## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to con	plete this form.	1 Filer ID (Ethics Comm 00035579		<ol> <li>Total pages fil</li> <li>2</li> </ol>	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		JSE ONLY
OFFICEHOLDER	The Honorable	Roberto D.				
NAME		Roberto D.			Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025	
	Bobby	Guerra				
	-					
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; A	PT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivered or	Date Postmarked
MAILING	10213 N. 10th St.					
ADDRESS					Receipt #	Amount
Change of Address	McAllen, TX 78504					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-	
TREASURER	Mrs.	Olga C.				
NAME		-				
	NICKNAME	LAST		SUFFIX		
		Gabriel				
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	AP	T / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	4512 N. 4th Street					
ADDITESS						
(Residence or Business)	MaAllan TV 79504					
	McAllen, TX 78504					
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER			EXTENSION			
PHONE	(956) 207-5125					
8 REPORT TYPE				D	1 April 1	
	X January 15	30th day befor	e election	Runoff	15th day after car appointment (offic	
	July 15	8th day before	election	Exceeded modified	Final Report (Atta	
				reporting limit		,
9 PERIOD	Month Day Yea	r		Month Day	Year	
COVERED	10/27/2024		HROUGH	12/31/2024		
	10/2/12024	1	nixoogn	12/31/2024	+	
10 ELECTION	ELECTION DATE			ELECTION TYPE	<b>—</b>	
	Month Day Yea	r 🛛 🖓	Primary	Runoff	Other	
	11/05/2024		General	Special		
					<i>(</i> ()	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	State Representative D	ISTRICT 41		State Representa	ative District 41	
		<b>CO</b> <sup>1</sup>				
		GU	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	S	Versio	on V4.1.0.5dd2ace2

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

Guerra, Roberto D. (The Honorable)

13 C / OH NAME

#### FORM C/OH COVER SHEET PG 2 2 of 23

(Ethics Commission Filers)

14 Filer ID

		0003	35579	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures mad These expenditures may have been made without the cand d officeholders are required to report this information only if t	lidate's or officeholder'	's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN PLED ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONI		0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	22,238.70
EXPENDITURE TOTALS	\$	1,097.83		
	4. TOTAL POLITIC	CAL EXPENDITURES	\$	54,085.33
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DATERIOD	Y OF THE \$	32,380.92
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIE OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE RTING PERIOD	LAST DAY	0.00
17 AFFIDAVIT	-			
		I swear, or affirm, under penalty of perju true and correct and includes all informa under Title 15, Election Code.		
		The Honorable Ro	berto D. Guerra	
		Signature of Candida	ate or Officeholder	
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid, this	sthe	day
		ertify which, witness my hand and seal of office.		
Signature of offic	cer administering	Printed name of officer administering	Title of officer admin	istering oath
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us	Versio	n V4.1.0.5dd2ace2

#### FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 23 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Guerra, Roberto D. (The Honorable) 00035579 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 21,576.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 662.70 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 48,466.61 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. 5,618.72 \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1:	
					Sch: 1/6 Rpt: 4/23	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_		erto D. (The Honorable)	Ļ	00035579		
4	Date 10/31/2024	5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	ቀ1 000 00
	10/31/2024	ASSOCIATION OF TEXAS PROFESSIONAL ED	JULATURS PAC			\$1,000.00
	I	6 Contributor address; City; State; Zip Code				
	I					
	I	AUSTIN, TX 78752-3792				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
			l			
	Date	Full name of contributor out-of-state PAC (ID#:	)	$\square$	Amount of Contribution (\$)	
	10/29/2024 Alcantar, Salvador (Mr.)					\$25.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
<u> </u>		Mission, TX 78572				
		ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Optometrist		Shah Eye Center	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/12/2024	Centerpoint Energy INC Political Action Committ	.ee			\$1,000.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Houston, TX 77210				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>ר</u>		
	·			9		
_	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/29/2024	Chang, Vanessa L. (Ms.)				\$100.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		McAllen, TX 78501				
		ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Optometrist		Nolana Eye Care	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/12/2024	Charter Communications Inc PAC				\$1,000.00
	I	Contributor address; City; State; Zip Code				
	I					
	l	Austin, TX 78701				
┝─	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>ר</u>		
	Г шора ооса			<b>'</b>		
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2       FILER NAME Guerra, Roberto D. (The Honorable)       3       Filer ID (Ethics Commiss 00035579         4       Date 10/29/2024       5       Full name of contributor out-of-state PAC (ID#:) Deakins, Jennifer (Ms.)       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       Irving, TX 75063       Irving, TX 75063	ion Filers) \$50.00
4 Date       5 Full name of contributor out-of-state PAC (ID#:)       7 Amount of Contribution (\$)         10/29/2024       Deakins, Jennifer (Ms.)       6 Contributor address; City; State; Zip Code	\$50.00
10/29/2024 Deakins, Jennifer (Ms.) 6 Contributor address; City; State; Zip Code	\$50.00
6 Contributor address; City; State; Zip Code	\$50.00
6 Contributor address; City; State; Zip Code	
Irving, TX 75063	ľ
Irving, TX 75063	
8 Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)	
Optometrist University of Houston	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	
10/31/2024 Exxon Mobile PAC	\$1,000.00
Contributor address; City; State; Zip Code	
Irving, TX 75039	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	
12/12/2024 HOMEPAC OF TEXAS-Texas Association of Builders	\$1,000.00
Contributor address; City; State; Zip Code	
Austin, TX 78701	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	<u>محمم مم</u>
12/13/2024 INDEPAC	\$500.00
Contributor address; City; State; Zip Code	
Austin, TX 78750	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
11/15/2024 Kickapoo Traditional Tribe of Texas	\$2,500.00
Contributor address; City; State; Zip Code	Ψ=,
Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
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	The Instruc	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/23			
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)		
		erto D. (The Honorable)		00035579			
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)		
	10/29/2024	Kolia, Fiona (Ms.)				\$50.00	
		6 Contributor address; City; State; Zip Code		1			
		McAllen, TX 78504					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Optometrist		Astoria Vision				
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)		
	12/17/2024	Linebarger Goggan Blair & Sampson, LLP				\$500.00	
		Contributor address; City; State; Zip Code		1			
		Austin, TX 78760					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)		
	12/12/2024	Matz and Company, LLC				\$250.00	
				ł			
		······································					
		Austin, TX 78703					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)		
	11/15/2024	McGuire Woods Federal PAC				\$500.00	
		Contributor address; City; State; Zip Code		1			
		Richmond, VA 23219-3916					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)		
	10/29/2024	Navarro, Luis (Mr.)				\$100.00	
		Contributor address; City; State; Zip Code		ł			
		Edinburg, TX 78539					
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Optometrist		Edinburg Vision Center				
⊢							

SCHEDULE	A1
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Th	e Instru	ction Guide explains how to co	mplete this for	m.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/23	
2 FIL	ER NAME				3	Filer ID (Ethics Commissio	n Filers)
		erto D. (The Honorable)				00035579	лт ного,
4 Dat	te	5 Full name of contributor 🗌 out-	of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
10/	/28/2024	Perez, Dahlia (Ms.)					\$1.00
		<b>6</b> Contributor address; City; State; Zip	Code				
		Pharr, TX 78577					
		pation / Job title (See Instructions)	9	Employer (See Instructions			
Off	fice Mana	jer		Guerra, Scott & Molina,	PL	LC	
Dat	te	Full name of contributor	of-state PAC (ID#:	)		Amount of Contribution (\$)	
12/	/12/2024	PharmPac					\$1,000.00
		Contributor address; City; State; Zip					
		Austin, TX 78757					
Prir	ncipal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
Dat	te	Full name of contributor 🛛 out-	of-state PAC (ID#:	)		Amount of Contribution (\$)	
12/	/17/2024	Red Rock Texas PAC					\$500.00
		Contributor address; City; State; Zip	Code				
		Austin, TX 78701					
Prir	ncipal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
Dat			of-state PAC (ID#:	)		Amount of Contribution (\$)	
12/	/12/2024	Ryan Texas PAC					\$1,000.00
		Contributor address; City; State; Zip	Code				
		Dallas, TX 75240					
Drir				Employer (See Instructions			
Pli	icipai occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
Dat			of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#4</b> 000 00
12/	/12/2024	TALA PAC					\$1,000.00
		Contributor address; City; State; Zip	Code				
		Austin, TX 78759					
Prir	ncinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
FIII	icipai occu				)		
			I				

