FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084023 26 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Ysmael D. NAME Date Received **ELECTRONICALLY FILED** 10/27/2024 NICKNAME LAST **SUFFIX** Fonseca Jr. CANDIDATE / ZIP CODE Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Frank NAME NICKNAME LAST **SUFFIX** Sabo Jr. **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 345-7616 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 09/27/2024 10/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special

GO TO PAGE 2

12 OFFICE SOUGHT (if known)

Court Of Appeals, Justice Place 4 District 13

11 OFFICE

OFFICE HELD (if any)

District Judge District 476 Hidalgo

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 26

13 C / OH NAME	Fon	seca Jr., Ysmael	D. (The Honorat	ole)	14 Filer ID (00084023	Ethics C	ommission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	cand	idate / officeholder.	These expenditure	ns accepted or political expendit es may have been made without required to report this informatio	the candidate's or office	holder's	knowledge or
X Additional Pages	СС	MMITTEE TYPE	COMMITTEE NA	ME			
	X	GENERAL	Texas Alliance for Life PAC				
			COMMITTEE AD	DRESS			
	ΙП	SPECIFIC	8000 Centre Pa	ark Drive			
			Ste. 380				
	Austin, TX 78754						
			COMMITTEE CA	MPAIGN TREASURER NAME			
			Shaw, James				
			COMMITTEE CA	MPAIGN TREASURER ADDRE	SS		
			4505 Corazon (Cv			
	<u> </u>		Round Rock, T	X 78681			
16 CONTRIBUTION TOTALS	1.			CONTRIBUTIONS(OTHER THAI R CONTRIBUTIONS MADE ELE		\$	0.00
	2.	TOTAL POLIT	CAL CONTRIB	UTIONS		\$	30,762.30
EVDENDITUDE	2	`		S, OR GUARANTEES OF LOAN	S)	-	
EXPENDITURE TOTALS	3.		ZED POLITICAL E			\$	0.00
	4.	TOTAL POLIT	CAL EXPENDIT	TURES		\$	50,312.69
CONTRIBUTION BALANCE	5.	TOTAL POLITICATION PE		ONS MAINTAINED AS OF THE L	AST DAY OF THE	\$	3,912.59
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIP OF THE REPOR		ALL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT							
				I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
				The Honoral	ole Ysmael D. Fonsed	a Jr.	
				Signature of	Candidate or Officehol	der	
AFFIX NO	TARY	STAMP / SEAL ABO	OVE				
Sworn to and subso	cribed	before me, by the sa	aid		, this the		day
				s my hand and seal of office.	,,		
Cinnet was at a ff			Drinted vers		Tills of effects		and the second s
Signature of office	cer adı	ministering oath	Printed name	e of officer administering oath	Title of officer	adminis	tering oath

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM JC/OH ADDENDUM

Page 3 of 26

7 NOTICE FROM POUTICAL COMMITTEE(S) This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate of officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures COMMITTEE TYPE GENERAL JUDICIAL FAIRER NAME JUDICIAL FAIRER NAME JUDICIAL FAIRER NAME PERSENTIAL COMMITTEE CAMPAIGN TREASURER NAME PARSLY, E. LEE COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Size. 455 Justin, TX 78701 Austin, TX 78701					Fage 3 01 20		
PROM POLITICAL COMMITTEE(S) Expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures COMMITTEE TYPE X GENERAL GENERAL Judicial Fairness PAC	/ OH NAME	Fonseca Jr., Ysmael	D. (The Honorable)		(Ethics Commission Filers)		
COMMITTEE TYPE X GENERAL Judicial Fairness PAC COMMITTEE ADDRESS 919 Congress Ave. Ste. 455 Austin, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME Parsley, E. Lee COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455	FROM POLITICAL	expenditures may have I	been made without the candidate's or officehold	der's knowledge or c	onsent. Candidates and		
COMMITTEE ADDRESS 919 Congress Ave. Ste. 455 Austin, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME Parsley, E. Lee COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455	` ,	COMMITTEE TYPE COMMITTEE NAME					
COMMITTEE ADDRESS 919 Congress Ave. Ste. 455 Austin, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME Parsley, E. Lee COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455		X GENERAL	Judicial Fairness PAC				
Ste. 455 Austin, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME Parsley, E. Lee COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455			COMMITTEE ADDRESS				
Ste. 455 Austin, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME Parsley, E. Lee COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455		SPECIFIC	919 Congress Ave.				
COMMITTEE CAMPAIGN TREASURER NAME Parsley, E. Lee COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455		🗀	Ste. 455				
Parsley, E. Lee COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455			Austin, TX 78701				
COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455			COMMITTEE CAMPAIGN TREASURER NAM	1E			
919 Congress Ave. Ste. 455			Parsley, E. Lee				
Ste. 455			COMMITTEE CAMPAIGN TREASURER ADD	RESS			
			919 Congress Ave.				
Austin, TX 78701			Ste. 455				
			Austin, TX 78701				

