#### 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) 00088855 3 COMMITTEE NAME **OFFICE USE ONLY** Hidalgo County Democrats PAC Date Received **ELECTRONICALLY FILED** 10/28/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1150 N. Loop 1604 West Date Hand-delivered or Date Postmarked Ste. 108-230 Change of Address San Antonio, TX 78248 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Christopher NAME NICKNAME LAST **SUFFIX** Koob STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1150 N. Loop 1604 West STREET **ADDRESS** Ste. 108-230 (Residence or Business) San Antonio, TX 78248 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1150 N. Loop 1604 West MAILING **ADDRESS** Ste. 108-230 San Antonio, TX 78248 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 552-0221 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)
Hidalgo County Democ	rats PAC		00088855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(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.)	A. Supported  B. Opposed		
		э. орросси		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,750.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	123,277.22
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	11,242.23
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		I	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Christop	her Koob	
		Signature of Car	npaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, th	nis the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of office	cer administering oath

## **SUBTOTALS - GPAC**

# FORM **GPAC**COVER SHEET PG 3

		3 of 18
17 COMMITTEE NAME Hidalgo County Democrats PAC	<b>18</b> Filer ID 00088855	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. X SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR	R	\$ 7,750.00
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	<b>\$</b> 123,277.22
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

## SCHEDULE C1

	The Instruction Guide explains how to complete this form.			1	Total pages Schedule C1: Sch: 1/1 Rpt: 4/18
2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Hidalgo County Democrats PAC				00088855
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)
	09/30/2024		Texas Majority		\$7,750.00
		6	Corporation / Labor Organization address; City; State; Zip Code	•	
			Washington, DC 20003		

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Office O Polling E ense Printing Salaries	verhea Expense Expens /Wages	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1 Total pages Schedule F1:	2 EII ED NAMI		•			3	Filer ID	(Ethics Commission Filers)
Sch: 1/14 Rpt: 5/18		- unty Democrats PA	С				00088855	(Luics Commission Filers)
4 Date	5 Payee name							
10/15/2024	Best Buy							
6 Amount (\$) \$694.72	7 Payee addre		State; Zip C	ode				
Expenditure from corporate funds	Richfield, M	IN 55423						
8 PURPOSE OF EXPENDITURE		ee Categories listed at the top head/Rental Expen		(b)	<b>=</b>	, TX,	de of Texas. Com officeholder living	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		iceholder name	Office so	ught			Office he	eld
Date	Payee name							
10/17/2024	Best Buy							
Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
\$86.59	7601 Penn	Ave S						
Expenditure from corporate funds	Richfield, M	IN 55423						
PURPOSE OF EXPENDITURE		ee Categories listed at the top head/Rental Expen		(b)	_	, TX,	de of Texas. Com officeholder living	
Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office so	ught			Office he	eld
Date 10/25/2024	Payee name Best Buy							
Amount (\$) \$1,189.67	Payee addre 7601 Penn		State; Zip C	ode				
X Expenditure from corporate funds	Richfield, M	IN 55423						
PURPOSE OF EXPENDITURE		ee Categories listed at the to head/Rental Expen		(b)		, TX,	de of Texas. Com officeholder living	
Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office so	ught			Office he	eld