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/23	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Guerra, Rob	erto D. (The Honorable)		00035579		
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	12/12/2024	TEXAS TRIAL LAWYERS ASSOCIATION PAG	с I			\$1,500.00
		6 Contributor address; City; State; Zip Code				
		AUSTIN, TX 78767-0788				
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 (\$)	
	10/31/2024	Texas Apartment Association, PAC	/			\$750.00
	10/01/202	Contributor address; City; State; Zip Code			<b>\$</b> , <b>5C</b> , <b>C</b>	
		Austin, TX 78701-1951	ļ			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#	)	Γ	Amount of Contribution (\$)	
	12/17/2024	Texas Building Branch AGC PAC	ļ			\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#	t:)	Γ	Amount of Contribution (\$)	
	12/12/2024	Texas College of Emergency Physicians	ļ			\$500.00
		Contributor address; City; State; Zip Code				
		1	ļ			
		Austin, TX 78701				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
				,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	12/17/2024	Texas Land Title Association PAC	/		, and an electron (	\$1,000.00
		Contributor address; City; State; Zip Code				<b>x</b> = <b>,</b> = = =
		Austin, TX 78703				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/23	
2 FILER NAME			3 Filer ID (Ethics Commissio	on Filers)
Guerra, Rob	perto D. (The Honorable)		00035579	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
12/12/2024	Texas Podiatric Medical Association- PAC			\$500.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/17/2024	Texas Produce Association Tex-PAC			\$750.00
	Contributor address; City; State; Zip Code			
	Mission, TX 78572			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	) ;)	
	1			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/17/2024	Valero PAC			\$1,000.00
	Contributor address; City; State; Zip Code			
	San Antonio, TX 78269			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/17/2024	Veterinarian PAC			\$500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78754			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/12/2024	Wholesale Beer Distributors of Texas PAC			\$1,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
	!			
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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 10/23					
2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	perto D. (The Honorable)		00035579				
<sup>4</sup> 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				
12/05/2024	Blackridge		contribution (\$) description \$350.00 email blasts for Austin				
	7 Contributor address; City; State; Zip Code		Club Fundraiser				
	Austin, TX 78701		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)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	<b>15</b> Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)				
16 If contributor	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				
12/05/2024	Pathfinder Public Affairs	/	contribution (\$) description				
	Contributor address; City; State; Zip Code		\$312.70 room, food and drinks for				
			Austin Club fundraiser				
	McAllen, TX 78504		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)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	EXPENDITC Event Expense Fees Food/Beverage Exp Gift/Awards/Memori Legal Services The Instruction	ense als Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ymer rhead pense pens ages	nt/Reimbursement d/Rental Expense e e /Contract Labor		Transportation Travel in Distr Travel Out of	n Equ rict Distr	ising Expense uipment & Related Expense ict ategory not listed above)
1	Total pages Schedule F1:	2		=	-		-		2	Filer ID		(Ethics Commission Filers)
1	Sch: 1/8 Rpt: 11/23	2		− berto D. (The I	Honorable)				3	00035579		
4	Date	5	Payee name									
	12/23/2024		,	ovette (Ms.)								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$3,700.00		1309 E. 52	nd Street								
			4									
			Austin, TX	78723								
_	BUBBOOF					r	<u>() )</u>					
8	PURPOSE OF	(a)		ee Categories listed a	at the top of this sch	edule)	(D)	Description	outoi	do of Toyoo C	ompl	ete Schedule T.
	EXPENDITURE		Travel Out	of District				X Check if Austin				
												ome rented in Austin
								during sessio	-			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(	Dffice sou	ght			Office	hel	d
	Date		Payee name									
	11/02/2024		Cantu, Jav	ier (Mr.)								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$1,000.00		1307 W. DI	uranta Ave								
	. ,											
			Alamo, TX	78516								
	PURPOSE	(a)	Category (S	ee Categories listed a	at the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Salaries/W	ages/Contract	Labor							ete Schedule T.
								Check if Austin				
								contract labo	r - e	election da	ay s	ign distribution
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(	Office soug	ght			Office	hel	d
	Date		Payee name									
	11/21/2024		Cantu, Jav	er (Mr.)								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$700.00		1307 W. D	uranta Ave								
			Alamo, TX	78516								
	PURPOSE	(a)	Category (S	ee Categories listed a	at the top of this sch	edule)	(b)	Description				
				ages/Contract		,		Check if travel	outsi	de of Texas. Co	omple	ete Schedule T.
	EXPENDITURE			-				Check if Austin				
								contract labo	r fo	r campaig	n s	ervices - sign
								pick up				
	Complete ONLY if direct		Candidate/Off	iceholder name	(	Office sou	ght			Office	hel	d
	expenditure to benefit C/OI	Н										