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

					4 of 26
18 FILE		ME 2 Jr., Ysmael D. (The Honorable)	19 Filer ID 00084023	(Ethics Commis	sion Filers)
20 SCH	HEDUL ME OF	SUBTOTA	L AMOUNT		
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	30,012.30
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	750.00
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	42,613.03
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	NS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	5,090.14
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,609.52
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C	F C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	NS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	ETURNED	\$	
				•	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.		ages Schedule A(J)1 /9 Rpt: 5/26	:
2	FILER NAME				3 Filer ID	(Ethics Commission	on Filers)
	Fonseca Jr.,	Ysmael D. (The Honorable)		000840	023	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount	7 Amount of Contribution (\$)	
	10/22/2024	Alvarez, Oscar	_				\$500.00
		6 Contributor address; City;	State; Zip Code				
		McAllen, TX 78504					
8		Principal Occupation		9 Contributor's Job Title			
	Physician			Doctor			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)	
	Texas Diges	tive Specialists					
12	! If contributor i	s a child, law firm of parent(s) (i	if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount	of Contribution (\$)	
	10/04/2024	Amador, Silvia	<u> </u>				\$100.00
		Contributor address; City;	State: Zip Code				
		McAllen, TX 78504					
		Principal Occupation		Contributor's Job Title			
	Retired			Retired			
		employer/law firm		Law firm of contributor's s	pouse (if any)	
	N/A						
	If contributor i	s a child, law firm of parent(s) (i	if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount	of Contribution (\$)	
	10/22/2024	Bracewell PAC					\$1,000.00
		Contributor address; City;	State; Zip Code		··		
		Houston, TX 77002					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)	
_	If contributor i	s a child, law firm of parent(s) (i	if any)				

MONE	ETARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
The Inst	ruction Guide explains ho	ow to complete this f	form.	1	ages Schedule A(J)1 9 Rpt: 6/26	L:
2 FILER NAM	ME			3 Filer ID	(Ethics Commissi	on Filers)
Fonseca .	Jr., Ysmael D. (The Honorable	2)		000840	023	
4 Date 10/15/202	5 Full name of contributor Dolan, Bryce 6 Contributor address; City;	out-of-state PAC (ID#:_)	7 Amount	of Contribution (\$)	\$50.00
	Cuero, TX 77954					
8 Contributor	r's Principal Occupation		9 Contributor's Job Title			
Small Bus	siness		Landlord			
10 Contributor Self	r's employer/law firm		11 Law firm of contributor's s	pouse (if any)	
12 If contribut	or is a child, law firm of parent(s) (if any)	1			
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount	of Contribution (\$)	
10/02/202		out or state 1710 (IBII.		7	(+)	\$5,000.00
10/02/202	Contributor address; City;	State: 7in Code				Ψ0,000.00
	McAllen, TX 78503					
Contributo	r's Principal Occupation		Contributor's Job Title			
Physician			Doctor			
Contributo	r's employer/law firm		Law firm of contributor's s	pouse (if any)	
McAllen A	Anesthesia Consultants					
If contribut	or is a child, law firm of parent(s) (if any)				
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount	of Contribution (\$)	
10/15/202	24 Gutierrez, Laura	_				\$1,000.00
	Contributor address; City;	State: Zip Code				
	Palmhurst, TX 78573		I			
	r's Principal Occupation		Contributor's Job Title			
Entreprer			Small Business Owner			
Contributor Self	r's employer/law firm		Law firm of contributor's s	pouse (if any))	
If contribut	or is a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/9 Rpt: 7/26	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Fonseca Jr.,	Ysmael D. (The Honorable)			00084023	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/23/2024	Hernandez, Daniel				\$	2,500.00
		6 Contributor address; City;	State; Zip Code				
		Edinburg, TX 78539					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	-		
	Attorney			Mediator			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spous	se (if any)	
	Law Office of	of Daniel ML Hernandez					
12	If contributor i	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/09/2024	Hinojosa, Luz	<u> </u>				\$104.10
		Contributor address; City;	State; Zip Code		"		
		McAllen, TX 78501					
		Principal Occupation		Contributor's Job Title			
	Office Mana	ger		Office Manager			
	Contributor's of LTSR	employer/law firm		Law firm of contributor's s	spous	e (if any)	
	If contributor i	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	10/02/2024	Holguin, Erick				\$	2,500.00
		Contributor address; City;	State; Zip Code		"		
		McAllen, TX 78501					
		Principal Occupation		Contributor's Job Title			
	Lawyer			Attorney			
		employer/law firm		Law firm of contributor's s	spous	se (if any)	
	Perez Law F						
	If contributor i	s a child, law firm of parent(s) (i	f any)				

MONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	w to complete this 1	form.	1 Total pages Schedule A(J)1: Sch: 4/9 Rpt: 8/26
2 FILER NAME Fonseca Jr	Ysmael D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00084023
4 Date 10/04/2024	5 Full name of contributor Holland & Knight Texas6 Contributor address; City;	out-of-state PAC (ID#:_PAC		7 Amount of Contribution (\$) \$500.00
	Dallas, TX 75201			
8 Contributor's I	Principal Occupation		9 Contributor's Job Title	
10 Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12 If contributor i	s a child, law firm of parent(s) (if	any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/22/2024				\$2,500.00
	San Antonio, TX 78205			
Contributor's I	Principal Occupation		Contributor's Job Title	
Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
If contributor i	s a child, law firm of parent(s) (if	any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/02/2024	Katusak, Robert	_		\$500.00
	Contributor address; City; Brownsville, TX 78521	State; Zip Code		
Contributor's I	Principal Occupation		Contributor's Job Title	
Entrepreneu	ır		Small Business Owner	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)		
Self				
If contributor i	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL CO	ONTRIBUTIO	ONS		;	SCHEDULE	A(J)1
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total page Sch: 5/9 F	s Schedule A(J) Rpt: 9/26	1:
2	FILER NAME Fonseca Jr.,	Ysmael D. (The Honorable)			1	Filer ID (Ethics Commiss	ion Filers)
4	Date 10/18/2024	5 Full name of contributor out-of-state PAC (ID#:) Law Office of Palacios Cruz & Moreno, PLLC 6 Contributor address; City; State; Zip Code		7	Amount of	Contribution (\$)	\$1,500.00	
		McAllen, TX 78504						
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)						
	Date 10/18/2024	Full name of contributor Law Office of Victor Jaramillo Contributor address; City; State;				Amount of	Contribution (\$)	\$500.00
		McAllen, TX 78504						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)	•					
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of	Contribution (\$)	
	10/08/2024	Monica for Congress Contributor address; City; State;	; Zip Code					\$1,000.00
		Alexandria, VA 22314						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>					

