           |        | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        |              | \$                |           |
| 3.           |        |  | \$           |                   |           |
| 4.           |        | PR   | \$           |                   |           |
| 5.           |        | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION | ATION OR     | \$                |           |
| 6.           |        | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG                        | ANIZATION    | \$                |           |
| 7.           |        | \$   |              |                   |           |
| 8.           |        | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (                      | ORGANIZATION | \$                |           |
| 9.           |        | SCHEDULE E: LOANS  |              | \$                |           |
| 10.          | X      | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION                    | S            | \$                | 7,777.60  |
| 11.          |        | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   |              | \$                |           |
| 12.          |        | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION                   | ONS          | \$                |           |
| 13.          |        | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      |              | \$                |           |
| 14.          |        | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION                 | ONS          | \$                |           |
| 15.          |        | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER          | RETURNED     | \$                |           |
|              |        |  |              |                   |           |

|   | MONEI                         | ARY POLITICAL C   | ONTRIBUTIO                                     | NS  | SCHEDULE A  | 1     |
|---|-------------------------------|---|--|---|---|-------|
|   | The Instru                    | ction Guide explains how  | to complete this fo                            | orm.  | 1 Total pages Schedule A1:<br>Sch: 1/10 Rpt: 4/20   |       |
| 2 | FILER NAME<br>Northern Car    | meron County Democrats  |  |   | <b>3</b> Filer ID (Ethics Commission Filer 00085609 | s)    |
| 4 | Date<br>10/19/2024            | <ul><li>5 Full name of contributor<br/>Aguayo, Miriam</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:                         | _   | 7 Amount of Contribution (\$) \$2                   | 20.00 |
| _ | Deinsinal                     | Harlingen, TX 78550   | <u>.                                      </u> | O Familia var (Can Institutations                   |   |       |
| 8 | Attorney                      | pation / Job title (See Instructions  | )  | 9 Employer (See Instructions US Federal Public Defe |   |       |
|   | Date<br>10/08/2024            | Full name of contributor Aviles, Roel Contributor address; City; St                                     | out-of-state PAC (ID#:                         | )   | Amount of Contribution (\$)<br>\$2                  | 20.00 |
|   | Principal occu<br>Banker      | Olmito, TX 78575  upation / Job title (See Instructions   | 5)   | Employer (See Instructions                          | 5)  |       |
|   | Date 09/28/2024               | Full name of contributor Ballesteros, Esther Contributor address; City; St                              | out-of-state PAC (ID#:                         | )   | Amount of Contribution (\$) \$1                     | 17.00 |
|   | Principal occu                | Harlingen, TX 78553  upation / Job title (See Instructions  | <u>,                                    </u>   | Employer (See Instructions                          |   |       |
|   | Regional Pla                  |   | ,  | Cameron County                                      |   |       |
|   | Date<br>09/28/2024            | Full name of contributor Ballesteros, Raquel Contributor address; City; St Harlingen, TX 78553          | out-of-state PAC (ID#:                         |   | Amount of Contribution (\$)<br>\$2                  | 20.00 |
|   | Principal occu<br>Program Spe | pation / Job title (See Instructions  | )  | Employer (See Instructions Texas HHSC               | S)  |       |
|   | Date<br>10/12/2024            | Full name of contributor Castillo, Laura Contributor address; City; St Harlingen, TX 78552              | out-of-state PAC (ID#:                         |   | Amount of Contribution (\$) \$5                     | 50.00 |
|   | Principal occu<br>EO Coordina | ipation / Job title (See Instructions<br>ator   | )  | Employer (See Instructions                          | 5)  |       |
|   |                               |   |  |   |   |       |

|   | MONET                         | ARY POLITICAL CO   | ONTRIBUTION                           | S   |   | SCHEDUL   | E <b>A1</b> |
|---|-------------------------------|--|---------------------------------------|---|---|---|-------------|
|   | The Instru                    | ction Guide explains how to  | o complete this forn                  | n.  | 1 | Total pages Schedule A1:<br>Sch: 2/10 Rpt: 5/20 |             |
| 2 | FILER NAME<br>Northern Car    | meron County Democrats   |                                       |   | 3 | Filer ID (Ethics Commission 00085609            | n Filers)   |
| 4 | Date<br>10/26/2024            | <ul><li>5 Full name of contributor</li><li>Cruz, Nyssa Michelle</li><li>6 Contributor address; City; State</li></ul> | out-of-state PAC (ID#:<br>e; Zip Code | )   | 7 | Amount of Contribution (\$)                     | \$10.00     |
| 8 | Principal occu                | Weslaco, TX 78596 pation / Job title (See Instructions)  | اوا                                   | Employer (See Instructions                        | ) |   |             |
| Ŭ | Educator                      | pation 7 oob title (See Histadions)  |                                       | WISD  | , |   |             |
|   | Date<br>09/28/2024            | Full name of contributor  Garcia, René  Contributor address; City; State   | out-of-state PAC (ID#:                | )   |   | Amount of Contribution (\$)                     | \$20.00     |
|   |                               | San Benito, TX 78586   | ļ                                     |   |   |   |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |                                       | Employer (See Instructions Not Employed           | ) |   |             |
|   | Date<br>09/28/2024            | Full name of contributor Getner Garza, Cynthia Contributor address; City; State                                      | out-of-state PAC (ID#:                |   |   | Amount of Contribution (\$)                     | \$10.00     |
|   |                               | Harlingen, TX 78552  |                                       |   |   |   |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |                                       | Employer (See Instructions Not Employed           | ) |   |             |
|   | Date<br>10/19/2024            | Full name of contributor Gonzalez, Juan Contributor address; City; State Harlingen, TX 78550                         | out-of-state PAC (ID#:e; Zip Code     |   |   | Amount of Contribution (\$)                     | \$15.00     |
|   | Principal occu<br>Attorney    | pation / Job title (See Instructions)  |                                       | Employer (See Instructions<br>Federal             | ) |   |             |
|   | Date<br>09/28/2024            | Full name of contributor Gonzalez, Karin Contributor address; City; State Harlingen, TX 78550                        | out-of-state PAC (ID#:                |   |   | Amount of Contribution (\$)                     | \$100.00    |
|   | Principal occu<br>Teacher     | pation / Job title (See Instructions)  |                                       | Employer (See Instructions Diocese of Brownsville | ) |   |             |
|   |                               |  | I                                     |   |   |   |             |