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comm Credit Card Payment		Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 2/8 Rpt: 12/23		Guerra, Roberto D. (The Honorable)					00035579
4	Date 10/28/2024	5	Payee name Carrera Communications					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le			
	\$6,000.00		135 Paseo Del Prado					
			Edinburg, TX 78542					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Consulting Expense	edule)		Check if travel o Check if Austin,		de of Texas. Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht			Office held
	Date	<u> </u>						
	11/06/2024		Payee name Carrera, Christian (Mr.)					
_								
	Amount (\$) \$390.00	Payee address;       City;       State;       Zip Code         90.00       2627 McCormack Drive						
			Edinburg, TX 78542					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)	Con	Check if travel o Check if Austin,	, тх,	de of Texas. Complete Schedule T. officeholder living expense r campaign services - election day
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Iht			Office held
	Date		Payee name					
	12/18/2024		Carrera, Christian (Mr.)					
	Amount (\$) \$500.00		Payee address; City; State; 2627 McCormack Drive	Zip Co	le			
			Edinburg, TX 78542					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)		Check if travel o Check if Austin,	, тх,	de of Texas. Complete Schedule T. officeholder living expense r campaign services
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Dffice sou	Jht			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Supense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)				
	Sch: 3/8 Rpt: 13/23	Guerra, Roberto D. (The Honorable)	00035579				
4	Date	Payee name					
	11/01/2024	Carrera, Miguel (Mr.)					
6	Amount (\$)	Payee address; City; State; Zip Code					
	\$5,000.00	135 Paseo Del Prado					
		Edinburg, TX 78542					
8	PURPOSE OF	(b) Description (See Categories listed at the top of this schedule)					
	EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense				
		campaign ser					
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/18/2024 Carrera, Miguel (Mr.)						
	Amount (\$) Payee address; City; State; Zip Code						
	\$2,000.00						
		Edinburg, TX 78542					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense VICES				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/18/2024	Chiarello, Stephanie (Ms.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,000.00	11904 Snow Goose Road					
		Austin, TX 78758					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense r for campaign services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 4/8 Rpt: 14/23		Guerra, Roberto D. (The Honorable)				00035579
4	Date	5	Payee name				
	11/05/2024		Gomez, Laura (Ms.)				
6	Amount (\$)	7	Payee address; City; State; Z	Zip Cod	e		
	\$135.00		1605 School Lane				
			Mission, TX 78572				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule) (	b) Description		
	OF EXPENDITURE		Food/Beverage Expense				de of Texas. Complete Schedule T.
	-				election day		officeholder living expense
					cicculori duy	wat	an party
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name Offic	ice soug	nt		Office held
	Date		Payee name				
	11/04/2024 Lone Star National Bank						
Amount (\$) Payee address; City; State; Zip Code							
	\$295.37		1505 S. Lone Star Way				
			Edinburg, TX 78539				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedu Credit Card Payment	ule) (		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense ard payment
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Officeholder	ice soug	nt		Office held
	Date		Payee name				
	12/03/2024		Lone Star National Bank				
	Amount (\$)		Payee address; City; State; Z	Zip Cod	е		
	\$11,185.78		1505 S. Lone Star Way				
			Edinburg, TX 78539	i			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedu Credit Card Payment	ule) (		ı, ТХ,	de of Texas. Complete Schedule T. , officeholder living expense ard payment
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Officeholder	ice soug	nt		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)				
	Sch: 5/8 Rpt: 15/23	Guerra, Roberto D. (The Honorable)	00035579				
4	Date	Payee name					
	11/06/2024	Mora, Mariano (Mr.)					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$700.00	1607 Cristobal Dr Edinburg, TX 78542					
_		-					
8 PURPOSE OF EXPENDITURE (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. Check if Austin, TX, officeholder living expense contract labor for campaign services - election day poll work							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/06/2024	Ortiz, Aaron (Mr.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$315.00	2705 Chateau St Edinburg, TX 78539					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense for campaign services - election day				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/01/2024	Perez, Dahlia (Ms.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$500.00	1220 Northpoint Dr					
		Apt A					
		Pharr, TX 78577					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T. TX, officeholder living expense for campaign services - TEC report				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment								Equipment & Related Ex t istrict				
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commissio	on Filers)
	Sch: 6/8 Rpt: 16/23		Guerra, Ro	berto D. (The F	lonorable)					00035579		
4	Date	5	Payee name	9								
	12/18/2024		Perez, Dah									
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	ode					
	\$2,500.00		1220 North	point Dr								
			Apt A	-								
			Pharr, TX 7	78577								
8	PURPOSE OF	(a)		See Categories listed at		edule)	(b)	Description		. (= 0		
	EXPENDITURE		Salaries/W	ages/Contract I	abor					officeholder livin	nplete Schedule T.	
								contract labor				
								contract labor	1 10	reampaign	30111003	
9	Complete ONLY if direct		Condidate/Of	ficeholder name		Office sou	abt			Office h	old	
9	expenditure to benefit C/OF		Januluale/On			Jince sou	igni			Onice n	eiu	
	Date		Payee name	9								
	10/30/2024 Public Research Group											
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	ode					
	\$5,895.90		135 Paseo	Del Prado								
	+-,		Ste 62									
			Edinburg,	IX 78539								
	PURPOSE OF	(a)	Category (S	See Categories listed at	the top of this sch	edule)	(b)	Description				
	EXPENDITURE		Advertising	Expense							nplete Schedule T.	
										officeholder livin	g expense	
								text message	t Ca	impaign		
	Complete ONL V if direct		Candidato/Of	ficeholder name		Office sou	laht			Office h	old	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Januluale/OI		(	Jince Sou	iynt			Onice II	leiu	
		_										
	Date		Payee name									
	11/02/2024		Rios, Roge	elio (Mr.)								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	ode					
	\$305.00		800 N 28th	Street								
			McAllen, T	X 78501								
	PURPOSE	(a)	Category (s	See Categories listed at	the top of this sch	edule)	(b)	Description				
				ages/Contract L		,			outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE			-						officeholder livin		
								contract labo	r - e	election day	sign distributior	n l
	Complete ONLY if direct		Candidate/Of	ficeholder name	(	Office sou	ight			Office h	eld	
	expenditure to benefit C/OI	Н										