	MONET	ARY POLITICAL CO	NTRIBUTIC	ONS	SCHEDU	JLE A(J)1
	The Instru	ction Guide explains how to	complete this fo	orm.	1 Total pages Schedule Sch: 6/9 Rpt: 10/26	
2	FILER NAME Fonseca Jr.,	Ysmael D. (The Honorable)			3 Filer ID (Ethics Cor 00084023	nmission Filers)
4	Date 10/09/2024	5 Full name of contributorOrtega, Sonja6 Contributor address; City; State;	out-of-state PAC (ID#:_ Zip Code)	7 Amount of Contribution	on (\$) \$104.10
_	O - materille : d - ml - 1	Pharr, TX 78577		O Controlle Andre John Title		
8	Retired	contributor's Principal Occupation Petired Retired Retired				
10		omployor/low firm			agusa (if any)	
10	O Contributor's employer/law firm N/A 11 Law firm of contributor's spo		Jouse (II arry)			
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution	on (\$)
	10/18/2024	10/18/2024 Ortiz, Reynaldo Contributor address; City; State; Zip Code				\$1,000.00
		McAllen, TX 78504				
		Principal Occupation		Contributor's Job Title		
	Lawyer			Attorney		
		employer/law firm		Law firm of contributor's sp	oouse (if any)	
		of Reynaldo Ortiz				
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution	on (\$)
	10/15/2024	Plata, Ruben				\$250.00
		Contributor address; City; State; Mission, TX 78574	Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Banker			Mortgage Loan Officer		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	
	Willow Bend	Mortgage				
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1		
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 7/9 Rpt: 11/26		
2	FILER NAME Fonseca Jr.,	Ysmael D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084023		
4	Date 10/04/2024	 Full name of contributor out-of-state PAC (ID#:_ Republican Party of Texas Contributor address; City; State; Zip Code)	7 Amount of Contribution (\$) \$3,000.00		
•	Cantuibutada F	Austin, TX 78701	O Contributorio leb Title			
8	Contributors	Principal Occupation	9 Contributor's Job Title			
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	ouse (if any)		
12	12 If contributor is a child, law firm of parent(s) (if any)					
	Date 10/25/2024	Full name of contributor out-of-state PAC (ID#:_ Republican Women of Yoakum Area Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00		
	0	Yoakum, TX 77995				
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's 6	employer/law firm	Law firm of contributor's sp	ouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date 10/23/2024	Full name of contributor out-of-state PAC (ID#:_ Ruben R. Ramirez Law Firm, PLLC Contributor address; City; State; Zip Code McAllen, TX 78501)	Amount of Contribution (\$) \$1,000.00		
	Contributor's F	I Principal Occupation	Contributor's Job Title			
	Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE /	4(J)1
	The Instru	ction Guide explains how to complete this f	orm.		tal pages Schedule A(J)1: ch: 8/9 Rpt: 12/26	:
2	FILER NAME Fonseca Jr.,	, Ysmael D. (The Honorable)			er ID (Ethics Commission 084023	on Filers)
4	Date 10/18/2024	 Full name of contributor	SNAP Insurance Service, LLC 6 Contributor address; City; State; Zip Code		nount of Contribution (\$)	\$2,500.00
Ļ		Rockwall, TX 75032	T =			
		Principal Occupation	9 Contributor's Job Title			
10	Contributor's e	employer/law firm	11 Law firm of contributor's sp	ouse (if	fany)	
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor)	Am	nount of Contribution (\$)	
	10/09/2024	Texas Farm Bureau AGFUND Contributor address; City; State; Zip Code				\$1,000.00
		Waco, TX 76702				
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if	fany)	
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:_		Am	nount of Contribution (\$)	
	09/27/2024	The Ramon Montalvo Living Trust				\$300.00
		Contributor address; City; State; Zip Code Weslaco, TX 78599				
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's 6	employer/law firm	Law firm of contributor's sp	oouse (if	fany)	
	If contributor is	s a child, law firm of parent(s) (if any)	1			

MONE	FARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 9/9 Rpt: 13/26
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Fonseca Jr.	., Ysmael D. (The Honorable)		00084023
4 Date 10/09/2024	 Full name of contributor		7 Amount of Contribution (\$) \$104.10
	McAllen, TX 78503		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	•
Retired		Retired	
10 Contributor's N/A	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
	is a child, law firm of parent(s) (if any)	1	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
10/22/2024	_ ·		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77056		
Contributor's	Principal Occupation	Contributor's Job Title	
Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
If contributor	is a child, law firm of parent(s) (if any)	1	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 14/26 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Fonseca Jr., Ysmael D. (The Honorable) 00084023 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/09/2024 Garza, Lina \$750.00 | Event Food/Drink and 7 Contributor address; City; State; Zip Code Photography McAllen, TX 78504 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) Entrepreneur **Small Business Owner** 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