|   | MONEI                         | ARY POLITICAL C   | CONTRIBUTION           | NS  | SCHEDULE  | <b>A1</b> |
|---|-------------------------------|---|------------------------|---|---|-----------|
|   | The Instru                    | ction Guide explains how  | to complete this fo    | rm.   | 1 Total pages Schedule A1:<br>Sch: 3/10 Rpt: 6/20 |           |
| 2 | FILER NAME Northern Ca        | meron County Democrats  |                        |   | 3 Filer ID (Ethics Commission Fi 00085609         | lers)     |
| 4 | Date<br>10/08/2024            | 5 Full name of contributor<br>Gonzalez, Vicente<br>6 Contributor address; City; St              | out-of-state PAC (ID#: | )   | 7 Amount of Contribution (\$)                     | \$150.00  |
|   |                               | McAllen, TX 78501   |                        |   |   |           |
| 8 | Principal occu<br>US Rep      | pation / Job title (See Instructions  | ) [9                   | Employer (See Instructions US House of Represent  |   |           |
|   | Date<br>10/09/2024            | Full name of contributor Gracia, Jonathan Contributor address; City; St                         | out-of-state PAC (ID#: |   | Amount of Contribution (\$)                       | 3150.00   |
|   | Dain single                   | Brownsville, TX 78520   | , 1                    | Faralasa (Caralasatasatiana                       | <u> </u>  |           |
|   | Attorney                      | pation / Job title (See Instructions  | )                      | Employer (See Instructions<br>The Gracia Law Firm | 5)  |           |
|   | Date<br>10/14/2024            | Full name of contributor Guenther, Nancy Contributor address; City; St                          | out-of-state PAC (ID#: | )   | Amount of Contribution (\$)                       | \$10.00   |
|   |                               | Harlingen, TX 78552   |                        |   |   |           |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed  |                        | Employer (See Instructions<br>Self                | <del>)</del>                                      |           |
|   | Date<br>10/08/2024            | Full name of contributor Guevara, John Contributor address; City; St Harlingen, TX 78550        | out-of-state PAC (ID#: | )   | Amount of Contribution (\$)                       | \$50.00   |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed  |                        | Employer (See Instructions Not Employed           | )   |           |
|   | Date<br>10/15/2024            | Full name of contributor Guillen Jr, Alfonso Contributor address; City; St Santa rosa, TX 78593 | out-of-state PAC (ID#: |   | Amount of Contribution (\$)                       | \$25.00   |
|   | Principal occu<br>Writer      | pation / Job title (See Instructions  |                        | Employer (See Instructions Freelance              | s)  |           |
|   |                               |   | ·                      |   |   |           |

