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) 00087926 32 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Regina NAME Date Received **ELECTRONICALLY FILED** 10/28/2024 NICKNAME LAST **SUFFIX** Regi Compian Richardson CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 3525 W. Freddy Gonzalez MAILING Receipt # Amount **ADDRESS** Ste. C Change of Address Edinburg, TX 78539 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Katherine G. NAME NICKNAME LAST **SUFFIX** Kathy Perez **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 1013 S. 10th Ave. **ADDRESS** (Residence or Business) Edinburg, TX 78539 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 381-1800 **PHONE** REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer 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 X General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

GO TO PAGE 2

Court Of Appeals, Justice Place 5 District 13

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 32

13 C / OH NAME	Compian Richardson	, Regina (Ms.)	14 Filer ID (00087926	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
Ш	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
16 CONTRIBUTION TOTALS		I ZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
	IS)	\$ 29,600.00				
EXPENDITURE TOTALS	DTALS					
	4. TOTAL POLIT		\$ 33,550.46			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	AST DAY OF THE	\$ 24,813.03		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 15,000.00		
17 AFFIDAVIT						
		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.				
		Ms. Regir	na Compian Richards	on		
			f Candidate or Officehol			
AFFIX NO	TARY STAMP / SEAL AB	DVE				
Sworn to and subso	ribed before me, by the s	aid	, this the	day		
		ertify which, witness my hand and seal of office.				
Signature of office	er administering oath	Printed name of officer administering oath	Title of officer	r administering oath		

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			CC	VER 31	3 of 32
l	ER NAN mpian l	ME Richardson, Regina (Ms.)	19 Filer ID 00087926	(Ethics Com	mission Filers)
I		E SUBTOTALS SCHEDULE		SUBTC	OTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	29,600.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	4. SCHEDULE E(J): LOANS (JUDICIAL)				
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				\$	33,550.46
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1	_
	The Instru	ction Guide explains ho	w to complete this t	form.	1	otal pages Schedule A(J)1: ch: 1/13 Rpt: 4/32	
2	FILER NAME				3 Fil	er ID (Ethics Commission Filers))
	Compian Ric	chardson, Regina (Ms.)			00	0087926	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Ar	nount of Contribution (\$)	
	10/14/2024	Advance 911 Pain Mgm	t PLLC			\$3,000	0.00
		6 Contributor address; City; McAllen, TX 78504	State; Zip Code				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	1		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse (if any)	
12	! If contributor i	s a child, law firm of parent(s) (i	f any)	1			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ar	nount of Contribution (\$)	
	10/08/2024	Almanza, Jonathan L.				\$500	00.0
		Contributor address; City; McAllen, TX 78504	State; Zip Code				
	Contributor's I	rincipal Occupation		Contributor's Job Title	1		
	Attorney			Attorney at Law			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	
	Law Office o	f Jonathan L. Almanza					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ar	nount of Contribution (\$)	
	10/08/2024	Belez, Tomasa A.	_			\$100	00.0
		Contributor address; City;	State; Zip Code				
		McAllen, TX 78504					
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>		
	self employe			self employed			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	
	self	•			`	,	
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/13 Rpt: 5/32		
2	FILER NAME	chardson, Regina (Ms.)			3	Filer ID (Ethics Commission Filers) 00087926		
4	Date 10/06/2024	Full name of contributor Botello, Jessica Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$300.00		
		McAllen, TX 78503						
8		Principal Occupation		9 Contributor's Job Title				
L	self employe			self employed				
10	self	employer/law firm		11 Law firm of contributor's sp	pous	se (If any)		
12	If contributor is	s a child, law firm of parent(s) (i	f any)	I				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	10/07/2024	Canales, Erica Contributor address; City; Edinburg, TX 78539	State; Zip Code			\$250.00		
_	Contributor's I	_		Contributor's Job Title				
	·			Business Owner				
		employer/law firm		Law firm of contributor's sp	pous	se (if any)		
	If contributor is	s a child, law firm of parent(s) (i	f any)					
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)		
	10/04/2024	Castor, Eunice Illiana Contributor address; City;	State; Zip Code			\$1,500.00		
		Donna, TX 78537		T				
	contributor's is	Principal Occupation		Contributor's Job Title self employed				
_		employer/law firm		Law firm of contributor's sp	20116	ea (if any)		
	self	employer/iaw iiiii		Law IIIII of Contributor 3 Sp	pous	e (ii diiy)		
	If contributor is	s a child, law firm of parent(s) (i	f any)	1				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		S	CHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages	Schedule A(J)1 Rpt: 6/32	L:
2	FILER NAME				3	Filer ID (E	thics Commissi	on Filers)
	Compian Ri	chardson, Regina (Ms.)				00087926		
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of C	Contribution (\$)	
	10/08/2024	Chavana, Vito Luis						\$500.00
		6 Contributor address; City;	State; Zip Code					
		Edinburg, TX 78541						
8	Contributor's	Principal Occupation		9 Contributor's Job Title				
	Attorney			Attorney at Law				
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pou	se (if any)		
12		s a child, law firm of parent(s) (f any)					
	ii continuator i	o a cima, law iiiii oi parcin(o) (in carry)					
F	Date	Full name of contributor	out-of-state PAC (ID#:	1	T	Amount of (Contribution (\$)	
	10/03/2024	De Leon, Leon	U out-of-state PAC (ID#.			Amount of C	zonti ibution (ψ)	\$1,000.00
	10/03/2024		State: Zin Code					Ψ1,000.00
		Contributor address; City;	State, Zip Code					
		San Juan, TX 78589						
		Principal Occupation		Contributor's Job Title				
	business ow			business owner				
		employer/law firm		Law firm of contributor's s	pou	se (if any)		
	Memorial Fu							
	If contributor i	s a child, law firm of parent(s) (if any)					
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of 0	Contribution (\$)	
	10/17/2024	EX Cuts LLC	out or orace time (is mi				(+)	\$500.00
		Contributor address; City;	State: 7in Code					
		Contributor address, Only,	otato, zip oddo					
		Edinburg , TX 78539						
	Contributor's	Principal Occupation		Contributor's Job Title				
	Contributor 3	ттора Сосаранот		Contributor 3 dob Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)		
		, ,				(),		
	If contributor i	s a child, law firm of parent(s) (if any)	1				