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

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

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	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:	
L	Sch: 1/6 Rpt: 15/26	Fonseca Jr., Ysmael D. (The Honorable) 00084023
4	Date	5 Payee name
	10/15/2024	Bank of America
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,464.00	100 North Tryon Street
		Charlotte, NC 28255
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
		Great Sura Laymont
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l ⁹	Complete ONLY if direct expenditure to benefit C/Ol	the state of the s
F	Date	Payee name
	10/24/2024	Bank of America
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$3,946.68	100 North Tryon Street
	, , , , , , , , , , , , , , , , , , , ,	7
		Charlotte, NC 28255
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Payment
		Credit Card Payment
┡	Operation ONE V if dispert	Occasional Office health and a second of the
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	09/28/2024	Breeden McCumber Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1724 Boca Chica Blvd.
l		
		Brownsville, TX 78520
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Advertising Expense
l	LXI LINDITORL	Check if Austin, TX, officeholder living expense
1		Digital Ads
$ldsymbol{f eta}$	0 1. 2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>		

SCHEDULE F1

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

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

	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: 2/6 Rpt: 16/26	Fonseca Jr., Ysmael D. (The Honorable) 00084023
4	Date	5 Payee name
	10/11/2024	Breeden McCumber Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	1724 Boca Chica Blvd.
		Brownsville, TX 78520
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Digital Media Ads
		Digital Would 7 to 3
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/25/2024	Breeden McCumber Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1724 Boca Chica Blvd.
		Brownsville, TX 78520
	PURPOSE 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 travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Digital Ads
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/28/2024	Jasso, Carlos
	Amount (\$)	Payee address; City; State; Zip Code
	\$650.00	112 E. Cano Street
		Edinburg, TX 78539
	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 Social Media
		Social Wicald
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 3/6 Rpt: 17/26	Fonseca Jr., Ysmael D. (The Honorable) 00084023
4	Date	5 Payee name
	10/11/2024	Jasso, Carlos
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	112 E. Cano Street
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Social Media
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/03/2024	Knights of Columbus Council #5598
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	215 N. 16th Ave.
		Edinburg, TX 78541
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense 5K Sponsorship
		эх эринэлэнр
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date 10/24/2024	Payee name Lone Star National Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.00	206 West Ferguson
		Pharr, TX 78577
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Check Printing Fee
	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 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 (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	<u> </u>					
	Sch: 4/6 Rpt: 18/26	Fonseca Jr., Ysmael D. (The Honorable) 00084023					
4	Date	5 Payee name					
	10/21/2024	OG Marketing					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$2,000.00	311 W. University Drive					
		Edinburg, TX 78539					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense					
	EXPENDITORE	Check if Austin, TX, officeholder living expense					
		Text Messaging					
_	0 1: 0.11.4.7.1.						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	09/28/2024	Steve Ray & Associates					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$390.05	P.O. Box 742					
		Corpus Christi, TX 78403					
	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 Pushcards and RWOYA Sponsorship					
		T distributed and two the openiorship					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						
	Date	Dougo nama					
	09/28/2024	Payee name Steve Ray & Associates					
		· · · · · · · · · · · · · · · · · · ·					
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code P.O. Box 742					
	Φ2,000.00	P.O. BOX 742					
		Correcte Christi, TV 70402					
		Corpus Christi, TX 78403					
	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					
		Consulting Fees					
	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 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 comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 5/6 Rpt: 19/26	Fonseca Jr., Ysmael D. (The Honorable)	00084023
4	Date	5 Payee name	·
	09/28/2024	Steve Ray & Associates	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$7,500.00	P.O. Box 742	
		Corpus Christi, TX 78403	
8	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.
	LXI LINDITORL		Check if Austin, TX, officeholder living expense
			Digital Ads
_	0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		05.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/14/2024	Steve Ray & Associates	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9,147.00	P.O. Box 742	
		Corpus Christi, TX 78403	
	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.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Radio Ads and Mailers
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Office field
	D :		
	Date	Payee name	
	10/25/2024	Steve Ray & Associates	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,500.00	P.O. Box 742	
		Corpus Christi, TX 78403	
	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
			Digital/TV Ads
	Complete ONLY if direct	Condidate/Officeholder name	Office hold
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	Polling E ense Printing Salaries/	Expense Wages/Contract L	abor	Travel in Distriction Travel Out of D	
			The Instruction Guide	explains now to c	ompiete this ic			
1	Total pages Schedule F1: Sch: 6/6 Rpt: 20/26		IAME a Jr., Ysmael D. (The F	lonorable)		3	Filer ID 00084023	(Ethics Commission Filers)
4	Date	5 Payee n	ame			I		
	10/09/2024	WinRed	t					
6	Amount (\$) \$12.30	7 Payee a P.O. Bo		State; Zip C	ode			
Ļ	DUDDOCE	_			(b) - ·			
8	PURPOSE OF EXPENDITURE		Y (See Categories listed at the to tion/Fundraising Expen		Chec	k if travel outs k if Austin, TX	ide of Texas. Co , officeholder livit	mplete Schedule T. ng expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate H	e/Officeholder name	Office so	ught		Office h	neld