|   | MONET                         | ARY POLITICAL C  | CONTRIBUTION                            | IS<br>                                  |         | SCHEDUL   | E <b>A1</b> |
|---|-------------------------------|--|---|---|---------|---|-------------|
|   | The Instru                    | ction Guide explains how   | to complete this for                    | m.                                      | 1       | Total pages Schedule A1:<br>Sch: 4/10 Rpt: 7/20 |             |
| 2 | FILER NAME<br>Northern Ca     | meron County Democrats   |   |   | 3       | Filer ID (Ethics Commission 00085609            | n Filers)   |
| 4 | Date<br>10/12/2024            | <ul><li>5 Full name of contributor<br/>Hamilton, Joyce</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:<br>ate; Zip Code |   | 7       | Amount of Contribution (\$)                     | \$10.00     |
|   |                               | HARLINGEN, TX 78552  |   |   |         |   |             |
| 8 | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed   | 9                                       | Employer (See Instructions Not Employed | 5)      |   |             |
|   | Date<br>09/27/2024            | Full name of contributor Hinojosa-Parsons, Sara Contributor address; City; St                            | out-of-state PAC (ID#:<br>ate; Zip Code | )                                       |         | Amount of Contribution (\$)                     | \$50.00     |
|   | Principal occu                | Harlingen, TX 78550 pation / Job title (See Instructions   | , I                                     | Employer (See Instructions              | <u></u> |   |             |
|   | Not Employe                   |  |   | Not Employed                            | >)      |   |             |
|   | Date<br>10/10/2024            | Full name of contributor Hinojosa-Parsons, Sara Contributor address; City; St                            | out-of-state PAC (ID#:                  | )                                       | •       | Amount of Contribution (\$)                     | \$20.00     |
|   |                               | Harlingen, TX 78550  |   |   |         |   |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed   | ()                                      | Employer (See Instructions Not Employed | 5)      |   |             |
|   | Date<br>10/15/2024            | Full name of contributor Holland, Hilda Contributor address; City; St Harlingen, TX 78553                | out-of-state PAC (ID#:ate; Zip Code     | )                                       |         | Amount of Contribution (\$)                     | \$100.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions   | )                                       | Employer (See Instructions Not Employed | 5)      |   |             |
|   | Date<br>10/03/2024            | Full name of contributor Howell, Gene Contributor address; City; St Harlingen, TX 78552                  | out-of-state PAC (ID#:ate; Zip Code     |   |         | Amount of Contribution (\$)                     | \$10.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed   | ()                                      | Employer (See Instructions Not Employed | 5)      |   |             |
|   |                               |  | <b>'</b>                                |   |         |   |             |

|   | MONET                         | ARY POLITICAL C  | CONTRIBUTIO                              | N<br>_ | IS   |                | SCHEDUL   | E <b>A1</b> |
|---|-------------------------------|--|--|--------|--|----------------|---|-------------|
|   | The Instru                    | ction Guide explains how   | to complete this fo                      | orr    | n.   | 1              | Total pages Schedule A1:<br>Sch: 5/10 Rpt: 8/20 |             |
| 2 | FILER NAME<br>Northern Ca     | meron County Democrats   |  |        |  | 3              | Filer ID (Ethics Commission 00085609            | n Filers)   |
| 4 | Date<br>10/08/2024            | <ul><li>5 Full name of contributor<br/>Ingram, Tania</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:_<br>ate; Zip Code |        | )  | 7              | Amount of Contribution (\$)                     | \$20.00     |
|   |                               | Humble, TX 77346   |  |        |  |                |   |             |
| 8 | Principal occu<br>Consultant  | pation / Job title (See Instructions   | )  | 9      | Employer (See Instructions Self            | 5)             |   |             |
|   | Date<br>10/01/2024            | Full name of contributor Jose Manuel Martinez Ca Contributor address; City; St                         |  |        | )  |                | Amount of Contribution (\$)                     | \$150.00    |
|   | Principal occu                | McAllen, TX 78503 pation / Job title (See Instructions   | )  |        | Employer (See Instructions                 | <u> </u><br>s) |   |             |
|   | Date<br>10/17/2024            | Full name of contributor Lozano, Tammy  Contributor address; City; St                                  | out-of-state PAC (ID#:_                  |        |  |                | Amount of Contribution (\$)                     | \$45.00     |
|   |                               | Harlingen, TX 78550 pation / Job title (See Instructions   | )  |        | Employer (See Instructions                 | <u> </u><br>s) |   |             |
|   | Manager  Date 09/28/2024      | Full name of contributor  Mares, SanJaunita  Contributor address; City; St                             | out-of-state PAC (ID#:_                  |        | Chenega                                    |                | Amount of Contribution (\$)                     | \$17.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions   | )  |        | Employer (See Instructions<br>Not Employed | 5)             |   |             |
|   | Date<br>10/12/2024            | Full name of contributor McShan, Lola Contributor address; City; St Harlingen TX, TX 78550             | out-of-state PAC (ID#:_                  |        | )  |                | Amount of Contribution (\$)                     | \$25.00     |
|   | Principal occu<br>retired     | pation / Job title (See Instructions   | )  |        | Employer (See Instructions retired         | 5)             |   |             |
|   |                               |  |  |        |  |                |   |             |