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)				
-	Sch: 7/8 Rpt: 17/23	Guerra, Roberto D. (The Honorable)	00035579				
4	Date 11/01/2024	5 Payee name SMKT Media Group					
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 2108 Central Blvd Brownsville, TX 78520					
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense r for campaign services - graphic design				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/06/2024	Salinas, Fernanda					
	Amount (\$) \$800.00	Payee address; City; State; Zip Code 1607 Cristobal Dr					
		Edinburg, TX 78542					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense r for campaign services - election day				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/01/2024	Uribe, Mary (Ms.)					
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 3513 Gull Ave					
		McAllen, TX 78501					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense r for campaign services - TEC report				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 8/8 Rpt: 18/23	Guerra, Roberto D. (The Honorable)	00035579				
4	Date 12/12/2024	5 Payee name Uribe, Mary (Ms.)					
6	Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 3513 Gull Ave McAllen, TX 78501					
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense for campaign services - quarterly				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/18/2024	Uribe, Mary (Ms.)					
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 3513 Gull Ave					
		McAllen, TX 78501					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense for campaign services				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/05/2024	Valles, Mauricio (Mr.)					
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 507 Dalobo Ave					
		Edinburg, TX 78541					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense for campaign services				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 10(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Awards	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement       Solicitation/Fundraising Expense         Office Overhead/Rental Expense       Transportation Equipment & Related Expense         Polling Expense       Travel in District         Printing Expense       Travel Out of District         Salaries/Wages/Contract Labor       OTHER (enter a category not listed above)						
			ruction Guide explains h	now to complete	this form.	1				
1	Total pages Schedule F4:					3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 1/5 Rpt: 19/23		Guerra, Roberto D. (The Honorable)			00035579				
4	CREDIT CARD		ncial institution		OF UNITEMIZED	s s	1,053.2	7		
	ISSOEN	Lone Star N	lational Bank		GED TO A CREDI	Т	_,0001			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issu	er Paid				
		\$105.68	10/31/2024	12/03/20	24					
7	PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code		
				6100 N. 1	10th Street					
		Koko's Uptown Caf	e							
				McAllen,	TX 78504					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodula)	(b) Descrip						
		Food/Beverage Exper	,	meal for	meal for campaign staff					
	X Political	<b>5</b> 1								
	Non-Political		of Texas. Complete Schedule		Check if Austin, T	X, officeholder living exp	ense			
				Office held						
expenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issu	er Paid				
		\$98.47	12/18/2024							
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
		Koko's Uptown Caf	6100 N. 1	6100 N. 10th Street						
		Roko's Optown Car	C							
					McAllen, TX 78504 (b) Description					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	.,	meal for campaign meeting						
	X Political	Food/Beverage Expe	nse	meanor	campaignmeet	ing				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	Т.	Check if Austin, T	X, officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held				
e	xpenditure to benefit C/OH			( ) ( )						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issu	er Paid				
		\$1,500.00	11/19/2024							
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
				202 W. 1	3th Street					
		Mexican American	Legislative							
				Austin, T						
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip						
	EXPENDITURE	Fees		Member	Dues					
	X Political									
	Non-Political		of Texas. Complete Schedule		Check if Austin, T	X, officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held				
e	expenditure to benefit C/OH									