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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			alaries/Wages/Co	ontract Labor	OTHER (enter a cate		bove)
	The Inst	ruction Guide explains hov	v to complete	this form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	Ethics Commiss	sion Filers)
Sch: 1/5 Rpt: 21/26	Fonseca Jr., Ysma	el D. (The Honorable)			00084023		
4 CREDIT CARD				OF UNITEMIZE	I .		
ISSUER	Bank of	America		IDITURES SED TO A CRED	, \$		
			CARD	SED TO A GIVED	``		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ıer Paid		
	\$117.26	10/01/2024	10/25/20)24			
7 PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	NACTURE CONTRACTOR	Destat	675 Pon	ce De Leon Ave	e NW		
	Mailchimp c/o The	Rocket	Ste. 500	0			
			Atlanta,	GA 30308			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodula)	(b) Descri	•			
l <u> </u>	Advertising Expense	or triis scriedule)	Newslett	er			
X Political							
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living	expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought		Office held		
expenditure to benefit C/OH		l	1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s 10/25/20) Credit Card Issu	ıer Paid		
	\$131.20	10/11/2024	10/23/20	724			
PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
	Homewood Suites	uites Victoria		c Lentz Pkwy			
			Viotorio	TV 77004			
PURPOSE OF	(a) Category		(b) Descri	TX 77904			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Hotel				
X Political	Travel In District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin T	X, officeholder living	evnence	
Complete ONLY if direct	Candidate/Officeholder		ce sought	Crieck ii Austin, i	Office held	ехрепзе	
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ıer Paid		
	\$2,023.00	10/15/2024	10/25/20)24			
	Ψ2,023.00	10/13/2024					
PAYEE	(a) Payee name	<u>I</u>	(b) Payee	address;	City,	State,	Zip Code
				US Hwy 83			
	Radio United, LLC			•			
			Mission,	TX 78572			
PURPOSE OF	(a) Category		(b) Descri				
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Radio Ad	ds			
X Political	The state of the s						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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		ices Sa ruction Guide explains how	laries/Wages/Cont		THER (enter a catego	ory not listed a	bove)
4. Total pages Calcadula E4.		Tuction Guide explains now	to complete ti	115 101111.	a Filer ID (Fth	ica Commiss	nion Filoro)
1 Total pages Schedule F4:		-l D (Th - l l l -)			3 Filer ID (Eth	ics Commis	sion Filers)
Sch: 2/5 Rpt: 22/26		el D. (The Honorable)	1		00084023		
4 CREDIT CARD ISSUER	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES		\$		
ISSUER	see previous			ED TO A CREDIT	*		
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	\$130.31	10/08/2024	10/25/202	24			
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
			1801 US I	Hwy 181			
	Hampton Inn Portla	ınd					
			Portland,	TX 78374			
8 PURPOSE OF	(a) Category		(b) Descript	ion			
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Hotel				
X Political	Travel in District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX.	officeholder living ex	nense	
9 Complete ONLY if direct	Candidate/Officeholder	·	e sought		Office held		
expenditure to benefit C/OH			ū				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$947.18	10/09/2024	10/25/202	10/25/2024			
	Ψ547.10	10/03/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
				ackson Rd.	•		·
	The Print Shop	e Print Shop					
			Edinburg,	TX 78539			
PURPOSE OF	(a) Category		(b) Descript	ion			
EXPENDITURE	(See Categories listed at the top Printing Expense	of this schedule)	Signs				
X Political	Trinking Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Γ	Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought Office held				
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$947.18	09/28/2024	10/12/202	24			
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
			3906 S. Ja	ackson Rd.			
	The Print Shop						
			Edinburg,	TX 78539			
PURPOSE OF	(a) Category		(b) Descript	ion			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Signs				
X Political	Printing Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX.	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held	•	
expenditure to benefit C/OH			-				
	ı						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries (Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeriolder/Folitica	ű	ruction Guide explains how	-	Trien (enter a category i	ioi iisieu ai	Jove)
1 Total pages Schedule F4:	es Schedule F4: 2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 3/5 Rpt: 23/26		el D. (The Honorable)		00084023		,
4 CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Issue 10/25/2024 10/12/2024	r Paid		
7 PAYEE	(a) Payee name Hidalgo County GC)P	(b) Payee address; 4900 N. 23rd Street McAllen, TX 78504	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Lincoln-Reagan Dinner			
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH	() 4 () 4	[(1) D () (0)	1() 5 : () 6 : 1: 6 : 1:	5		
PAYMENT	(a) Amount Charged \$64.94	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Issue 10/25/2024	r Paid		
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	Adobe, Inc.		345 Park Ave			
			San Jose, CA 95110-270	4		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Software	of this schedule)	(b) Description Software Use			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$155.08	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issue 10/25/2024	r Paid		
PAYEE	(a) Payee name Hampton Inn Beeville		(b) Payee address; 301 S. Hall Street	City,	State,	Zip Code
			Beeville, TX 78102			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Hotel			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