|   | MONET                         | ARY POLITICAL (   | CONTRIBUTIO             | Ν   | S  |        | SCHEDULE  | <b>■ A1</b> |
|---|-------------------------------|---|-------------------------|-----|--|--------|---|-------------|
|   | The Instru                    | ction Guide explains hov  | to complete this fo     | orr | n.                                       | 1      | Total pages Schedule A1:<br>Sch: 6/10 Rpt: 9/20 |             |
| 2 | FILER NAME Northern Car       | meron County Democrats  |                         |     |  | 3      | Filer ID (Ethics Commission 00085609            | ı Filers)   |
| 4 | Date<br>10/03/2024            | <ul><li>5 Full name of contributor<br/>Mendoza, Amelia</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#:  |     | )  | 7      | Amount of Contribution (\$)                     | \$85.00     |
| _ | Deireitad                     | Austin, TX 78741  |                         | _   | Faralas as (O. a. la atros ticos         |        |   |             |
| 8 | Manager                       | pation / Job title (See Instruction:  | 5)                      | 9   | Employer (See Instructions<br>HHS        | 5)     |   |             |
|   | Date<br>10/19/2024            | Full name of contributor<br>Mendoza, Brian<br>Contributor address; City; S                              |                         |     | )  |        | Amount of Contribution (\$)                     | \$20.00     |
|   | Principal occu                | Harlingen, TX 78552 pation / Job title (See Instructions  | s)                      |     | Employer (See Instructions               | <br>s) |   |             |
|   | Nursing                       | `   | ,                       |     | Rgv Wound care                           | ,      |   |             |
|   | Date<br>10/08/2024            | Full name of contributor<br>Mendoza, Elsa<br>Contributor address; City; S                               | out-of-state PAC (ID#:_ |     | )  | •      | Amount of Contribution (\$)                     | \$50.00     |
|   |                               | Pearland, TX 77584  |                         |     |  |        |   |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructionsed  | 5)                      |     | Employer (See Instructions Not Employed  | 5)     |   |             |
|   | Date<br>10/15/2024            | Full name of contributor  Monasmith, Estella  Contributor address; City; S  Harlingen, TX 78550         |                         |     | )  | •      | Amount of Contribution (\$)                     | \$50.00     |
|   | -                             | pation / Job title (See Instruction:<br>her/entrepreneur  | 5)                      |     | Employer (See Instructions Self employed | 5)     |   |             |
|   | Date<br>10/22/2024            | Full name of contributor  Monasmith, Estella  Contributor address; City; S  Harlingen, TX 78550         | out-of-state PAC (ID#:_ |     | )  | •      | Amount of Contribution (\$)                     | \$20.00     |
|   |                               | pation / Job title (See Instructions<br>her/entrepreneur  | 5)                      |     | Employer (See Instructions Self employed | 5)     |   |             |
|   |                               |   |                         |     |  |        |   |             |

|   | MONET                         | ARY POLITICAL CONTRIBUTION   | ONS                                     |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|---|----------------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete this  | form.                                   | 1              | Total pages Schedule A1:<br>Sch: 7/10 Rpt: 10/20 |             |
| 2 | FILER NAME<br>Northern Car    | meron County Democrats   |   | 3              | Filer ID (Ethics Commission 00085609             | n Filers)   |
| 4 | Date<br>10/12/2024            | <ul> <li>Full name of contributor</li></ul>  | ÷)                                      | 7              | Amount of Contribution (\$)                      | \$200.00    |
| 8 | Principal occu                | Brownsville, TX 78520 pation / Job title (See Instructions)  | 9 Employer (See Instructions            | ;)<br>         |  |             |
| _ | Date                          | Full name of contributor  ut-of-state PAC (ID#   |   | <u></u>        | Amount of Contribution (\$)                      | #10.00      |
|   | 10/14/2024                    | Mosimann, Eleanor  Contributor address; City; State; Zip Code  |   |                |  | \$10.00     |
|   | Principal occu<br>Not Employe | Harlingen, TX 78550  pation / Job title (See Instructions) ed  | Employer (See Instructions Not Employed | <u> </u><br>;) |  |             |
|   | Date<br>10/12/2024            | Full name of contributor out-of-state PAC (ID# Ochoa, Oziel  Contributor address; City; State; Zip Code                          | ÷:)                                     |                | Amount of Contribution (\$)                      | \$23.00     |
|   |                               | Harlingen, TX 78552 pation / Job title (See Instructions)  | Employer (See Instructions              | <u> </u><br>5) |  |             |
|   | Date<br>10/24/2024            | Full name of contributor out-of-state PAC (ID# Partida, Renee  Contributor address; City; State; Zip Code  San Benito, TX 78586  |   |                | Amount of Contribution (\$)                      | \$65.00     |
|   | Principal occu<br>Marketing   | pation / Job title (See Instructions)  | Employer (See Instructions<br>Self      | 5)             |  |             |
|   | Date<br>10/19/2024            | Full name of contributor out-of-state PAC (ID# Perez, Maria Elvia Contributor address; City; State; Zip Code  Mercedes, TX 78570 | t:)                                     |                | Amount of Contribution (\$)                      | \$60.00     |
|   | Principal occu<br>retired     | pation / Job title (See Instructions)  | Employer (See Instructions retired      | 5)             |  |             |
|   |                               |  |   |                |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBU  | ITION   | IS  |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|---------|---|----------------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete t  | his for | m.  | 1              | Total pages Schedule A1:<br>Sch: 8/10 Rpt: 11/20 |             |
| 2 | FILER NAME Northern Car       | meron County Democrats  |         |   | 3              | Filer ID (Ethics Commission 00085609             | n Filers)   |
| 4 | Date 09/28/2024               | <ul> <li>Full name of contributor</li></ul>   |         |   | 7              | Amount of Contribution (\$)                      | \$15.00     |
| _ | Delicalization                | Mercedes, TX 78570  |         | Faralagae (Octobration                    |                |  |             |
| 8 | Not Employe                   | pation / Job title (See Instructions)<br>ed   | 9       | Employer (See Instructions Not Employed   | 5)             |  |             |
|   | Date<br>10/12/2024            | Contributor address; City; State; Zip Code  |         | )   |                | Amount of Contribution (\$)                      | \$20.00     |
|   | Principal occu                | Olmito, TX 78575 pation / Job title (See Instructions)  |         | Employer (See Instructions                | <u> </u><br>s) |  |             |
|   | Not Employe                   |   |         | Not Employed                              | ,              |  |             |
|   | Date<br>09/30/2024            | Full name of contributor out-of-state PAC Ruiz, Corina Contributor address; City; State; Zip Code                           | C (ID#: |   |                | Amount of Contribution (\$)                      | \$20.00     |
|   |                               | Harlingen, TX 78550   |         |   |                |  |             |
|   | Principal occu<br>Teacher     | pation / Job title (See Instructions)   |         | Employer (See Instructions RISD           | 5)             |  |             |
|   | Date<br>10/01/2024            | Full name of contributor out-of-state PAC Ruiz, Gustavo Contributor address; City; State; Zip Code Harlingen, TX 78550      |         | )   |                | Amount of Contribution (\$)                      | \$100.00    |
|   | Principal occu<br>Commission  | pation / Job title (See Instructions)<br>er   |         | Employer (See Instructions Cameron County | 5)             |  |             |
|   | Date<br>10/22/2024            | Full name of contributor out-of-state PAC Santillan, Nathan Contributor address; City; State; Zip Code  Harlingen, TX 78550 |         |   | •              | Amount of Contribution (\$)                      | \$45.00     |
|   | Principal occu<br>Sales Assoc | pation / Job title (See Instructions)<br>iate   |         | Employer (See Instructions Kohls          | s)             |  |             |
|   |                               |   | l       |   |                |  |             |