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: 4/13 Rpt: 7/32
2 FILER NAME Compian Ric	chardson, Regina (Ms.)			3 Filer ID (Ethics Commission Filers) 00087926
4 Date 10/04/2024	Full name of contributor Escobedo & Cardenas, I Contributor address; City; S			7 Amount of Contribution (\$) \$1,000.00
	Edinburg, TX 78539			
8 Contributor's I	Principal Occupation		9 Contributor's Job Title	
10 Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>	
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/26/2024	Fallek, Michael A. Contributor address; City; S McAllen, TX 78501	<u> </u>		\$250.00
Contributor's F	Principal Occupation		Contributor's Job Title	
business ow			business owner	
Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if	any)	<u>I</u>	
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/08/2024	Galvan, Monica	_		\$500.00
	Contributor address; City; \$ Mission, TX 78573	State; Zip Code		
Contributor's I	I Principal Occupation		Contributor's Job Title	
Attorney			Attorney at Law	
Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
Galvan Law	Group			
If contributor is	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL C	ONTRIBUTIC	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how t	to complete this fo	orm.	1	ages Schedule A(J): /13 Rpt: 8/32	1:
2	FILER NAME				3 Filer ID	(Ethics Commiss	ion Filers)
	Compian Ric	chardson, Regina (Ms.)			00087		•
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amoun	t of Contribution (\$)	
	10/07/2024	Hernandez Law Firm, LLP	_			, ,	\$500.00
		6 Contributor address; City; Stat	te: Zin Code		.		
		Harlingen, TX 78551					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if an	у)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amoun	t of Contribution (\$)	
	10/17/2024	Hinojosa, Laura Lee					\$500.00
		Contributor address; City; Stat	te; Zip Code		1		
		McAllen, TX 78501					
		Principal Occupation		Contributor's Job Title			
	Hidalgo Co.	District Clerk		District Clerk			
		employer/law firm		Law firm of contributor's sp	oouse (if any	")	
	Hidalgo Cou	nty					
	If contributor is	s a child, law firm of parent(s) (if an	у)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amoun	t of Contribution (\$)	
	10/16/2024	IBEW PAC Voluntary Fund					\$1,000.00
		Contributor address; City; Stat			1		
		Washington, DC 20001					
\vdash	Contributor's	Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor 3 i	тистра Оссираноп		Contributor 3 300 Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if an	y)				