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)

Candidate/Onicendiden/Folitica		uction Guide explains how	S .	JITIER (enter a categor	/ Hot listed at	bove)	
1 Total pages Schedule F4:	es Schedule F4: 2 FILER NAME			3 Filer ID (Ethic	3 Filer ID (Ethics Commission Filers)		
Sch: 4/5 Rpt: 24/26		el D. (The Honorable)		00084023			
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$			
6 PAYMENT	(a) Amount Charged \$215.00	(b) Date of Charge 10/12/2024	(c) Date(s) Credit Card Issue 10/25/2024	er Paid			
7 PAYEE	(a) Payee name Cheesecake Factor	у	(b) Payee address; 5488 S. Padre Island Dri		State,	Zip Code	
	() 0 :		Corpus Christi, TX 7841	1.			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Travel In District	of this schedule)	(b) Description Food Expense				
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, T	K, officeholder living exp	ense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$113.44	(b) Date of Charge 10/10/2024	(c) Date(s) Credit Card Issu 10/25/2024	er Paid			
PAYEE	(a) Payee name Hampton Inn Corpu	s Christi	(b) Payee address; 11233 IH 37	City,	State,	Zip Code	
			Corpus Christi, TX 78410)			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Travel In District	of this schedule)	(b) Description Hotel				
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$48.34	(b) Date of Charge 10/21/2024	(c) Date(s) Credit Card Issue 10/25/2024	er Paid			
PAYEE	(a) Payee name Nana's Taqueria		(b) Payee address; 1802 S. International Blv Weslaco, TX 78596	City, d.	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Food/Beverage Exper	,	(b) Description Meeting				
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, T	K, officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
1							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/A	Beverage Expense vards/Memorials Expense Services	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
		The	nstruction Guide explains	how to complete this form.	
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 5/5 Rpt: 25/26	Fonseca Jr., Ysı	mael D. (The Honorab	le)	00084023
4	CREDIT CARD	Name of	inancial institution	5 TOTAL OF UNITEMIZ	
l	ISSUER	se	e previous	EXPENDITURES CHARGED TO A CRI	\$ EDIT
				CARD	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid
l		\$97.21	10/26/2024		
7	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code
		Dolonova Crill		615 E. Trenton Rd.	
		Palenque Grill			
				Edinburg, TX 78539	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the	ton of this schedule)	(b) Description	
	_	Food/Beverage Ex		Meeting	
	X Political		•		
	Non-Political	(C) Check if travel out	side of Texas. Complete Schedul		in, TX, officeholder living expense
	Complete ONLY if direct	Candidate/Officeho	der name	Office sought	Office held
ex	xpenditure to benefit C/OH				
l					
l					
l					
l					
l					
l					
l					
l					
l					
l					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 1/1 Rpt: 26/26 Fonseca Jr., Ysmael D. (The Honorable) 00084023 Date Payee name 10/26/2024 Fonseca, Ysmael 6 Amount (\$) Payee address; City; State; Zip Code P.O. Box 419 \$2,609.52 Reimbursement from political contributions intended Х Edinburg, TX 78540 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Travel In District **EXPENDITURE** Mileage for Reporting Period: 3984 @65.5 cents per mile Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH