CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00026389		2 Total pages filed: 16		
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE USE ONLY		
OFFICEHOLDER NAME	The Honorable	Joseph C.			Date Received		
					ELECTRONICALLY FILED		
	NICKNAME	LACT		SUFFIX	01/05/2025		
	NICKNAME Joe	LAST Pickett		SUFFIX	01/00/2020		
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked		
MAILING ADDRESS	3606 Wooster Lane				Receipt # Amount		
Change of Address	El Paso, TX 79936				Date Processed		
<u> </u>					Date 1100cssed		
					Date Imaged		
5 CAMPAIGN	MS / MRS / MR	FIRST		MI			
TREASURER NAME		Joseph C.					
INAIVIE							
	NICKNAME	LAST		SUFFIX			
		Pickett					
6 CAMPAIGN	STREET ADDRESS (NO P	O BOX PLEASE);	AP ⁻	T / SUITE #; CITY;	STATE; ZIP CODE		
TREASURER ADDRESS	3606 Wooster Ln.						
(Residence or Business)	El Paso, TX 79936						
	Li 1 430, 17 7 7 9 3 3 0						
7 CAMPAIGN TREASURER		ONE NUMBER E	EXTENSION				
PHONE	(915) 637-5707						
• 555057							
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after campaign treasurer		
					appointment (officeholder only)		
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)		
a DEDIOD	Month Day Year				Van		
9 PERIOD COVERED	Month Day Year 07/01/2024		IROUGH	Month Day 12/31/202	Year 24		
	01/01/2024	• • • • • • • • • • • • • • • • • • • •	11.00011	12/31/202	.+		
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month Day Year	· P	rimary	Runoff	X Other		
			eneral	Special	not at this time, possible		
			crioral	Бореона	candidate		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)		
	State Representative Dis	strict 79 El Paso		State Represent			
	1			1			
	GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 16

13 C / OH NAME	Pickett, Joseph C. (T	xett, Joseph C. (The Honorable) 14 Filer ID 00026389			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	holder's know	ledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
Ш	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$	587.32	
	4. TOTAL POLITIC	AL EXPENDITURES		\$	14,860.16
CONTRIBUTION BALANCE	REPORTING PE			\$	232,617.23
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
		The Henry	rable Joseph C. Picke	o#	
			Candidate or Officehold		
		J.g. idd 6 01			
AFFIX NO	TARY STAMP / SEAL ABO	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering	oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			3 of	16			
18 FILER NAME Pickett, Joseph C. (The Honorable) 19 Filer ID (Ethics Commission Filers) 00026389							
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1. X SCHE	DULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00			
2. X SCHE	DULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3. X SCHE	DULE B: PLEDGED CONTRIBUTIONS		\$	0.00			
4. X SCHE	DULE E: LOANS		\$	0.00			
5. X SCHE	DULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 14,29	92.74			
6. X SCHE	DULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
7. X SCHE	DULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00			
8. X SCHE	DULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 50	67.42			
9. X SCHE	DULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00			
10. SCHEE	DULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11. SCHE	DULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
12. SCHE	DULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I ER	RETURNED	\$				

PLE	DGED CONTRIBUTIONS		SCHEDULE B			
т	he Instruction Guide explains how to com	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/16				
2 FILER N.	AME Joseph C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026389			
<u></u>	OF UNITEMIZED PLEDGES		\$ 0.0			
5 Date	6 Full name of pledgorout-of-state PAC (7 Pledgor Address; City; State; Zip C		8 Amount of pledge (\$) 9 In-kind description (If applicable)			
40 Data da al	And the Contraction		Check if travel outside of Texas. Complete Schedule			
10 Principai	occupation / Job title (See Instructions)	11 Employer (See In	structions)			