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULE	A(J)1	
	The Instru	ction Guide explains how	to complete this fo	orm.		pages Schedule A(J). 6/13 Rpt: 9/32	1:	
2	FILER NAME				3 Filer I	D (Ethics Commiss	ion Filers)	
	Compian Ric	chardson, Regina (Ms.)			0008	7926		
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amou	nt of Contribution (\$)		
	10/05/2024	Ibanez, Jr., Rogelio					\$300.00	
		6 Contributor address; City; Sta	ite; Zip Code					
		McAllen, TX 78501						
8		Principal Occupation		9 Contributor's Job Title				
	self employe			self employed				
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if ar	ny)		
12	If contributor is	s a child, law firm of parent(s) (if ar	ny)					
F	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amou	nt of Contribution (\$)		
	10/08/2024	Koeneke & Gutierrez, PLL				,	\$500.00	
		Contributor address; City; Sta			.			
		McAllen, TX 78501						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if ar	ny)		
	If contributor is	s a child, law firm of parent(s) (if ar	ny)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amou	nt of Contribution (\$)		
	10/08/2024	Law Office of Emerson Are	ellano, PLLC				\$500.00	
		Contributor address; City; Sta						
		Edinburg, TX 78539						
	Contributor's I	Principal Occupation		Contributor's Job Title	1			
	Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if ar	ny)		
	If contributor is	s a child, law firm of parent(s) (if ar	ny)					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/13 Rpt: 10/32
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Compian Ric	chardson, Regina (Ms.)				00087926
4	Date 10/11/2024	5 Full name of contributor Law Offices of Ezequiel 6 Contributor address; City;)	7	Amount of Contribution (\$) \$2,000.00
		Weslaco , TX 78596				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/30/2024	Laylor, Janet Contributor address; City;	State; Zip Code			\$50.00
		Ingleside, TX 78362				
		Principal Occupation		Contributor's Job Title		
	retired			retiree		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	10/08/2024	Montalvo, George A.				\$100.00
		Contributor address; City; McAllen , TX 78501	State; Zip Code			
	Contributor's I	rincipal Occupation		Contributor's Job Title		
	self employe			business owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	self					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/13 Rpt: 11/32		
2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Compian Ric	chardson, Regina (Ms.)				00087926		
4	Date 10/08/2024	5 Full name of contributor Montalvo, Rodolfo G.6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00		
		McAllen, TX 78503						
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	_			
	self employe	ed		business owner				
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)		
	self							
12	2 If contributor is	s a child, law firm of parent(s) (if	fany)					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	10/08/2024	Mujica, Jr., Juan Contributor address; City;	State; Zip Code		-	\$100.00		
		McAllen, TX 78501						
	Contributor's F	Principal Occupation		Contributor's Job Title				
	self employe	ed		self employed				
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)		
	If contributor is	s a child, law firm of parent(s) (if	any)					
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)		
	10/08/2024	Peralez Franz LLP				\$1,500.00		
		Contributor address; City; McAllen, TX 78504	State; Zip Code		•			
\vdash	Contributor's F	Principal Occupation		Contributor's Job Title				
		o.pa. Goodpa.c						
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)		
	If contributor is	s a child, law firm of parent(s) (if	any)					

