CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00086297	ssion Filers)	2 Total page	es filed: 16
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFIC	E USE ONLY
OFFICEHOLDER NAME	The Honorable	Gia Jolene				
NAWE					Date Received	
						IICALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025	
	Josey	Garcia				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	ſY;	ZIP CODE	Date Hand-delive	red or Date Postmarked
OFFICEHOLDER	718 Amber Knoll	,				
MAILING ADDRESS					Receipt #	Amount
Change of Address	San Antonio, TX 78251				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Ms.	Gia Jolene				
	NICKNAME	LAST		SUFFIX		
	Josey	Garcia				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE)	ΔΡ	r / SUITE #; CITY;		STATE; ZIP CODE
TREASURER	718 Amber Knoll	, DONT LEASE),		1730HE#, 0HT,		STATE, ZI CODE
ADDRESS						
(Residence or Business)						
	San Antonio, TX 78251					
7 CAMPAIGN	AREA CODE PHO		EXTENSION			
TREASURER	(210) 781-9935		EXTENSION			
PHONE	(210) 701-9935					
8 REPORT						
TYPE	X January 15	30th day before	e election	Runoff	15th dav afte	r campaign treasurer
				L		(officeholder only)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report	(Attach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	10/27/2024	TI	HROUGH	12/31/2024	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	F F	Primary	Runoff	Other	
	11/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	State Representative Dis	rict 12/ Rever		State Representa		124
	State Representative DIS	LIGE IZA DENGI				
GO TO PAGE 2						
Eorms provided by Tr	exas Ethics Commission		thics.state.tx.u	e	11	ersion V4.1.0.5dd2ace2
i onno provided by Te		www.e	ວ.ວເαເຕ.ເአ.U	U U	ve	JULI VALLOUULACE2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2** 2 of 16

13 C / OH NAME García, Gia Jolene (The Honorable) 14 Filer ID (Efficis Commission Filers) 13 C / OH NAME García, Gia Jolene (The Honorable) 14 Filer ID (Efficis Commission Filers) 13 C / OH NAME Torona of patient combinators accepted ap patient emake by patient or manuatives to august the combines to august the combines to august the combines to august the combines of auch expenditures and combinators accepted approximation only if they receive notice of such expenditures. COMMITTEE TYPE COMMITTEE TARE COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE TYPE COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS 36 CONTRIBUTION 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS 3 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS MORE ELECTRONICALLY \$ 0.00 1. TOTAL POLITICAL CONTRIBUTIONS MADE ELECTRONICALLY \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS MARTEES OF LOANS) \$ 42.318.40 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS MADE ELECTRONICALLY \$ 0.00 2. TOTAL POLITICAL EXPENDITURES \$ 209.97 1. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 15,000.00 1. TOTAL POLITICAL CONTRIBUTIONS MAINT										
FROM POLITICAL COMMITTEE INFORMATIONS Inside the information and without the candidate's or differentiables's knowledge of consent. Candidates and differentiables are neglicities to report this information and if they receive notice of such expenditures. Image: Image	13 C / OH NAME	Garcia, Gia Jolene (T	he Honorable)			(Ethics Con	nmission Filers)			
	FROM POLITICAL	candidate / officeholder.	These expenditures ma	y have been made without t	he candidate's or offic	ceholder's kn	owledge or			
			COMMITTEE NAME							
		GENERAL	COMMITTEE ADDRES	SS						
COMMITTEE CAMPAIGN TREASURER ADDRESS COMMITTEE CAMPAIGN TREASURER ADDRESS COMTRIBUTION 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, SOCONTRIBUTION 1. OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) S CONTRIBUTION CONTRADING CONTRIBUTION CONTRADING CONTRIBUTION CONTRADING C		SPECIFIC								
16 CONTRIBUTION TOTALS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 42,318.40 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 42,318.40 4. TOTAL POLITICAL EXPENDITURES \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 298.97 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 15,000.00 0.015TANDING LOAN TOTALS 6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 0.00 17 AFFIDAVIT Iswear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Gia Jolene Garcia The Honorable Gia Jolene Garcia Signature of Candidate or Officeholder Swom to and subscribed before me, by the said, to certify which, witness my hand and seal of office. Signature of officer administering Pinted name of officer administering Title of officer administering cath			COMMITTEE CAMPA	GN TREASURER NAME						
TOTALS OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 42,318.40 EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 0.00 GONTRIBUTION 5. TOTAL POLITICAL EXPENDITURES \$ 298.97 CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 15,000.00 OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY \$ 0.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.			COMMITTEE CAMPAI	GN TREASURER ADDRES	S					
COTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 42,318,40 EXPENDITURE TOTALS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 0.00 6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 15,000.00 0.01STANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00 17 AFFIDAVIT I swear, or affirm, under penalty of periury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. \$ 0.00 The Honorable Gia Jolene Garcia Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Swom to and subscribed before me, by the said	Image:						0.00			
TOTALS Image: Contrained of the contred of the contrained of the contred of the contrained o				GUARANTEES OF LOANS)	\$	42,318.40			
CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 15,000.00 OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY LOAN TOTALS \$ 0.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. I he Honorable Gia Jolene Garcia Signature of Candidate or Officer administering Y he said						\$	0.00			
BALANCE REPORTING PERIOD \$ 15,000.00 OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY \$ 0.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. AFFIX NOTARY STAMP / SEAL ABOVE		4. TOTAL POLITIC	AL EXPENDITURES			\$	298.97			
LOAN TOTALS OF THE REPORTING PERIOD S 0.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Gia Jolene Garcia				AINTAINED AS OF THE LA	AST DAY OF THE	\$	15,000.00			
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Gia Jolene Garcia Signature of Candidate or Officer administering Vertex of officer administering				OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00			
Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said, this the, this the day of, 20, to certify which, witness my hand and seal of office. Signature of officer administering Printed name of officer administering Title of officer administering oath	17 AFFIDAVIT		true	and correct and includes al						
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office. Signature of officer administering Printed name of officer administering Title of officer administering oath				The Honora	able Gia Jolene Ga	rcia				
Sworn to and subscribed before me, by the said day of, 20, to certify which, witness my hand and seal of office. Signature of officer administering Printed name of officer administering Title of officer administering oath				Signature of	Candidate or Officeho	older				
of, 20, to certify which, witness my hand and seal of office. Signature of officer administering Printed name of officer administering Title of officer administering oath	AFFIX NO	FARY STAMP / SEAL ABO	OVE							
Signature of officer administering Printed name of officer administering Title of officer administering oath					, this the		day			
	ot	, 20, to ce	ertity which, withess my	hand and seal of office.						
		Signature of officer administering Printed name of officer administering Title of officer administering oath								

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 16 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Garcia, Gia Jolene (The Honorable) 00086297 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 41,963.22 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 355.18 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 298.97 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ TO FILER

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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/11 Rpt: 4/16	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		Jolene (The Honorable)				00086297	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/03/2024	ACEC					\$500.00
		6 Contributor address; City; St					
	Duin sin stars a	Austin, TX 78701	<u>`</u>				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/03/2024	Abuabara, Rosey					\$25.00
		Contributor address; City; St			1		
		San Antonio, TX 78230					
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe			Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/15/2024	Act For Texas Classroom					\$1,500.00
		Contributor address; City; St	ate; Zip Code				
		Austin, TX 78767					
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
			,		,		
╞	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/03/2024	Action Behavior Centers T					\$1,000.00
		Contributor address; City; St	ate; Zip Code		1		
		Austin, TX 78746			Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
╞	Data	Full name of contributor			_		
	Date 11/04/2024	Andrade, Hope	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	11/04/2024		ata, Zin Cada				\$100.00
		Contributor address; City; St	ale; Zip Code				
		San Antonio, TX 78205					
	Principal occu	L pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	Entrepeneur			self			
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	The Instru	ction Guide explains how to complete this f	iorm.		Total pages Schedule A1: Sch: 2/11 Rpt: 5/16	
2	FILER NAME			_	Filer ID (Ethics Commissio	on Filers)
_		Jolene (The Honorable)			00086297	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/08/2024	Arechiga, Jason				\$250.00
		6 Contributor address; City; State; Zip Code				
		San Antonio, TX 78259				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Developer		The NRP Group			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/12/2024	Atlantic Pacific Communities LLC Operating Acc				\$1,000.00
	Contributor address; City; State; Zip Code					
		Miami, FL 33136				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	11/23/2024	BNSF Rail PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Forth Worth, TX 76161-0039				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Τ	Amount of Contribution (\$)	
	12/02/2024	Brannan, Ryan				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78746				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney	•	Brannan & Associates			
	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Т	Amount of Contribution (\$)	
	10/28/2024	Campos, Elizabeth	/			\$500.00
	10/20/202	·····				φ000.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78210				
	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
	Owner		Self employer	3)		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/11 Rpt: 6/16	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Garcia, Gia	Jolene (The Honorable)	ļ		00086297	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/06/2024		ļ			\$250.00
		6 Contributor address; City; State; Zip Code		1		
			ļ			
		San Antonio, TX 78257				
8			9 Employer (See Instructions)	;)		
	Auto Dealer		Cavender Auto	_		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/14/2024	Charter Communications, Inc Texas Pac				\$500.00
	Contributor address; City; State; Zip Code			1		
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<u> </u>	<u></u>	Austin, TX 78701-5007		Ĺ		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	··· 200.00
	12/14/2024	Charter Schools Now PAC				\$1,000.00
		Contributor address; City; State; Zip Code	ļ			
			ļ			
		Austin, TX 78704	ļ			
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ل</u> ۱		
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╞═	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	11/08/2024	Clay-Flores, Rebeca	,		, and an e e e e e e e e e e e e e e e e e e	\$500.00
		Contributor address; City; State; Zip Code		ł		-
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		San Antonio, TX 78214				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	County Com	nmissioner PCT 1	Bexar County			
	Date	Full name of contributor X out-of-state PAC (ID#: C		Γ	Amount of Contribution (\$)	
	10/30/2024	Communications Workers of America-COPE PC	с I			\$1,000.00
		Contributor address; City; State; Zip Code	,	1		
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			ļ			
		Washington, DC 20001	/			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
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SCHEDULE	A1
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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 7/16	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
[Jolene (The Honorable)				00086297	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/03/2024	Congress Avenue Partner	's PAC				\$500.00
		6 Contributor address; City; Sta			1		
		Austin TV 79701					
Ļ	Drincinal occi	Austin, TX 78701		9 Employer (See Instructions	<u> </u>		
0	Piiiicipai occu)		»)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/14/2024	Eiland, A. Craig					\$350.00
	Contributor address; City; State; Zip Code				1		
\vdash	Dringing occ	Austin, TX 78701		Employer (See Instructions	<u> </u>		
	Attorney	pation / Job title (See Instructions))	Employer (See Instructions Eiland & Bonnin	5)		
╞		E. II some of contributor			1	Array of Captribution (f)	
	Date 12/13/2024	Full name of contributor Fernadez, Anita	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$250.00
	12/13/2024						φ200.00
		Contributor address; City; Sta	ale; zip coue				
		San Antonio , TX 78213					
	Principal occu	pation / Job title (See Instructions)	,))	Employer (See Instructions	5)		
	Consultant			Self Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/10/2024	Friends Of San Antonio Le		Of Texas Excellence			\$500.00
		Contributor address; City; Sta					
		San Antonio, TX 78249-16	e00				
┝	Drincinal occu	ipation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Επισμαί στου)		<i>.</i> ,		
╞	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/14/2024	Grant, Kathy					\$250.00
		Contributor address; City; Sta	ate; Zip Code				
	<u></u>	Austin, TX 78701	<u>.</u>		Ļ		
		pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Lobbyist			Kathy Grant Group			

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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/11 Rpt: 8/16	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		Jolene (The Honorable)				00086297	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/30/2024	HOSPAC					\$1,000.00
		6 Contributor address; City; St	ate; Zip Code				
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/07/2024	Hawkins, Barbara	_				\$750.00
		Contributor address; City; St					
	San Antonio , TX 78218						
		pation / Job title (See Instructions)	Employer (See Instructions)		
	State rep			State of Texas			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/09/2024	Herring, Christopher					\$10.00
		Contributor address; City; St	ate; Zip Code				
		Anna, TX 75408					
⊢	Principal occu	L pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe		,	Not Employed	,		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/09/2024	Herring, Christopher					\$10.00
		Contributor address; City; St	ate: Zip Code				
		Anna, TX 75408					
		pation / Job title (See Instructions)	Employer (See Instructions)		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/10/2024	Hoyler, Jerry					\$2,000.00
	Contributor address; City; State; Zip Code						
		Con Antonio AZ 05270					
⊢	Dringing	San Antonio, AZ 85379	\ \	Employer (Cashatturting			
	Principal occu Director	pation / Job title (See Instructions)	Employer (See Instructions Westover Rehabilitation		antor	
⊢					<u> </u>	and	

	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 6/11 Rpt: 9/16		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
ľ		Jolene (The Honorable)		1	00086297		
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)		
	12/02/2024	Moak Casey PAC				\$500.00	
		6 Contributor address; City; State; Zip Code		1			
	ļ						
	ļ						
		Austin, TX 78701					
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u>)		Amount of Contribution (\$)		
	12/04/2024	O'Rourke, Robert				\$250.00	
	ļ	Contributor address; City; State; Zip Code		·			
	ļ						
	ļ	El Paso, TX 79902					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Not Empolye	≥d	Not Employed				
╞	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)		
	12/14/2024	Owens, Bonita				\$20.22	
	ļ	Contributor address; City; State; Zip Code		·			
	ļ	San Antonio, TX 78260					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Bussiness O	wner	AWN Leadership Consu	nsulting			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	12/05/2024	PEDIATRIC DENTISTS POLITICAL ACTION			• •	\$500.00	
	1	Contributor address; City; State; Zip Code		·			
	ļ						
		Mckinney, TX 75069					
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>)	1	Amount of Contribution (\$)		
	12/13/2024	Puente, Robert			, and <u>an</u> an	\$500.00	
	_	Contributor address; City; State: Zip Code		·		T -	
	ļ	Contributor address, City, State, Eip Code					
	ļ						
	ļ	San Antonio, TX 78229					
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	CEO		SAWS	0)			
_			0,110				

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/16	
2	FILER NAME			3 Filer ID (Ethics Commission	on Filers)
		Jolene (The Honorable)		00086297	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
	12/09/2024	Red Rock Texas Pac			\$500.00
		6 Contributor address; City; State; Zip Code			
		Austin, TX 78701			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
		· · · · ·			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	10/31/2024	Rios, Crystal			\$124.00
		Contributor address; City; State; Zip Code			
		Austin, TX 78704			
	Principal occu	pation / Job title (See Instructions)	3)		
	Director of SBOE engagement Charter Schools now P			AC	
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	12/10/2024	SA Prof Firefighters Assoc Local 624)		\$1,624.00
	12/10/2024	-			Ψ1,024.00
		Contributor address; City; State; Zip Code			
		San Antonio, TX 78201-0000			
	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
	i incipai occu			"	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	12/10/2024	Salazar, Placido			\$100.00
		Contributor address; City; State; Zip Code			
		Universal City, TX 78148-4124			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	
	Retired				
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	10/30/2024	San Antonio Professional Firefighters Associatio	n Local 624		\$1,500.00
		Contributor address; City; State; Zip Code			+_,
		Contributor address, City, State, Zip Code			
		San Antonio, TX 78201-0000			
	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions) ;)	
				·/	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/11 Rpt: 11/16	
2	FILER NAME		i	3	Filer ID (Ethics Commission	ו Filers)
	Garcia, Gia	Jolene (The Honorable)			00086297	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/04/2024	Sandoval, Gina				\$50.00
	l	6 Contributor address; City; State; Zip Code		1		
	I					
	l					
	I	San Antonio, TX 78249				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	IT systems A	analyst	Fin svc co.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/08/2024	Sandoval, Gina				\$50.00
	Contributor address; City; State; Zip Code			ł		
	l					
	l					
	l	San Antonio, TX 78249				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
	IT systems A	Analyst	Fin svc co.			