	LOANS						SCHEDUL	ΕE
	The Instruction	The Instruction Guide explains how to complete this form					schedule E: t: 5/16	
2	FILER NAME Pickett, Joseph	C. (The Honorable)				er ID (Eth	ics Commission F	ilers)
4	TOTAL OF UN	IITEMIZED LOANS			_ _	\$		0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:) 9 L	oan Amount (\$)	
6	Is lender a financial institution?	8 Lender address; City	r; State;	Zip Code		10 11	nterest Rate	
						11 N	Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	าร)	•		
14	Description of Coll None	lateral		15 Check if personal funds v	vere dep		political account See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor				19 A	Amount Guarantee	ed (\$)
	not applicable	18 Guarantor address; City	r; State;	Zip Code				
20	Principal occupation	on		21 Employer (See Instruction	าร)			

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

	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: 1/9 Rpt: 6/16	Pickett, Joseph C. (The Honorable) 00026389
4	Date	5 Payee name
	10/09/2024	Alpha Insurance
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$279.00	10780 Pebble Hills
		El Paso, TX 79935
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related
		Expense Check if Austin, TX, officeholder living expense insurance for vehicle used in community clean up
		insulance for vehicle used in community clear up
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	11/23/2024	Christ Child
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	10829 Sombra Verde
	Ψ30.00	10020 Sombia Verae
		El Paso, TX 79935
_	PURPOSE	
	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 Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/30/2024	El Paso Lions Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	1733 Trawood
		El Paso, TX 79925
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schodule F1:	· · · · · · · · · · · · · · · · · · ·
_	Total pages Schedule F1: Sch: 2/9 Rpt: 7/16	Pickett, Joseph C. (The Honorable) 00026389
4	Date	5 Payee name
	10/10/2024	El Pasoans Fighting Hunger
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	9541 Plaza Circle
		El Paso, TX 79927
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1 · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	12/31/2024	El Pasoans Fighting Hunger
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	9541 Plaza Circle
		El Paso, TX 79927
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Carididate/Officerioide//Political Committee Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
L	10/07/2024	Gonzalez, Abe
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	11701 Henry Phipps
		El Paso, TX 79936
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense
		Expense Check if Austin, TX, officeholder living expense Parade vehicle repair and transport
		. adde remeie repair and dansper
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

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

Transportation Equipment & Related Expense Travel in District Travel Out of District

Solicitation/Fundraising Expense

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: 3/9 Rpt: 8/16 Pickett, Joseph C. (The Honorable) 00026389 4 Date Payee name 09/14/2024 Isabel Ceballos Campaign 6 Amount (\$) Payee address; City; State; Zip Code \$500.00 4740 Cumberland El Paso, TX 79903 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 Campaign contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/25/2024 LULAC Council #335 Amount (\$) Payee address; City; State; Zip Code \$190.00 8612 Whitus El Paso, TX 79925 **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 Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/29/2024 Lilly Limon Campaign Amount (\$) Payee address: City; State; Zip Code \$500.00 1301 Lonewood El Paso, TX 79925 **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 campaign contribution Complete ONLY if direct Candidate/Officeholder name Office held Office sought 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 Comm

