JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The	The JC/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 2 Total pages filed:								
			19						
	CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE	E USE ONLY		
	NAME	Ms.	Regina			Date Received			
						ELECTRON	ICALLY FILED		
		NICKNAME	LAST		SUFFIX	01/15/2025			
		Regi	Compian Rich	ardson	30111X				
			-						
	CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AF		Y;	ZIP CODE	Date Hand-delivere	ed or Date Postmarked		
	MAILING	3525 W. Freddy Gonzal	ez			Receipt #	Amount		
	ADDRESS	Ste. C					, another		
	Change of Address	Edinburg, TX 78539				Date Processed			
						Date Imaged			
	CAMPAIGN	MS / MRS / MR	FIRST			MI			
	TREASURER NAME	Mrs.	Katherine G.						
		NICKNAME	LAST			SUFFIX			
		Kathy	Perez						
	CAMPAIGN	STREET ADDRESS (NO F	O BOX PLEASE);	AP	Γ / SUITE #; CITY;	S	STATE; ZIP CODE		
	TREASURER ADDRESS	1013 S. 10th Ave.							
	(Residence or Business)	Edinburg, TX 78539							
	CAMPAIGN	AREA CODE PHO	ONE NUMBER	EXTENSION					
	TREASURER PHONE	(956) 381-1800							
	REPORT TYPE					1 I Eth day, aftar	compoign tracquirer		
		X January 15	30th day before		Runoff		campaign treasurer officeholder only)		
		July 15	8th day before	election	Exceeded modified	Final Report (/	Attach C/OH-FR)		
		 	—		reporting limit	_			
	PERIOD	Month Day Yea	ſ		Month Day	Year			
	COVERED	10/27/2024	Tł	HROUGH	12/31/202	4			
10	ELECTION	ELECTION DATE			ELECTION TYPE				
		Month Day Year	í 🛛 🗌 F	Primary	Runoff	Other			
		11/05/2024		Seneral	Special				
11	OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)			
					Court Of Appeals		e 5		
1									
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1									
1			~~~						
1			GO	TO PAGE 2					
For	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2								

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 19

I

13 C / OH NAME	Compian Richardson	, Regina (Ms.)	14 Filer ID 00087926	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendition These expenditures may have been made without d officeholders are required to report this information	the candidate's or offic	ceholder's knowledge or
Additional Pages		COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00		
		ICAL CONTRIBUTIONS	15)	\$ 8,350.00
EXPENDITURE TOTALS		PLEDGES, LOANS, OR GUARANTEES OF LOAN IZED POLITICAL EXPENDITURES	15)	\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 23,469.79
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L	AST DAY OF THE	\$ 8,087.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 15,000.00
17 AFFIDAVIT	-			
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.	y of perjury, that the ac Il information required	ccompanying report is to be reported by me
		Ms. Regin	a Compian Richard	son
			f Candidate or Officeho	
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath
Forms provided by Te	exas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

FORM JC/OH COVER SHEET PG 3

3	of	19

18 FILER NA Compiar	(Ethics Commission Filers)								
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE								
1. X	\$ 8,350.00								
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS								
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$						
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 23,469.79						
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$						
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD								
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$						
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$						
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$						

SUBTOTALS - JC/OH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 1/3 Rpt: 4/19	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Compian Ric	chardson, Regina (Ms.)	00087926	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
11/01/2024	Arenel Properties, LLC		\$500.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	pmplovor/low firm	11 Law firm of contributor's sp	pourso (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/31/2024	Castaneda, Octavio	/	\$2,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78502		
Contributor's F	Principal Occupation	Contributor's Job Title	
self employe	d	business owner	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
self			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/01/2024	Escamilla Law Firm		\$1,000.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
	by Tayas Ethics Commission www.ethic	s state ty us	Version VA 1.0 5dd2ace2