|   | MONET                         | ARY POLITICAL (  | CONTRIBUTIO             | N<br> | S                                       |         | SCHEDULI   | <b>■ A1</b> |
|---|-------------------------------|--|-------------------------|-------|---|---------|--|-------------|
|   | The Instru                    | ction Guide explains hov   | to complete this f      | orr   | n.                                      | 1       | Total pages Schedule A1:<br>Sch: 9/10 Rpt: 12/20 |             |
| 2 | FILER NAME<br>Northern Ca     | meron County Democrats   |                         |       |   | 3       | Filer ID (Ethics Commission 00085609             | Filers)     |
| 4 | Date<br>10/02/2024            | <ul><li>5 Full name of contributor</li><li>Vargas, Ebethier</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#:_ |       | )                                       | 7       | Amount of Contribution (\$)                      | \$50.00     |
|   |                               | Harlingen TX, TX 78550   |                         |       |   |         |  |             |
| 8 | Principal occu<br>Business Ov | pation / Job title (See Instructions<br>vner   | 5)                      | 9     | Employer (See Instructions self         | 5)      |  |             |
|   | Date<br>10/14/2024            | Full name of contributor Vela, Salvador Contributor address; City; S   |                         |       | )                                       | •       | Amount of Contribution (\$)                      | \$15.00     |
|   | Principal occu                | San Benito, TX 78586 pation / Job title (See Instructions  | <u> </u>                |       | Employer (See Instructions              | -/-<br> |  |             |
|   | Not Employe                   |  | <i>&gt;)</i>            |       | Not Employed                            | )<br>)  |  |             |
|   | Date<br>09/28/2024            | Full name of contributor Velazquez, Wandy Contributor address; City; S                                       | out-of-state PAC (ID#:_ |       | )                                       | •       | Amount of Contribution (\$)                      | \$20.00     |
|   |                               | Harlingen, TX 78552  |                         |       |   |         |  |             |
|   |                               | pation / Job title (See Instructions rector for Enrollment Services  |                         |       | Employer (See Instructions UTRGV SOM    | 5)      |  |             |
|   | Date<br>09/28/2024            | Full name of contributor Ventrello, Jill Contributor address; City; S Harlingen, TX 78550                    | out-of-state PAC (ID#:_ |       | )                                       |         | Amount of Contribution (\$)                      | \$20.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed   | 5)                      |       | Employer (See Instructions Not Employed | 5)      |  |             |
|   | Date<br>10/22/2024            | Full name of contributor Zamarron, Maria Contributor address; City; S Harlingen, TX 78550                    | out-of-state PAC (ID#:_ |       |   |         | Amount of Contribution (\$)                      | \$10.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructionsed   | 5)                      |       | Employer (See Instructions Not Employed | 5)      |  |             |
|   |                               |  |                         |       |   |         |  |             |

| ARY POLITICAL CONTRIBUTION                                     | ONS   | SCHEDULE A1   |
|--|---|---|
| ction Guide explains how to complete this                      | form.   | 1 Total pages Schedule A1:<br>Sch: 10/10 Rpt: 13/20 |
| ımeron County Democrats  |   | 3 Filer ID (Ethics Commission Filers) 00085609      |
| Zamarron, Veronica   |   | 7 Amount of Contribution (\$) \$10.00               |
| Harlingen, TX 78550 upation / Job title (See Instructions)     | 9 Employer (See Instruction:  | s)  |
| eacher   | Harlingen CISD  |   |
| Zamarron, Veronica  Contributor address; City; State; Zip Code |   | Amount of Contribution (\$)<br>\$5.00               |
| upation / Job title (See Instructions) eacher                  | Employer (See Instructions Harlingen CISD                             | s)  |
|  |   |   |
|  | tion Guide explains how to complete this  meron County Democrats    5 | ### Summeron County Democrats    5                  |