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how	v to complete this f	orm.		ges Schedule A(J): 13 Rpt: 12/32	1:
2	FILER NAME				3 Filer ID	(Ethics Commiss	ion Filers)
	Compian Ric	chardson, Regina (Ms.)			000879	26	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount	of Contribution (\$)	
	10/08/2024	Ray Thomas PC	_				\$1,000.00
		6 Contributor address; City; S	itate; Zip Code				
		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	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 (\$)	
	10/16/2024	Ricky Rod Law Group	_				\$1,000.00
		Contributor address; City; S	tate; Zip Code				
		Edinburg, TX 78539					
	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	Ruben Hinojosa for Cong	_				\$500.00
		Contributor address; City; S McAllen, TX 78504					
	Comérciales			Contributorio Joh Titlo			
	Contributors	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)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A	(J)1
	The Instru	ction Guide explains ho	ow to complete this f	form.		ges Schedule A(J)1: 0/13 Rpt: 13/32	
2	FILER NAME				3 Filer ID	(Ethics Commission	Filers)
	Compian Ric	chardson, Regina (Ms.)			000879	26	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount	of Contribution (\$)	
	10/11/2024	Salkinder, Sonia				\$	3,000.00
		6 Contributor address; City;	State; Zip Code				
		Edinburg , TX 78541					
8	Contributor's	Principal Occupation		9 Contributor's Job Title			
	self employe	ed		self employed			
10	Contributor's of self	employer/law firm		11 Law firm of contributor's s	pouse (if any)		
12		s a child, law firm of parent(s) (i	f any)				
12	in contributor i	s a crina, law iiiii or parcrit(s) (i	r arry)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount	of Contribution (\$)	
	10/08/2024	Singh, Simran W.				(1)	\$500.00
		Contributor address; City;	State: 7in Code				
		Contributor address, City,	State, Zip Code				
		F. I'. I					
		Edinburg, TX 78539		•			
		Principal Occupation		Contributor's Job Title			
	Attorney			Principal Attorney			
		employer/law firm		Law firm of contributor's s	pouse (if any)		
	Veritum Law	Group, PLLC					
	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 (\$)	
	10/08/2024	Statesman Law Firm				(,,	\$500.00
		Contributor address; City;	State: 7in Code				
			otato, z.p oodo				
		Edinburg, TX 78539					
	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	f any)	•			
Г							

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A(J)1		
	The Instru	ction Guide explains how t	to complete this f	orm.	1	ges Schedule A(J): /13 Rpt: 14/32	L:
2	FILER NAME				3 Filer ID	(Ethics Commiss	on Filers)
	Compian Ric	chardson, Regina (Ms.)			0008792	26	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount o	of Contribution (\$)	
	10/08/2024	Terry Canales Law	_	,		, ,	\$250.00
		6 Contributor address; City; Stat	te; Zip Code				
		Edinburg, TX 78539					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any	у)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	10/07/2024	Terry Canales St Rep Cam					\$500.00
	Contributor address; City; State; Zip Code						
		Edinburg, TX 78539					
Contributor's Principal Occupation C		Contributor's Job Title					
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any	у)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount o	of Contribution (\$)	
	10/08/2024	The Law Office of Daniel G	onzalez				\$1,500.00
	Contributor address; City; State; Zip Code pharr tx, TX 78577						
\vdash	Contributor's	<u> </u>		Contributor's Job Title	<u> </u>		
Contributor's Principal Occupation Contribu		Contributor 5 cos Title					
Contributor's employer/law firm			Law firm of contributor's sp	oouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if any	у)				

MONET	ARY POLITICAL CON	ITRIBUTIO	NS	SCHEDULE A(J)1
The Instruc	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 12/13 Rpt: 15/32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Compian Ric	hardson, Regina (Ms.)			00087926
4 Date	5 Full name of contributor ou	ut-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/08/2024	The Law Office of Jorge Munoz	, PLLC		\$500.00
	6 Contributor address; City; State; Zi	ip Code		
	Edinburg, TX 78539			
8 Contributor's P	rincipal Occupation	g	Contributor's Job Title	
10 Contributor's e	mployer/law firm	1	1 Law firm of contributor's s	pouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor ou	ut of ctoto DAC (ID#)	`	Amount of Contribution (\$)
10/06/2024	Vasquez Garza, Liza	ut-of-state PAC (ID#:		\$300.00
10/00/2024	Contributor address; City; State; Zi	:- O-d-		
	McAllen, TX 78504			
	rincipal Occupation		Contributor's Job Title	
Attorney			Attorney at Law	
	mployer/law firm		Law firm of contributor's s	pouse (if any)
Tijerina Law	Group			
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor ou	ut-of-state PAC (ID#:)	Amount of Contribution (\$)
10/10/2024	Vidaurri Rodriguez & Reyna LLI			\$1,500.00
	Contributor address; City; State; Zi	ip Code		
	Edinburg , TX 78541			
Contributor's P	rincipal 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)			