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/3 Rpt: 5/19	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Compian Ric	chardson, Regina (Ms.)	00087926	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/31/2024	Garcia, Orlando F.		\$750.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78504		
	Principal Occupation	9 Contributor's Job Title	
self employe		business owner	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
self			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Data			Amount of Operative stars (A)
Date 10/31/2024	Full name of contributor Dut-of-state PAC (ID#:)	Amount of Contribution (\$) \$1,500.00
10/31/2024			\$1,500.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78760		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor of			
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/31/2024	Ortega, Arturo		\$2,000.00
	Contributor address; City; State; Zip Code		
	Alamo, TX 78516		
Contributor's F	Principal Occupation	Contributor's Job Title	
self employe	d	business owner	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
self			
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	hy Texas Ethics Commission www.ethic	s state tx us	Version V4.1.0.5dd2ace2

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 **1** Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 6/19 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Compian Richardson, Regina (Ms.) 00087926 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 10/27/2024 \$100.00 VL Management LLC 6 Contributor address; City; State; Zip Code McAllen, TX 78501 8 Contributor's Principal Occupation 9 Contributor's Job Title 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any)

	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: 1/13 Rpt: 7/19	Compian Richardson, Regina (Ms.)	00087926						
4	Date 10/28/2024	Payee name Act Blue							
6	Amount (\$) \$100.00	Payee address; City; State; Zip Code secure.actblue.com TX							
8	PURPOSE OF EXPENDITURE	OF Contributions/Donations Made By							
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/04/2024	Aleman, Rogelio							
	Amount (\$) \$250.00	Payee address; City; State; Zip Code							
	PURPOSE OF EXPENDITURE		ıtside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/27/2024	Best Buy							
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 700 S. Jackson Rd.							
		McAllen, TX 78501							
	PURPOSE OF EXPENDITURE	Check if Austin, T	utside of Texas. Complete Schedule T. IX, officeholder living expense lipment for election day						
	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/Politica Credit Card Payment	Fees Food/E Gift/Aw mittee Legal S	Expense Beverage Expense vards/Memorials Expense Services nstruction Guide explains	Office Overhe Polling Exper Printing Expe Salaries/Wag	nse es/Contract Labor	Tran Trav Trav	nsportation Ec vel in District vel Out of Dist	aising Expense juipment & Related Expense rict ategory not listed above)	
1	Total pages Schedule F1:	FILER NAME				3 File	r ID	(Ethics Commission Filers)	
	Sch: 2/13 Rpt: 8/19	Compian Richardson, Regina (Ms.) 00087926							
4	Date 10/29/2024	Payee name Blackbeard's Restaurant							
6	Amount (\$) \$568.51	7 Payee address; City; State; Zip Code 1 103 E. Saturn Ln. South Padre Island, TX 78597							
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense event food/venue 							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officehol	der name (Office sough	t		Office he	ld	
	Date	Payee name							
	10/31/2024	Bourbon Street							
	Amount (\$) \$1,525.00	Payee address; 4800 N. 10th St.		; Zip Code					
	PURPOSE OF EXPENDITURE	McAllen, TX 785 Category _{(See Cate} Event Expense	gories listed at the top of this sch	nedule) (b	Description Check if travel Check if Austin event			lete Schedule T. expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officehol	der name (Office sough	t		Office he	ld	
	Date	Payee name							
	11/06/2024	Brand Boosters							
	Amount (\$) \$433.00	Payee address; 301 N. McColl	City; State	; Zip Code					
		McAllen, TX 785	01						
	PURPOSE OF EXPENDITURE	Category _{(See Cate} Advertising Expe	gories listed at the top of this sch INSE	nedule) (b	 Description Check if travel Check if Austin Check if Austin Signs and call 	, TX, office	eholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officehol	der name (Office sough	t		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Fees Office Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printin	Overhead Expense g Expense s/Wages	e /Contract Labor		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: 3/13 Rpt: 9/19		Compian Richardson, Regina (Ms.)				00087926			
4	Date	5	5 Payee name							
	10/28/2024		Cameron County Democratic Party							
6	Amount (\$) \$1,500.00									
	\$1,000.00		oro w. Rubert fores, die. 2							
			Brownsville, TX 78520							
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE		Contributions/Donations Made By				de of Texas. Complete Schedule T.			
	-		Candidate/Officeholder/Political Committee		sponsorship	, TX,	officeholder living expense			
					openeerenp					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office s	ought			Office held			
	Date		Payee name							
	12/09/2024		Cantu , Javier							
	Amount (\$)		Payee address; City; State; Zip	Code						
	\$200.00									
			San Juan, TX 78589							
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T. officeholder living expense			
					signs/contrac					
					5					
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office s	ought			Office held			
	Date		Payee name							
	10/28/2024		Cantu , Javier							
	Amount (\$)		Payee address; City; State; Zip	Code						
	\$600.00									
			San Juan, TX 78589							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description					
	EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T. officeholder living expense			
					contract labor					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Office s	ought			Office held			
	experience to benefit 0/01	•								