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

sement Solicitation/Fundraising Expense
pense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a extragor and listed above)

| Candidate/Officeholder/Politica<br>Credit Card Payment          | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|---|---|
| 1 Total pages Schedule F1:                                      | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
| Sch: 1/7 Rpt: 14/20   | Northern Cameron County Democrats 00085609  |
| 4 Date  | 5 Payee name  |
| 10/08/2024  | AACDA   |
| 6 Amount (\$)   | 7 Payee address; City; State; Zip Code  |
| \$350.00  | 925 W. Pierce   |
|   |   |
| Expenditure from corporate funds                                | Harlingen, TX 78550   |
| 8 PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
| OF<br>EXPENDITURE   | Event Expense Check if travel outside of Texas. Complete Schedule T.  |
|   | Check if Austin, TX, officeholder living expense  Event space rental  |
|   | Event space remai   |
| Complete CNII V if direct                                       | Candidate/Officeholder name Office cought Office hold   |
| 9 Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held   |
| ,   |   |
| Date  | Payee name  |
| 10/07/2024  | Achtsam, Benson   |
| Amount (\$)   | Payee address; City; State; Zip Code  |
| \$100.00  | 2818 Swiss Pine Ct  |
| _   |   |
| Expenditure from corporate funds                                | Harlingen, TX 78550   |
| PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
| OF<br>EXPENDITURE   | Event Expense Check if travel outside of Texas. Complete Schedule T.  |
|   | Check if Austin, TX, officeholder living expense  Forum moderator   |
|   | Forum moderator   |
| 2 1 2 2 1 1 2 1   |   |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OI   | Candidate/Officeholder name Office sought Office held   |
|   |   |
| Date  | Payee name  |
| 09/30/2024  | Allegra Printing  |
| Amount (\$)   | Payee address; City; State; Zip Code  |
| \$396.55  | 1801 S 77 Sunshine Strip #B6  |
|   |   |
| Expenditure from corporate funds                                | Harlingen, TX 78550   |
| PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
| OF  | Advertising Expense  Check if travel outside of Texas. Complete Schedule T.   |
| EXPENDITURE   | Check if Austin, TX, officeholder living expense  |
|   | postcards   |
|   |   |
| Complete ONLY if direct   | Candidate/Officeholder name Office sought Office held   |
| expenditure to benefit C/OI                                     | 1   |
|   |   |
|   |   |
|   |   |

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |  |
|--|--|
| 1 Total pages Schedule F1:   | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)                               |
| Sch: 2/7 Rpt: 15/20  | Northern Cameron County Democrats  00085609                                      |
| 4 Date   | 5 Payee name   |
| 10/17/2024   | Alvarado, Maricella  |
| 6 Amount (\$)<br>\$240.00  | 7 Payee address; City; State; Zip Code<br>14070 Blum Lane                        |
| Expenditure from corporate funds   | Harlingen, TX 78552  |
| 8 PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF<br>EXPENDITURE  | Event Expense Check if travel outside of Texas. Complete Schedule T.             |
|  | Check if Austin, TX, officeholder living expense                                 |
|  | food   |
| 9 Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held                            |
| expenditure to benefit C/OI  |  |
| Date   | Payee name   |
| 09/30/2024   | Amazon Marketplace   |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| \$22.30  | 410 Terry Ave N  |
| Expenditure from corporate funds   | Seattle , WA 98109   |
| PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.       |
|  | Check if Austin, TX, officeholder living expense                                 |
|  | mailing labels   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI                                 | Candidate/Officeholder name Office sought Office held                            |
| Date   | Payeo namo   |
| 10/24/2024   | Payee name Cameron County Democratic Party                                       |
|  |  |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| \$1,900.00   | 1114 Stuart Place Road   |
| Expenditure from   | Suite C  |
| corporate funds  | Harlingen, TX 78552  |
| PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF<br>EXPENDITURE  | Contributions/Donations Made By  |
|  | Candidate/Officeholder/Political Committee                                       |
|  | donation   |
| Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held                            |
| expenditure to benefit C/OI  |  |
|  |  |
|  |  |
|  |  |