### SCHEDULE F1

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 2/14 Rpt: 6/18	Hidalgo County Democrats PAC 00088855
4 Date	5 Payee name
10/21/2024	Campaign Verify
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$95.00	PO Box 3554
Expenditure from	Weshington, DC 20007
corporate funds	Washington, DC 20007
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Software Subscription Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Software Subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
10/25/2024	Elias Law Group
	·
Amount (\$)	Payee address; City; State; Zip Code
\$333.38	250 Massachusetts Avenue NW
	Ste 400
X Expenditure from corporate funds	Washington, DC 20001
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Legal Services
	Legal Scrvices
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit Gree	·
Date	Payee name
10/11/2024	Exxon
Amount (\$)	Payee address; City; State; Zip Code
\$56.00	1600 N Bicentennial Blvd
Ψ30.00	1000 N Dicentennial Diva
Expenditure from	
corporate funds	McAlllen, TX 78501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/	Wages	s/Contract Labor		OTHER (enter a	a category not listed at	oove)
	oroun ouru r uymone		The Instruction Guide	explains how to co	omple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 3/14 Rpt: 7/18	Hidalgo Co	ounty Democrats PA	С				00088855		
4	Date	5 Payee name	9			•				
	10/04/2024	GDA Wins								
6	Amount (\$)	<b>7</b> Payee addr	ess; City;	State; Zip C	ode					
	\$15,151.94	1 1	necticut Ave NW							
	,,	Ste 11813								
Г	Expenditure from corporate funds		n, DC 20008							
<u> </u>	·				(1-)					
8	PURPOSE OF		See Categories listed at the to	p of this schedule)	(b)	Description	outoi	do of Toyon Con	nplete Schedule T.	
	EXPENDITURE	Printing E>	pense					officeholder livin	•	
						Printing				
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	ught			Office h	eld	
	expenditure to benefit C/OI	H								
H	Date	Payee name								
	10/15/2024	Galaviz, Li								
	Amount (\$)	Payee addr		State; Zip C	odo					
	\$440.90	<b>1</b>	oop 1604 West	State, Zip C	oue					
	Ψ440.90		•							
l	Expenditure from	Ste 108-23	-							
	corporate funds	San Anton	io, TX 78248							
	PURPOSE OF	1	See Categories listed at the to		(b)	Description				
	EXPENDITURE	Salaries/W	ages/Contract Labo	r		<b>=</b>		officeholder livin	nplete Schedule T.	
						Campaign Sta			9	
						, 3				
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	uaht			Office h	eld	
	expenditure to benefit C/O				J					
	Date	Payee name								
	09/30/2024	Garcia, Sa								
				State: 7in C	odo					
	Amount (\$)	Payee addr	•	State; Zip C	oue					
	\$2,257.42	l	oop 1604 West							
l	Expenditure from	Ste 108-23								
	corporate funds	San Anton	io, TX 78248							
	PURPOSE OF		See Categories listed at the to		(b)	Description				
	EXPENDITURE	Salaries/W	ages/Contract Labo	r				de of Texas. Con officeholder livin	nplete Schedule T.	
						Campaign Sta			g expense	
	Complete ONLY if direct	L Candidate/∩f	ficeholder name	Office so	l uaht			Office h	eld	
	expenditure to benefit C/O			555 000	9			20011		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B 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 Candidate/Officeholder/Politica Credit Card Payment	
4 Takal manage Calculula Edu	
1 Total pages Schedule F1: Sch: 4/14 Rpt: 8/18	2 FILER NAME3 Filer ID(Ethics Commission Filers)Hidalgo County Democrats PAC00088855
4 Date	5 Payee name
10/15/2024	Garcia, Saul
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,257.42	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/27/2024	GoDaddy.com
Amount (\$)	Payee address; City; State; Zip Code
\$82.78	2155 E. GoDaddy Way
Evnanditura from	
Expenditure from corporate funds	Tempe, AZ 85284
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Software Subscription  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Software Subscription
	Contract Cubestipation
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$43.68	1211 E Frontage Rd
Expenditure from corporate funds	Alamo, TX 78516
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete Chill V if all a	Condidate/Officeholder name Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Great Gara F ayment	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 5/14 Rpt: 9/18	Hidalgo County Democrats PAC		00088855	
4 Date	5 Payee name		•	
10/07/2024	HEB			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$64.41	1211 E Frontage Rd			
Expenditure from corporate funds	Alamo, TX 78516			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense	Check if trave	el outside of Texas. Com	
LAFENDITORE		. —	tin, TX, officeholder living	g expense
		Office Supp	illes	
9 Complete ONLY if direct	Candidate/Officeholder name Office co	ught	Office by	old.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soil	ugni	Office h	eiu
Date	Payee name			
10/17/2024	HEB			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$47.87	1211 E Frontage Rd			
Expenditure from				
corporate funds	Alamo, TX 78516			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense	. <del> </del>	el outside of Texas. Com tin, TX, officeholder livinç	
		Office Supp		у схренас
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office he	eld
expenditure to benefit C/OI	Н			
Date	Payee name			
10/15/2024	Home Depot			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$24.76	2455 Paces Ferry Rd SE			
,	,			
Expenditure from corporate funds	Atlanta, GA 30339			
PURPOSE		(b) Description		
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if trave	el outside of Texas. Com	plete Schedule T.
EXPENDITURE	Onice Overnead/Nental Expense	ı <b>—</b>	tin, TX, officeholder living	
		Office Supp	lies	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office he	eld
expenditure to benefit C/OI	п			