MONET	TARY POLITICAL CONT	SCHEDULE A(J)1	
The Instru	ection Guide explains how to co	1 Total pages Schedule A(J)1: Sch: 13/13 Rpt: 16/32	
2 FILER NAME			3 Filer ID (Ethics Commission Filers) 00087926
4 Date 10/15/2024			7 Amount of Contribution (\$) \$1,500.00
	Edinburg , TX 78596		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC Zamora, Minerva Inez Contributor address; City; State; Zip Code		of-state PAC (ID#:) Code	Amount of Contribution (\$) \$500.00
	McAllen, TX 78501		
Contributor's Attorney	Principal Occupation	Contributor's Job Title Managing Partner	
Contributor's EKR Attorne	employer/law firm eys, LLP is a child, law firm of parent(s) (if any)	Law firm of contributor's s	spouse (if any)

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	al Committee Legal Services Salaries/Wages/Contract La		
L		The Instruction Guide explains how to complete this for		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Sch: 1/16 Rpt: 17/32	Compian Richardson, Regina (Ms.)	00087926	
4	Date	5 Payee name		
	10/22/2024	Academy		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$108.23	3901 Expwy. 83		
		McAllen, TX 78503		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descripti		
	EXPENDITURE	Advertising Expense	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense	
		Campaid		
		J Sampai	y··	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/O			
	Date	Payee name		
	10/23/2024	Blackwood, Marivelle		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$360.00	9007 22nd Ln.		
		McAllen, TX 78503		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descripti		
	EXPENDITURE	Advertising Expense	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense	
		I	gn items	
		Cumpan	y	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/O		55	
\vdash	Date	Payee name		
	10/22/2024	Payee name Brand Boosters		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$840.00	301 N. McColl		
		McAllen, TX 78501		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descripti		
	EXPENDITURE	I finding Expense	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense	
		signs	ii Ausuri, 17, uniucriulucri iiving expense	
		Jighs		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/O		5	
	· · · ·		.,	
	rme provided by Tayas E	thice Commission www.athice state ty us	Version V/4 1 0 49da51f7	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
_	Total names Colorabile 54				
1	Total pages Schedule F1:				
	Sch: 2/16 Rpt: 18/32	Compian Richardson, Regina (Ms.) 00087926			
4	Date	5 Payee name			
	10/09/2024	Brand Boosters			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,700.00	301 N. McColl			
	+ =,				
		Madles TV 70501			
		McAllen, TX 78501			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		campaign material			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	experientare to benefit 6/61	'			
	Date	Payee name			
	09/30/2024	CVS Pharmacy			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$156.40	1602 E. Bus. 83			
		Modes TV 70506			
		Weslaco , TX 78596			
	PURPOSE 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			
		event supplies			
		event supplies			
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	10/24/2024	Carrera Communications			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$7,500.00	135 Paseo Del Prado			
		Edinburg, TX 78539			
	DUDDOCT				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense 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			
		campaign consulting			
	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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/16 Rpt: 19/32 Compian Richardson, Regina (Ms.) 00087926 4 Date Payee name 10/23/2024 City of Weslaco 6 Amount (\$) Payee address; State; Zip Code \$100.00 255 S. Kansas Ave. Weslaco, TX 78596 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense camp site fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/23/2024 Dollar General Amount (\$) Payee address; City; State; Zip Code \$56.29 1200 W. Dove McAllen, TX 78504 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense event supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/12/2024 **Edinburg Chamber of Commerce** Amount (\$) Payee address: City: State; Zip Code \$25.00 602 W. University Dr. Edinburg, TX 78539 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee event ticket Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

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
Finding Expense Salaries/Manes/Contract Labor

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/16 Rpt: 20/32	Compian Richardson, Regina (Ms.) 00087926
4	Date	5 Payee name
	10/22/2024	Garcia, Hermila
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	204 Easy St.
		San Juan, TX 78589
8	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
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/21/2024	Garza, Luciano
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	3515 Pecan Grove
		Weslaco, TX 78596
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		GOTV
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
	Data	Development
	Date 10/08/2024	Payee name Garza, Luciano
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 3515 Pecan Grove
	Ψ230.00	3313 Fecan Giove
		Weslaco , TX 78596
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		GOTV
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	pondition to bonone o/or	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 5/16 Rpt: 21/32	Compian Richardson, Regina (Ms.) 00087926			
4	Date	5 Payee name			
	09/30/2024	Garza, Luciano			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$120.00	3515 Pecan Grove			
		Weslaco, TX 78596			
8	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 GOTV			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
	Date	Payee name			
	10/22/2024	H-E-B			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$40.59	820 S. Conway			
		Mission, TX 78572			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense			
	-	Check if Austin, TX, officeholder living expense food/beverage			
		1000/Deverage			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
-	Date	Payee name			
	10/21/2024	Hidalgo Co. Democratic Party			
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 814 Del Oro Ln.			
	φ5,000.00	614 Dei Old Lii.			
		Pharr , TX 78577			
	PURPOSE	1			
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Candidate/Officeholder/Political Committee			
		democratic gala sponsorship			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
L	expenditure to benefit C/OH				

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/Political Credit Card Payment	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)	٦	
Sch: 6/16 Rpt: 22/32	Compian Richardson, Regina (Ms.) 00087926		
4 Date	5 Payee name		
10/24/2024	Hobby Lobby		
6 Amount (\$) \$84.49	7 Payee address; City; State; Zip Code 7600 N. 10th St. McAllen, TX 78504		
8 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 event supplies		
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/23/2024	Jasso, Prisylla		
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 612 W. Nolana, Suite 250		
	McAllen, TX 78504		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign compliance and consulting		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/07/2024	Jasso, Prisylla		
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 612 W. Nolana, Suite 250		
	McAllen, TX 78504		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign consulting		
Complete ONLY if direct expenditure to benefit C/OH	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 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/16 Rpt: 23/32	Compian Richardson, Regina (Ms.) 00087926
4	Date	5 Payee name
	10/04/2024	Lamar Advertising
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	2001 Industrial Way
		San Benito, TX 78586
8	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 Austin, TX, officeholder living expense
		campaign billboards
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	10/06/2024	Lopez, Sara
H	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P O Box 202
		Robstown, TX 78380
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		GOTV
Г	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/18/2024	Lopez, Sara
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	P O Box 202
		Robstown, TX 78380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		event prize
\vdash	Complete ONII V if allows	Condidate/Officeholder name Office assists
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
\vdash		
L		

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: 8/16 Rpt: 24/32	Compian Richardson, Regina (Ms.) 00087926
4	Date	5 Payee name
	10/21/2024	Lopez, Sara
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	P O Box 202
		Robstown, TX 78380
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		GOTV
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	10/08/2024	Los Cuates Tacos
	Amount (\$)	Payee address; City; State; Zip Code
	\$540.00	online
		Facebook, TX 00000
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EX. ENDITORE	Check if Austin, TX, officeholder living expense
		event food
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Data	
	Date 10/17/2024	Payee name Luka
	Amount (\$) \$378.86	Payee address; City; State; Zip Code 7017 N. 10th St.
	Φ370.00	7017 N. 1001 St.
		Modillon, TV 70F04
	DUDD005	McAllen, TX 78504
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Event 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
		event supplies
	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 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 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:				
Sch: 9/16 Rpt: 25/32	Compian Richardson, Regina (Ms.) 00087926			
4 Date	5 Payee name			
10/04/2024	Maldonado, Lee			
6 Amount (\$)	7 Payee address; City; State; Zip Code 22418 Brushline Rd.			
\$350.00	22410 DIUSIIIIIE RU.			
	Mission, TX 78542			
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 magnets			
	magnets			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O	H			
Date	Payee name			
10/24/2024	Martinez, Isabel			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	P O Box 3971			
	5 h TV 70500			
	Edcouch , TX 78538			
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			
	GOTV			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date 10/15/2024	Payee name Martinez, Isabel			
10/15/2024	Martinez, Isabel			
Amount (\$) \$500.00	Payee address; City; State; Zip Code P O Box 3971			
Φ500.00	L O DOV 291T			
	Edcouch , TX 78538			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Salaries/Wages/Contract Labor			
	Check if Austin, TX, officeholder living expense GOTV			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O	H			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card F ayment	The Instruction Guide explains how to complete this	s form.		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 10/16 Rpt: 26/32	Compian Richardson, Regina (Ms.)	00087926		
4	Date	5 Payee name	-		
	10/24/2024	Mejia, Juan			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$200.00	507 W. 6th St.			
		Weslaco, TX 78596			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	ription		
	OF	, , , , , , , , , , , , , , , , , , ,	neck if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE		neck if Austin, TX, officeholder living expense		
		gene	eral contract labor		
_	0 1: 0 1: 0		05.		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	10/21/2024	Mejia, Juan			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$400.00	507 W. 6th St.			
		Weslaco, TX 78596			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	•		
	EXPENDITURE	Salaries/Wages/Cornitact Eabor	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense		
		Li oi Got			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI	1			
	Date	Payee name			
	10/23/2024	Munoz, Mario			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$100.00	917 Hall Ave.			
		Kingsville, TX 78363			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	ription		
	OF		neck if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE		neck if Austin, TX, officeholder living expense		
		lunci	neon sponsor		
	0 1		000		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
	experience to belieff 0/011				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
┝	T. 1				
1	Total pages Schedule F1: Sch: 11/16 Rpt: 27/32	2 FILER NAME Compian Richardson, Regina (Ms.) 3 Filer ID (Ethics Commission Filers) 00087926			
4	Date	5 Payee name			
	10/18/2024	Munoz, Mario			
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 917 Hall Ave.			
	\$100.00	917 Hall Ave.			
		Kingsville, TX 78363			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor			
	EXPENDITORE	Check if Austin, TX, officeholder living expense			
		GOTV			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	10/07/2024	Nueces Co. Democratic Party			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$437.50	2701 Morgan Ave.			
		Corpus Christi, TX 78405			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Advertising Expense			
	LXI LINDITORL	Check if Austin, TX, officeholder living expense			
		digital sign			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
	Date	Payee name			
	10/22/2024	Perez, Esmeralda			
	10/22/2024				
	Amount (\$)	Payee address; City; State; Zip Code			
	\$150.00	3303 Ciruelos St.			
		Palmview, TX 78572			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor			
	LAFLINDITORL	Check if Austin, TX, officeholder living expense			
		GOTV			
Т	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				

SCHEDULE F1

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

Event Expense Loan
Fees Office
Food/Beverage Expense Pollin
Gitt/Awards/Memorials Expense Printi
Lenal Services Salar

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: 12/16 Rpt: 28/32	Compian Richardson, Regina (Ms.) 00087926			
4	Date	5 Payee name			
	10/16/2024	Ramirez, Joseph			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,500.00	8014 Etienne Dr.			
		Corpus Christi, TX 78414			
8	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.			
		Check if Austin, TX, officeholder living expense campaign consulting			
		campaigh consuming			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
9	Complete ONLY if direct expenditure to benefit C/OI				
_					
	Date	Payee name			
	10/06/2024	Romero, Desiderio			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$500.00	1722 N. Alamo Rd.			
		Alamo, TX 78516			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense GOTV			
		SCIV			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
	Date	Payee name			
	10/24/2024	Romero, Desiderio			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$250.00	1722 N. Alamo Rd.			
		Alamo, TX 78516			
	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			
		GOTV			
	0 1. 0				
	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 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	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: 13/16 Rpt: 29/32	Compian Richardson, Regina (Ms.) 00087926		
4	Date	5 Payee name		
	10/06/2024	Sanchez, Abraham		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$500.00	3628 Spicewood Dr.		
		Edinburg, TX 78542		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Salaries/Wages/Contract Labor		
		Check if Austin, TX, officeholder living expense GOTV		
		GOTV		
_	Compulate ONLY if direct	Condidate/Office helder name Office accepts		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	•			
	Date	Payee name		
	10/24/2024	Sanchez, Abraham		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$250.00	3628 Spicewood Dr.		
		Edinburg, TX 78542		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense GOTV		
		3011		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			
	5 .			
	Date	Payee name		
	10/07/2024	Sanchez, Jr., Romulo		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$250.00	673 Webb St.		
		Mercedes, TX 78570		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Salaries/Wages/Contract Labor		
	ZA ZHOHORZ	COTY		
		GOTV		
_	Operation ONE VIII II	Ora didata (Office hadden granne		
	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 By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 14/16 Rpt: 30/32 Compian Richardson, Regina (Ms.) 00087926 4 Date Payee name 10/04/2024 Sharma, Karina 6 Amount (\$) Payee address; State; Zip Code \$250.00 1125 N. Expwy, C1 Brownsville, TX 78539 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee program ad Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/01/2024 Shell Amount (\$) Payee address; City; State; Zip Code \$68.13 1975 Ruben Torres Blvd Brownsville, TX 78521 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Theck if Austin, TX, officeholder living expense fuel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/25/2024 Signs 2 Go, LLC Amount (\$) Payee address: City; State; Zip Code \$1,836.00 304 E. Pecan Blvd. McAllen, TX 78501 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense signs 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 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 comp	nplete 1	this form.	
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 15/16 Rpt: 31/32	Compian Richardson, Regina (Ms.)		00087926	
4	Date	5 Payee name			
	10/15/2024	Signs 2 Go, LLC			
6	Amount (\$)	7 Payee address; City; State; Zip Code	de		
	\$2,297.07	304 E. Pecan Blvd.			
	,-,-	55 / 2 / 55 6 / 5 / 5 / 5 / 5 / 5 / 5 / 5 / 5			
		McAllen, TX 78501			
8	DUDDOCE	•	(h) =		
ľ	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	(D) De	escription Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Printing Expense	E	Check if Austin, TX, officeholder living expense	
			się	gns	
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	jht	Office held	
	expenditure to benefit C/OI	1			
	Date	Payee name			
	10/09/2024	Spec's Wine & Spirits			
_	Amount (\$)	Payee address; City; State; Zip Code	de		
	\$466.90	2700 W. Expwy 83			
		, ,			
		McAllen, TX 78589			
H	PURPOSE	T	(h) D	escription	
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense		Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense	
			ev	vent beverage supplies	
	Complete ONLY if direct	Candidate/Officeholder name Office sough	jht	Office held	
	expenditure to benefit C/OI	1			
	Date	Payee name			
	10/26/2024	Sunoco			
	Amount (\$)	Payee address; City; State; Zip Code	de		
	\$20.00	802 N. Jackson Rd.			
		Pharr , TX 78577			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
	OF	Travel In District	Ì	Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE			Check if Austin, TX, officeholder living expense	
			fu	iel card	
	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
L					

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 Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outpers extrapply not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	` ,
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 16/16 Rpt: 32/32	Compian Richardson, Regina (Ms.)	00087926
4	Date	5 Payee name	•
	10/21/2024	Tryon, Sylvia	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$40.00	2814 Rogers St.	
		· ·	
		Corpus Christi, TX 78405	
8	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.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			door prizes for event
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
L	experialitate to belieff 6/01	'	
	Date	Payee name	
	10/23/2024	Whitman, Benjamin	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	16984 Crystal Ln	
		•	
		Harlingen, TX 78552	
	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
			GOTV
┡	Operation ONLY if allowed	Out lide to (Office health an area	Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
ı			