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

| Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |  |
|--|--|
| 4 Tatal manua Calcadula E4.  | · · · · · · · · · · · · · · · · · · ·  |
| 1 Total pages Schedule F1:<br>Sch: 3/7 Rpt: 16/20  | 2 FILER NAME Northern Cameron County Democrats 3 Filer ID (Ethics Commission Filers) 00085609                                |
|  | <u> </u>   |
| 4 Date   | 5 Payee name   |
| 10/08/2024   | Dollar Tree  |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code   |
| \$7.14   | 23969 Stuart Place Rd  |
| ¥  | 25555 5444.44 14455 144  |
| Expenditure from   |  |
| corporate funds  | Harlingen, TX 78552  |
| 8 PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| OF   | Event Expense  |
| EXPENDITURE  | Check if Austin, TX, officeholder living expense   |
|  | water  |
|  |  |
| 9 Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
| expenditure to benefit C/O   |  |
|  |  |
| Date   | Payee name   |
| 10/24/2024   | Facebook Advertising   |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| ` '  |  |
| \$200.00   | 1 Hacker Way   |
| Expenditure from   |  |
| corporate funds  | Menlo Park, CA 94025   |
| PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| OF   |  |
| EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|  | Facebook Ad  |
|  | , accesson / ta  |
|  |  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/O                               | Candidate/Officeholder name Office sought Office held  |
| experiulture to beliefft C/O   |  |
| Date   | Payee name   |
| 10/10/2024   | Fiesta Graphics  |
|  | ·  |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| \$324.75   | 205 Paredes Line Rd  |
|  |  |
| Expenditure from   | Brownsville, TX 78521  |
| corporate funds  | 1  |
| PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.   |
|  | Check if Austin, TX, officeholder living expense   |
|  | postcards  |
|  |  |
| Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
| expenditure to benefit C/O   | <del>1</del>   |
|  |  |
|  |  |
|  |  |

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |  |
|--|--|
| 1 Total pages Schedule F1:   | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
| Sch: 4/7 Rpt: 17/20  | Northern Cameron County Democrats  00085609  |
| 4 Date   | 5 Payee name   |
| 09/30/2024   | Fiesta Graphics  |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code   |
| \$396.55   | 205 Paredes Line Rd  |
|  |  |
| Expenditure from corporate funds   | Brownsville, TX 78521  |
| 8 PURPOSE  | 1  |
| OF   | (a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                                   |
|  | postcards  |
|  |  |
| Complete ONLY if direct expenditure to benefit C/OI  | Candidate/Officeholder name Office sought Office held  |
| Date   | Payee name   |
| 09/30/2024   | Frost Bank   |
|  |  |
| Amount (\$)  |  |
| \$5.00   | 514 W Tyler Ave  |
| Expenditure from corporate funds   | Harlingen, TX 78550  |
| PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| OF<br>EXPENDITURE  | Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.  |
| EXI ENDITORE   | Check if Austin, TX, officeholder living expense   |
|  | Service charge   |
|  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI                                 | Candidate/Officeholder name Office sought Office held  |
| Date   | Payee name   |
| 10/18/2024   | Guajardo, Patricia   |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| \$75.00  | PO Box 531123  |
| Ψ10.00   | 1 0 50% 001120   |
| Expenditure from corporate funds   | Harlingen, TX 78553  |
| PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| OF<br>EXPENDITURE  | Event Expense  |
| D. LIBITORE  | Check if Austin, TX, officeholder living expense   |
|  | A/V help   |
|  |  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OI                              | Candidate/Officeholder name Office sought Office held  |
| experiorare to benefit C/OI  |  |
|  |  |
|  |  |
|  |  |

### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

| Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |   |
|--|---|
|  |   |
| 1 Total pages Schedule F1:   |   |
| Sch: 5/7 Rpt: 18/20  | Northern Cameron County Democrats 00085609  |
| 4 Date   | 5 Payee name  |
| 09/30/2024   | H-E-B   |
| 03/30/2024   |   |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code  |
| \$8.05   | 613 S. Expressway 83  |
|  |   |
| Expenditure from   |   |
| corporate funds  | Harlingen, TX 78550   |
| 8 PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
| OF   | Event Expense   |
| EXPENDITURE  | Check if Austin, TX, officeholder living expense  |
|  | food  |
|  |   |
|  |   |
| 9 Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held   |
| expenditure to benefit C/OI  | 1   |
| Date   | Davies name   |
|  | Payee name  |
| 10/22/2024   | Lowe's  |
| Amount (\$)  | Payee address; City; State; Zip Code  |
| \$139.00   | 4705 South Expressway #77/83  |
| Ψ133.00  | 4700 South Expressivaly #17705  |
| Expenditure from   |   |
| corporate funds  | Harlingen, TX 78550   |
| PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
| OF   |   |
| EXPENDITURE  | Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                  |
|  | storage boxes   |
|  | Storage boxes   |
|  |   |
| Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held   |
| expenditure to benefit C/OI  | 1   |
| Data   |   |
| Date   | Payee name  |
| 10/01/2024   | Prime Pleasure Meat Market  |
| Amount (\$)  | Payee address; City; State; Zip Code  |
| \$270.00   | 182 E Kimball Ave   |
| Ψ210.00  | 102 E MITIDAII AVG  |
| Expenditure from   |   |
| corporate funds  | Raymondville, TX 78580  |
| PURPOSE  | (a) Cotogony (a. a. (b.) Description   |
| OF   | (a) Category (See Categories listed at the top of this schedule)  (b) Description  Fivent Expense  Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE  | Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                                    |
|  |   |
|  | Meat  |
|  |   |
| Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held   |
| expenditure to benefit C/OI  | <del> </del>  |
|  |   |
|  |   |
|  |   |
|  |   |