			D		SCHEDULE F4				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	arage Expense s/Memorials Expense ices	IES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ow to complete this form.	Tra Tra Tra	licitation/Fundraising Expense Insportation Equipment & Related Expense Ivel in District vel Out of District HER (enter a category not listed above)				
1 Total pages Schodule E4:	· · · · · · · · · · · · · · · · · · ·				<b>3</b> Filer ID (Ethics Commission Filers)				
1 Total pages Schedule F4:		(The Honorable)			· · · · · · · · · · · · · · · · · ·				
Sch: 2/5 Rpt: 20/23	Guerra, Roberto D.	. ,			00035579				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A C CARD		<b>\$</b> 1,053.27				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	rd Issuer	Paid				
	\$119.54	11/05/2024							
7 PAYEE	(a) Payee name	•	(b) Payee address;		City, State, Zip Code				
			7700 N. 10th Stree	7700 N. 10th Street					
	Spec's		Ste C						
					McAllen, TX 78504				
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		beverages for elec	beverages for election night watch party					
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if A	Austin, TX, o	officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$677.17	(b) Date of Charge 12/06/2024	(c) Date(s) Credit Car	d Issuer	Paid				
PAYEE	(a) Payee name		(b) Payee address;		City, State, Zip Code				
		101 Red River	101 Red River						
	Fairmont Austin		Austin, TX 78701						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Travel Out of District	hotel stay to attend Austin Club Fundraiser							
X Political									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if A	Austin, TX, (	officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer	Paid				
	\$281.04	11/28/2024							
PAYEE	(a) Payee name	l	(b) Payee address;		City, State, Zip Code				
			14455 N Hayden F	۲d.					
	GoDaddy		Suite 226						
			Scottsdale, AZ 852	260					
PURPOSE OF	(a) Category		(b) Description						
	(See Categories listed at the top Advertising Expense	ui inis schedule)	website hosting rer	newal fe	ee				
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if A	Austin, TX, o	officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Of	ffice sought		Office held				

			U	SCHEDULE F4				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense ices	IES FOR BOX 10(a) 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)				
<b>1</b> Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)				
Sch: 3/5 Rpt: 21/23		(The Llenerable)		, , , , , , , , , , , , , , , , , ,				
	Guerra, Roberto D.			00035579				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	<b>\$</b> 1,053.27				
6 PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 11/01/2024	(c) Date(s) Credit Card Iss 12/03/2024	uer Paid				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			2700 W. Freddy Gonza	2700 W. Freddy Gonzales				
	HEB - Edinburg							
			Edinburg, TX 78539					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Contributions/Donatio	,	gas cards for Morgan L	aMantia campaign				
X Political Candidate/Officeholder/Political Committee			e					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$270.81	(b) Date of Charge 12/17/2024	(c) Date(s) Credit Card Iss	uer Paid				
PAYEE	(a) Payee name Simply to Impress		(b) Payee address; 23801 Calabasas Rd Ste 2005 Calabasas, CA 91302	City, State, Zip Code				
PURPOSE OF	(a) Category		(b) Description					
	(See Categories listed at the top Advertising Expense	of this schedule)	holiday cards					
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	Candidate/Officeholder	name O	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$44.34	11/29/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	GoDaddy		14455 N Hayden Rd. Suite 226 Scottsdale, AZ 85260					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
	Advertising Expense		website hosting					
X Political								
Non-Political		of Texas. Complete Schedule		TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held				

			D	SCHEDULE F4			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	orage Expense s/Memorials Expense ices	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 DTHER (enter a category not listed above)			
<b>1</b> Total pages Schedule F4:	2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)			
Sch: 4/5 Rpt: 22/23	Guerra, Roberto D.	(The Honorable)		00035579			
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED				
ISSUER		revious	EXPENDITURES CHARGED TO A CREDI CARD	<b>\$</b> 1,053.27			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$28.80	12/20/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
			1806 Nueces St				
	Tiff's Treats						
			Austin, TX 78701				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial	•	treats for house support staff				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held			
expenditure to benefit C/OH		-					
PAYMENT	(a) Amount Charged \$39.60	(b) Date of Charge 12/20/2024	(c) Date(s) Credit Card Issu	er Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	<b>T</b> ''''''' <b>T</b> 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		1806 Nueces St	1806 Nueces St			
	Tiff's Treats						
			Austin, TX 78701				
PURPOSE OF	(a) Category	of this ashadula)	(b) Description				
	(See Categories listed at the top Gift/Awards/Memorial		treats for house support staff				
X Political		•					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		K, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$235.98	12/20/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Tiff's Treats		1806 Nueces St				
	Tiff's Treats						
			Austin, TX 78701				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	ata ff			
	Gift/Awards/Memorial		treats for house support	Stall			
X Political							
Non-Political		of Texas. Complete Schedule		K, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Of	fice sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
					nicitation/Fundraising Expense ansportation Equipment & Related Expense				
	Consulting Expense	Food/Beve	rage Expense	Polling Expense Tr	ravel in District				
	Contributions/ Donations Made By - Gift/Aw Candidate/Officeholder/Political Committee Legal S		s/Memorials Expense ices		Fravel Out of District DTHER (enter a category not listed above)				
		The Instr	ruction Guide explains h	ow to complete this form.					
1	Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 5/5 Rpt: 23/23	Guerra, Roberto D.	(The Honorable)		00035579				
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED					
	ISSUER	see pr	revious	EXPENDITURES CHARGED TO A CREDIT	<b>\$</b> 1,053.27				
				CARD					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$164.02	12/12/2024						
		Ψ104.0Z	12/12/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
				7700 N. 10th Street					
		Spec's		Ste C					
				McAllen, TX 78504					
8	PURPOSE OF	(a) Category		(b) Description					
Ŭ	EXPENDITURE	(See Categories listed at the top	of this schedule)	beverages for state and d	istrict office				
	X Political	Food/Beverage Exper	nse						
	Non-Political		of Texas. Complete Schedule		officeholder living expense				
	9 Complete ONLY if direct Candidate/Officeholder name Office sought				Office held				
e	xpenditure to benefit C/OH		(1) - (-)						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 12/03/2024	r Paid				
		\$500.00	10/30/2024	12/03/2024					
	5.1./25								
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
		HEB - Edinburg		2700 W. Freddy Gonzales	5				
				Edinburg, TX 78539					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Acatio compoind				
		Contributions/Donatio		gas cards for Morgan Law	gas cards for Morgan LaMantia campaign				
	X Political	Candidate/Officeholde	er/Political Committe	e					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held				
e	xpenditure to benefit C/OH								