╞	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/14/2024	Serna Jr, Baltazar	,		Allound of Continuation (+)	\$250.00
		Contributor address; City; State; Zip Code		ł		Ψ200.00
	I	Continuouol address, City, State, Lip Code				
	l					
	I	San Antonio, TX 78258				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Atttorney		Serna & Serna	,		
╞	-	Full name of contributor Out-of-state PAC (ID#:			Amount of Contribution (\$)	
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#: Sundt Texas PAC			Amount of Contribution (\$)	\$500.00
	12/14/2024					ΦΟΟΟΟΟ
	l	Contributor address; City; State; Zip Code				
	I					
	I	Tempe, AZ 85282				
⊢	Drincinal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Phillipai occu	pation / Job title (See Instructions)		5)		
⊨				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	****
	11/23/2024	TENET Healthcare Corporation PAC				\$250.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
∟		Dallas, TX 75254		Ļ		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	3)		
L						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/11 Rpt: 12/16	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
		Jolene (The Honorable)			00086297	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/04/2024	TXCPA PAC				\$500.00
		6 Contributor address; City; State; Zip Code				
		Addison, TX 75001				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/03/2024	TXTA TRUCKPAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 75701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/14/2024	Texans for Lawsuit Reform PAC	· · · · · · · · · · · · · · · · · · ·			\$10,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/04/2024	Texas Beverage Alliance				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/13/2024	Texas Dairymen PAC	······································			\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78711				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	I;)		
		· · · · · · · · · · · · · · · · · · ·				
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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 10/11 Rpt: 13/16	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		- Jolene (The Honorable)			00086297	,
4	Date	ate 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	
	12/12/2024	Texas Land Title Association PAC				\$500.00
		6 Contributor address; City; State; Zip Code		1		
		1				
		Austin, TX 78703				
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instruction			5)		
	Date	Full name of contributor out-of-state PAC (ID)#:)	Γ	Amount of Contribution (\$)	
	12/05/2024	Texas Trial Lawyers Association PAC				\$1,500.00
		Contributor address; City; State; Zip Code		1		
		1				
		Austin, TX 78701				
	Principal occu	<pre>ipation / Job title (See Instructions)</pre>	Employer (See Instructions)	5)		
_		<u> </u>		—		
	Date)		Amount of Contribution (\$)	+
	11/30/2024					\$250.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ج)		
	·	, , , , , , , , , , , , , , , , , , ,		-,		
	Date	Full name of contributor out-of-state PAC (ID)#:)	Γ	Amount of Contribution (\$)	
	12/10/2024	VALERO POLITICAL ACTION COMMITTEE				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		1				
		1				
	San Antonio, TX 78269					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
				<u> </u>		
	Date	Full name of contributor X out-of-state PAC (ID	#: <u>C00493502</u>)		Amount of Contribution (\$)	
	10/27/2024					\$1,500.00
	Contributor address; City; State; Zip Code					
		1				
		Rancho Cordova, CA 95670				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Г шора осса			"		

	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 11/11 Rpt: 14/16	
2	FILER NAME			2	Filer ID (Ethics Commissio	on Eilers)
Ĺ		NAME a, Gia Jolene (The Honorable)			00086297	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/02/2024	Valdez, Jerry				\$250.00
		6 Contributor address; City; State; Zip Code		1		
L		Austin, TX 78711				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Consultant		Self employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/29/2024	Walker, Kwame	· · · · · · · · · · · · · · · · · · ·		()	\$500.00
		Contributor address; City; State; Zip Code				
		Austin TX 78705				
⊢		Austin, TX 78705		Ĺ		
		Principal occupation / Job title (See Instructions) Employer (See Instruction		5)		
	Lobbyist		McGuirewoods			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/03/2024	Wholesale Beer Distributors of Texas PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/23/2024	Zachry Corporation PAC	/			\$1,000.00
	11/23/2024					φ1,000.00
		Contributor address; City; State; Zip Code				
L		San Antonio, TX 78265-3240				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/16			
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Garcia, Gia	Jolene (The Honorable)	00086297			
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution		
11/22/2024	Shannon, Fred		contribution (\$) description \$350.00 I Fundraising Emails		
	7 Contributor address; City; State; Zip Code				
	Austin, TX 78768		Check if travel outside of Texas. Complete Schedule T.		
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-JUDICIAL) (See instructions)			
Self		Self			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)		
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description		
10/27/2024			\$5.18 I AGFUND Website		
	Contributor address; City; State; Zip Code		Endorsement		
	Waco, TX 76702-2689		I Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions) Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
Contributor's	employer/law firm (FOR JUDICIAL)				
lf					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee 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)
	The Instruction Guide explain		
1 Total pages Schedule F1:		3	Filer ID(Ethics Commission Filers)
Sch: 1/1 Rpt: 16/16	Garcia, Gia Jolene (The Honorable)		00086297
4 Date	5 Payee name	I I I I I I I I I I I I I I I I I I I	
11/22/2024	Salcedo, Ramon		
6 Amount (\$) \$298.97	718 Amber Knoll	te; Zip Code	
	San Antonio, TX 78251		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Transportation Equipment And Relate Expense	ed Check if travel out	tside of Texas. Complete Schedule T. X, officeholder living expense Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held