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

| Contributions/ Donations Made B<br>Candidate/Officeholder/Politica<br>Credit Card Payment | /- Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|---|---|
| 4. Tatalmana C. I. I. T.  |   |
| 1 Total pages Schedule F1:  |   |
| Sch: 6/7 Rpt: 19/20   | Northern Cameron County Democrats 00085609  |
| 4 Date  | 5 Payee name  |
| 09/30/2024  | RGV Media Group   |
| 6 Amount (\$)   | 7 Payee address; City; State; Zip Code  |
| \$19.55   | 2100 Central Blvd   |
| , , , ,   |   |
| Expenditure from  | Brownsvilla, TV 79520   |
| corporate funds   | Brownsville, TX 78520   |
| 8 PURPOSE<br>OF   | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
| EXPENDITURE   | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  |
|   | Stickers  |
|   | Suchers   |
| O Complete ONLY !! -!!  | Condidate/Officeholder name   |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O                               | Candidate/Officeholder name Office sought Office held   |
| p = 1 = 2 = 2 = 1 = 0   0   |   |
| Date  | Payee name  |
| 10/04/2024  | Sam's Club  |
| Amount (\$)   | Payee address; City; State; Zip Code  |
| \$206.00  | 621 US-77 Frontage Rd   |
|   |   |
| Expenditure from  | Harlingen TV 78550  |
| corporate funds   | Harlingen, TX 78550   |
| PURPOSE<br>OF   | (a) Category (See Categories listed at the top of this schedule)  (b) Description   |
| EXPENDITURE   | Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  |
|   | food  |
|   | 1000  |
| Complete ONLY if direct   | Candidate/Officeholder name Office sought Office hold   |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/O                              | Candidate/Officeholder name Office sought Office held   |
| ,   |   |
| Date  | Payee name  |
| 10/24/2024  | State Farm Insurance  |
| Amount (\$)   | Payee address; City; State; Zip Code  |
| \$89.08   | 7500 State Hwy 71   |
|   | Ste 102   |
| Expenditure from  | Austin, TX 78735  |
| corporate funds   |   |
| PURPOSE<br>OF   | (a) Category (See Categories listed at the top of this schedule)  (b) Description   |
| EXPENDITURE   | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense   |
|   | renter's insurance  |
|   | Tenter 3 insurance  |
| Complete CNII V if direct   | Candidate/Officeholder name Office cought Office hold   |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/O                              | Candidate/Officeholder name Office sought Office held   |
| ,   |   |
|   |   |
|   |   |
|   |   |

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officeholder/Politica<br>Credit Card Payment        | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.  |  |
|---|--|--|
| 1 Total pages Schedule F1:                                    | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |  |
| Sch: 7/7 Rpt: 20/20   | Northern Cameron County Democrats 00085609   |  |
| 4 Date  | 5 Payee name   |  |
| 10/01/2024  | USPS   |  |
| 6 Amount (\$)   | 7 Payee address; City; State; Zip Code   |  |
| \$2,464.00  | USPS   |  |
|   | 1502 NEW COMBES HWY  |  |
| Expenditure from corporate funds                              | Harlingen, TX 78551  |  |
| 8 PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description   |  |
| OF<br>EXPENDITURE   | Advertising Expense Check if travel outside of Texas. Complete Schedule T.   |  |
|   | Check if Austin, TX, officeholder living expense  postage  |  |
|   | postage  |  |
| 9 Complete ONLY if direct                                     | Candidate/Officeholder name Office sought Office held  |  |
| expenditure to benefit C/OI                                   | <del>-</del>   |  |
| Date  | Payee name   |  |
| 09/27/2024  | VISTAPRINT   |  |
| Amount (\$)   | Payee address; City; State; Zip Code   |  |
| \$497.38  | 275 Wyman St.  |  |
|   |  |  |
| Expenditure from corporate funds                              | Walton, MA 02451   |  |
| PURPOSE<br>OF   | (a) Category (See Categories listed at the top of this schedule) (b) Description   |  |
| EXPENDITURE   | Advertising Expense Check if travel outside of Texas. Complete Schedule T.   |  |
|   | Check if Austin, TX, officeholder living expense  postcards  |  |
|   | postourus  |  |
| Complete ONLY if direct                                       | Candidate/Officeholder name Office sought Office held  |  |
| expenditure to benefit C/OI                                   |  |  |
| Date  | Payee name   |  |
| 10/01/2024  | Valero   |  |
| Amount (\$)   | Payee address; City; State; Zip Code   |  |
| \$67.25   | 1837 STUART PLACE RD   |  |
| φυ1.25  | 1007 STOAKT FEACE NO   |  |
| Expenditure from corporate funds                              | Harlingen, TX 78552  |  |
| PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description   |  |
| OF<br>EXPENDITURE   | Event Expense  |  |
| EXPENDITURE   | Check if Austin, TX, officeholder living expense   |  |
|   | water  |  |
| Operation Children  | Our Highest (Office health a group of the control o |  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held  |  |
| ·   |  |  |
|   |  |  |
|   |  |  |