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cabadula F1:	
_	Total pages Schedule F1:	
	Sch: 4/9 Rpt: 9/16	Pickett, Joseph C. (The Honorable) 00026389
4	Date	5 Payee name
	11/08/2024	Lilly Limon Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1301 Lonewood
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		FI D TV 7000F
		El Paso, TX 79925
8	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
		Campaign contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/12/2024	Mexican American Cultural Institute
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	Azalea Pl.
		El Paso, TX 79922
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Pouso nama
		Payee name Manies Dayes Compaign
	09/29/2024	Monica Reyes Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	6004 Dona Beatriz
		El Paso, TX 79932
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Campaign contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 5/9 Rpt: 10/16	Pickett, Joseph C. (The Honorable) 00026389
4	Date	5 Payee name
	07/31/2024	Munoz, Ruben
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	3648 Wooster
		El Paso, TX 79936
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Community clean up, trash weed removal
		Community should up, that it wood formoval
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/31/2024	Munoz, Ruben
	Amount (\$)	Payee address; City; State; Zip Code
	\$767.00	3648 Wooster
		El Paso, TX 79936
	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.
		Community clean up, weed trash removal, ponding
		areas of city
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/30/2024	Munoz, Ruben
	Amount (\$)	Payee address; City; State; Zip Code
	\$615.00	3648 Wooster
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		El Paso, TX 79936
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Community clean up, trash wees, street medians
		Community clean up, trash wees, street medians
	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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to co	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 6/9 Rpt: 11/16	Pickett, Joseph C. (The Honorable)		00026389
4	Date	5 Payee name		
	10/31/2024	Munoz, Ruben		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$755.00	3648 Wooster		
		FI 5 TV 70000		
		El Paso, TX 79936	1	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor		Check if Austin, TX, officeholder living expense
				community clean up, trash, weeds, community center
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office so	ught	Office held
	Date	Payee name		
	11/30/2024	Munoz, Ruben		
	Amount (\$) \$758.00	Payee address; City; State; Zip C 3648 Wooster	ode	
	\$156.00	3040 WOOSIEI		
		El Paso, TX 79936		
	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Community clean up, weeds, trash,
	Complete ONLY if direct	Candidate/Officeholder name Office so	uaht	Office held
	expenditure to benefit C/O		agiit	Silice Hold
	Date	Payee name		
	12/23/2024	Munoz, Ruben		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$750.00	3648 Wooster		
		El Paso, TX 79936		
	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
				Community clean up trash weed removal, median
				clean up
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/Ol	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/\	Wages	s/Contract Labor		OTHER (enter a	category not listed a	bove)
	·		The Instruction Guide e	xplains how to co	omple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 7/9 Rpt: 12/16	Pickett, Jos	seph C. (The Honoral	ole)				00026389		
4	Date	5 Payee name	•							
	09/04/2024	Regal Print	ing							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$2,417.00	21-33 TAI	LIN PAI ROAD							
		KWAI CHU	NG KOWLOON Hon	g Kong						
8	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Expe		or and concaute,		_ :	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					_		officeholder living		
						Children's bo	ok	printing for s	school reading	programs
						through city				
9	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ught			Office he	eld	
	experialiture to benefit C/Oi									
	Date	Payee name								
	10/16/2024	Regal Print	ing							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$2,417.00	21-33 TAI	LIN PAI ROAD							
		KWAI CHU	ING KOWLOON Hon	g Kong						
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Printing Ex	pense					de of Texas. Com		
						ш		officeholder living		الم ما
						balance for cl program in so			ormung for rea	laing
	Commiste ONII V if diseast	Condidate/Of	ii aa la la la la uu uu uu uu	Office	. e de é				اما	
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ugni			Office he	eiu	
		г								
	Date	Payee name								
	09/10/2024		ssion Of El Paso							
	Amount (\$)	Payee addre		State; Zip Co	ode					
	\$100.00	209 N. Lee	Street							
		El Paso, T	K 79901							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE		ns/Donations Made E					de of Texas. Com		
		Candidate/	Officeholder/Political	Committee		Donation	, IX,	officeholder living	expense	
						טוומנוטוו				
	Complete ONLY if direct	Candidata/Of	iceholder name	Office sou	labt			Office he	old.	
	expenditure to benefit C/OI		icentituel Hame	Onice Sol	agrit			Onice ne	au	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 8/9 Rpt: 13/16	Pickett, Joseph C. (The Honorable)
4	Date	5 Payee name
	12/31/2024	Rescue Mission Of El Paso
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	209 N. Lee Street
		El Paso, TX 79901
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	09/30/2024	Ruben Gonzalez Campaign
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 1400 Desierto Rico
	Φ300.00	1400 Desietto Rico
		El Paso, TX 79912
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAI LINDITORE	Candidate/Officeholder/Political Committee
		campaign contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	11/02/2024	VISA
	Amount (\$)	Payee address; City; State; Zip Code
	\$132.00	P.O. Box 15298
		Wilmington, DE 19850-5298
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign meeting
		Campaign meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

	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: 9/9 Rpt: 14/16	Pickett, Joseph C. (The Honorable) 00026389						
4	Date	5 Payee name						
	11/01/2024	VISA						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$293.23	P.O. Box 15298						
		Wilmington, DE 19850-5298						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		payment for itemized charges						
		payment is named sharges						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	experiditure to beliefit C/O	<u>'</u>						
	Date	Payee name						
	11/22/2024	VISA						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$142.19	P.O. Box 15298						
		Wilmington, DE 19850-5298						
PURPOSE		(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE		Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		payment for itemized expenses						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	1						

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete th	nis form.		.,	,		
1 Total pages Schedule F4:	otal pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)				
Sch: 1/2 Rpt: 15/16	Pickett, Joseph C. (00026389					
4 CREDIT CARD ISSUER	Name of final	EXPEND	DF UNITEMIZED DITURES ED TO A CREDIT	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$132.00	11/02/2024							
7 PAYEE	(a) Payee name Bella Sera		(b) Payee address; City, State, Zip of 3512 N. Yarbrough				Zip Code		
			El Paso, T						
8 PURPOSE OF	(a) Category (See Categories listed at the top	(b) Description							
EXPENDITURE	Consulting Expense	Campaign meeting							
X Political									
Non-Political	(c) Check if travel outside	(c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH			_						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$133.19	10/12/2024							
PAYEE	(a) Payee name (b) Payee address;			ddress;	City,	State,	Zip Code		
	cafe east			ias					
		El Paso, TX 79936							
PURPOSE OF	(a) Category	(b) Descript							
EXPENDITURE X Political	(See Categories listed at the top of this schedule) Event Expense		Campaign breakfast						
I <u>=</u>				_					
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	oense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought		Office held					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$88.62	10/26/2024							
PAYEE	(a) Payee name	I	(b) Payee a	ddress;	City,	State,	Zip Code		
			3512 N. Yarbrough						
	Bella Sera								
			El Paso, T	X 79925					
PURPOSE OF	(a) Category		(b) Descript						
EXPENDITURE	(See Categories listed at the top Event Expense	Campaign	lunch						
X Political									
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held								
· -									

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(9.	,	,	
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
Sch: 2/2 Rpt: 16/16	Pickett, Joseph C. (00026389				
4 CREDIT CARD ISSUER	Name of final	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$61.24	11/11/2024						
7 PAYEE	(a) Payee name cafe east		(b) Payee 11251 R	•	City,	State,	Zip Code	
				TX 79936				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	(b) Description						
<u></u>	Event Expense	of this schedule)	Campaig	ın meeting				
X Political	'							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
9 Complete ONLY if direct	Candidate/Officeholder	e sought		Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$71.42	10/05/2024						
PAYEE	(a) Payee name (b) Payee address;			City,	State,	Zip Code		
	Village Inn			wood				
		El Paso, TX 79935						
PURPOSE OF	(a) Category	(b) Description						
EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Event Expense			Campaign breakfast				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living ex	nense		
Complete ONLY if direct	Candidate/Officeholder		Check if Austin, TX, officeholder living expense e sought Office held					
expenditure to benefit C/OH		g						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$80.95	11/19/2024						
PAYEE	(a) Payee name	l	(b) Payee	address;	City,	State,	Zip Code	
	Franky's Restaurant		9828 Montana					
			El Paso,	TX 79925				
PURPOSE OF	(a) Category		(b) Descri	otion				
EXPENDITURE	(See Categories listed at the top Event Expense	Campaig	n meeting					
X Political								
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held							
	•							