### 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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	2 Filer ID (Ethics Commission Filers)
1 Total pages Schedule F1: Sch: 6/14 Rpt: 10/18	2 FILER NAME Hidalgo County Democrats PAC  3 Filer ID (Ethics Commission Filers) 00088855
4 Date	5 Payee name
10/07/2024	Home Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$81.06	2455 Paces Ferry Rd SE
Expenditure from	Atlanta CA 20220
corporate funds	Atlanta, GA 30339
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/04/2024	Longhorn Organizing Strategies
Amount (\$)	Payee address; City; State; Zip Code
\$87,500.00	3120 Southwest Fwy
	Ste 101 PMB 693824
Expenditure from corporate funds	Houston, TX 77098
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Field Consulting
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/17/2024	Lowes
Amount (\$)	Payee address; City; State; Zip Code
\$24.22	1000 Lowe's Blvd
Expenditure from corporate funds	Mooresville, NC 28117
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Office Supplies
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 Contributions/ Donations Made E Candidate/Officeholder/Politic Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	l 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: 7/14 Rpt: 11/18	Hidalgo County Democrats PAC 00088855	
4 Date	5 Payee name	
10/10/2024	MBA Consulting Group	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,500.00	611 Pennsylvania Ave SE	
	# 143	
X Expenditure from corporate funds	Washington, DC 20003	
corporate failed		_
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Compliance Services	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	<del>1</del>	
Date	Payee name	_
10/25/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	_
\$33.55	6600 N Military Trl	
Ψ33.33	0000 W Williamy 111	
Expenditure from	D D	
corporate funds	Boca Raton, FL 33487	
PURPOSE 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  Office Supplies	
	Office Supplies	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
		_
Date	Payee name	
10/25/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	
\$272.43	6600 N Military Trl	
Expenditure from corporate funds	Boca Raton, FL 33487	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Office Supplies	
_		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	1	

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 8/14 Rpt: 12/18	Hidalgo County Democrats PAC 00088855
4 Date	5 Payee name
09/30/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,185.83	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE 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
	Office Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
09/30/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$1,648.86	4224 Henderson Blvd
, , , , , , , , , , , , , , , , , , , ,	
Expenditure from corporate funds	Tampa, FL 33629
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyron Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
5 .	
Date	Payee name
10/15/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$1,593.27	4224 Henderson Blvd
Expenditure from	
corporate funds	Tampa, FL 33629
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
orodit odra i dymoni	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 9/14 Rpt: 13/18	Hidalgo County Democrats PAC 00088855	
4 Date	5 Payee name	
09/30/2024	Romero, Desiderio	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,676.70	1150 N. Loop 1604 West	
	Ste 108-230	
Expenditure from corporate funds	San Antonio, TX 78248	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Salaries/Wages/Contract Labor	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Campaign Staff Salaries	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/Oi	л 	
Date	Payee name	
10/15/2024	Romero, Desiderio	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,676.70	1150 N. Loop 1604 West	
	Ste 108-230	
Expenditure from corporate funds	San Antonio, TX 78248	
PURPOSE		_
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Campaign Staff Salaries	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	H	
Date	Payee name	_
09/27/2024	Roosevelt's at 7	
Amount (\$)	Payee address; City; State; Zip Code	
\$683.05	821 N Main St	
, , , , , ,		
Expenditure from corporate funds	McAllen, TX 78501	
PURPOSE		_
OF	(a) Category (See Categories listed at the top of this schedule)  Fivent Expense  (b) Description  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	
	Catering	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	н	
		_

### 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 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)

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: 10/14 Rpt: 14/18	Hidalgo County Democrats PAC 00088855
4 Date	5 Payee name
10/17/2024	Staples
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$126.64	405 North Jackson Rd
Expenditure from corporate funds	Pharr, TX 78577
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense  Office Supplies
	Office Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/17/2024	Stripes
Amount (\$)	Payee address; City; State; Zip Code
\$11.52	405 North Jackson Rd
Ψ11.52	405 North StackSoff No
Expenditure from corporate funds	Pharr, TX 78577
PURPOSE 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
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
10/15/2024	Sunoco
Amount (\$)	Payee address; City; State; Zip Code
\$39.76	2100 W Trenton Rd
Expenditure from corporate funds	Edinburg, TX 78539
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
LXI LINDITORE	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	

## 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

Travel in Dis Travel Out o act Lahor OTHER (ent

Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Legal Services Salaries/Wages/Contract Labor						OTHER (enter a category not listed above)					
		_			struction Gu	ıide explain	s how to co	mple	ete this form.	_					
1	Total pages Schedule F1:	2	FILER NAME							3		er ID	(Eth	nics Commission Fil	ers)
	Sch: 11/14 Rpt: 15/18		Hidalgo Co	unty De	emocrats	PAC					00	088855			
4	Date	5	Payee name												
	10/08/2024		Sunoco												
6	Amount (\$)	7	Payee addre	ss;	City;	Stat	e; Zip Co	de							
	\$44.37		2100 W Tre		?d										
	Expenditure from		Edinburg, T	Y 7953	20										
<u> </u>	corporate funds	_													
8	PURPOSE OF	(a)	Category (Se					(b)	Description		:	O		Dala adola T	
	EXPENDITURE		Transportat	ion Eq	uipment A	And Relate	ed		Check if travel of Check if Austin						
			Expense						Travel	, 17	, onic	enolaei iiviii	ig expe	nsc	
۵	Complete ONLY if direct	<u> </u>	Candidate/Offi	caholda	ar name		Office sou	aht				Office h	ماط		
9	expenditure to benefit C/O		Sandidate/Oni	centidae	or marrie		Office 30u	grit				Office fi	iciu		
		_													
	Date		Payee name												
	10/21/2024		Sunoco												
	Amount (\$)		Payee addre	ss;	City;	Stat	e; Zip Co	de							
	\$48.04		2100 W Tre	nton R	?d										
_	T Expenditure from														
	corporate funds		Edinburg, T	X 7853	39										
	PURPOSE	(a)	Category (Se	ee Catego	ries listed at th	ne top of this so	chedule)	(b)	Description						
	OF EXPENDITURE		Transportat						Check if travel	outs	ide o	f Texas. Cor	nplete S	Schedule T.	
	LAFENDITORE		Expense						Check if Austin	ı, TX	, offic	eholder livin	ig expe	nse	
									Travel						
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholde	er name		Office sou	ght				Office h	eld		
	experientare to benefit of or														
	Date		Payee name												
	10/03/2024		USPS												
	Amount (\$)		Payee addre	ss;	City;	Stat	e; Zip Co	de							
	\$876.00		475 L'Enfar	nt Plaza	a SW										
	Expenditure from corporate funds		Washington	. DC 2	0260										
	PURPOSE	(2)						(h)	Description						
	OF	(۵)	Category (See Solicitation/				cnedule)	(5)	Description Check if travel	outs	ide o	f Texas. Cor	nplete S	Schedule T.	
	EXPENDITURE		Julicitation	runurc	aisiriy LAL	Jense			Check if Austin						
									Postage						
	Complete ONLY if direct		Candidate/Offi	ceholde	er name		Office sou	ght				Office h	eld		
	expenditure to benefit C/OI	Н													

### 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 Credit Card Payment	Il 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: 12/14 Rpt: 16/18	Hidalgo County Democrats PAC 00088855					
4 Date	5 Payee name					
10/21/2024	Valero					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$63.79	1001 E US Highway 83					
Expenditure from corporate funds	McAllen, TX 78501					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.					
	Expense Check if Austin, TX, officeholder living expense  Travel					
	Travel					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·					
Data	<u> </u>					
Date	Payee name					
10/24/2024	Valero					
Amount (\$)	Payee address; City; State; Zip Code					
\$22.53	1001 E US Highway 83					
- Evnanditura from						
Expenditure from corporate funds	McAllen, TX 78501					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Transportation Equipment And Related					
EXI ENDITORE	Expense					
	Travel					
2 1 2 2 1 1 2 1 1						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
10/24/2024	Valero					
Amount (\$)	Payee address; City; State; Zip Code					
\$40.00	1001 E US Highway 83					
- Formanditure Cons						
Expenditure from corporate funds	McAllen, TX 78501					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.					
EXPENDITORE	Expense					
	Travel					
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
3.,50						

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

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

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

Candidate/Officeholder/Politica 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: 13/14 Rpt: 17/18	Hidalgo County Democrats PAC 00088855				
4 Date	5 Payee name				
10/22/2024	Valero				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$58.77	1001 E US Highway 83				
Expenditure from corporate funds	McAllen, TX 78501				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.				
	Expense Check if Austin, TX, officeholder living expense  Travel				
	Travei				
O Complete CMI V if alian-	Candidate/Officeholder name Office sought Office held				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI					
<u> </u>					
Date	Payee name				
10/04/2024	Valero				
Amount (\$)	Payee address; City; State; Zip Code				
\$59.59	1001 E US Highway 83				
Expenditure from corporate funds	McAllen, TX 78501				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Transportation Equipment And Related				
EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense				
	Travel				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
experialitate to beliefit 6/01	'				
Date	Payee name				
10/21/2024	Valero				
Amount (\$)	Payee address; City; State; Zip Code				
\$61.58	1001 E US Highway 83				
+32.30					
Expenditure from corporate funds	McAllen, TX 78501				
	1				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  Transportation Equipment And Related  Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
	Travel				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OH					

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica 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: 14/14 Rpt: 18/18	Hidalgo County Democrats PAC 00088855
4 Date	5 Payee name
10/15/2024	Valero
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$64.02	1001 E US Highway 83
Expenditure from corporate funds	McAllen, TX 78501
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
_/	Expense
	Travel
O Commission Chilly III I	Our didn't 10 ff a balden name Office a south
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/17/2024	Walmart
Amount (\$)	Payee address; City; State; Zip Code
\$29.18	1421 Frontage Rd
Expenditure from corporate funds	Alamo, TX 78516
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Office Supplies
Operation ONLY if allowed	Our did to 10 ff as had done as one of the second to the s
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Wix
Amount (\$)	Payee address; City; State; Zip Code
\$29.22	500 Terry A Francois Blvd
	Ste 600
Expenditure from	
corporate funds	San Francisco, CA 94158
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Software Subscription  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Software Subscription  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Software Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	