			EXPENDITURE	CATEGO	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Travel in District Travel Out of District	oment & Related Expense	
1	Total pages Schedule F1:	12			1000 10 00		5		thics Commission Filers)
T	Sch: 4/13 Rpt: 10/19		2 FILER NAME 3 Filer ID (Ethics Commission 00087926) Compian Richardson, Regina (Ms.) 00087926						
4	Date	5	Payee name						
	11/04/2024		Cantu , Javier						
6	Amount (\$) \$200.00		Payee address; City;	State;	e; Zip Cod	e			
			San Juan, TX 78589		<u> </u>				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Salaries/Wages/Contract Lab		nedule) (ι, TX,	de of Texas. Complete officeholder living exp	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office soug	ht		Office held	
	Date		Payee name						
	10/31/2024		De Jesus, Maria						
	Amount (\$) \$600.00		Payee address; City;	State;	e; Zip Cod	e			
			Mission, TX 78572						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Salaries/Wages/Contract Lab		nedule) (n, TX,	de of Texas. Complete officeholder living exp	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office soug	ht		Office held	
	Date		Payee name						
	10/29/2024		Dollar General						
	Amount (\$)		Payee address; City;	State	; Zip Cod	e			
	\$3.09		1200 W. Dove						
			McAllen, TX 78504						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Event Expense	top of this sch	nedule) (de of Texas. Complete officeholder living exp	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office soug	ht		Office held	

				EXPENDI	FURE CATEGO	ORIES FOR	вс	DX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		nittee	Event Expense Fees Food/Beverage E Gift/Awards/Memu Legal Services The Instructio		Office Ove Polling Exp Printing Ex Salaries/W	rhead lense pens ages	e /Contract Labor		Travel in District Travel Out of Dis	quipmen	xpense t & Related Expense v not listed above)	
1	Total pages Schedule F1:	2 F					-		3	Filer ID	(Ethic	s Commission Filers	;)
-	Sch: 5/13 Rpt: 11/19									,			
4	Date 10/29/2024		Payee name Garcia, Herr	nila									
6	Amount (\$) \$500.00	2	Payee addres 04 Easy St Gan Juan, T		Stat	te; Zip Co	de						
8	PURPOSE OF EXPENDITURE	(a) (e Categories liste	d at the top of this s ct Labor	schedule)	(b)		, TX,	de of Texas. Com officeholder living	•		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Indidate/Offic	eholder nam	е	Office sou	ght			Office he	eld		
	Date	F	ayee name										
	10/31/2024	F	I-E-B										
_	Amount (\$)	F	ayee addres	s; City;	Stat	te; Zip Co	de						
	\$600.00	8	20 S. Conv Aission, TX	vay									
	PURPOSE OF EXPENDITURE		Category _{(Se} Travel In Dis		d at the top of this s	schedule)	(b)		, TX,	de of Texas. Comp officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Indidate/Offic	eholder nam	e	Office sou	ght			Office he	eld		
	Date	F	ayee name										_
	10/30/2024		layes Medr	ano, Selina									
	Amount (\$) \$200.00		Payee addres			te; Zip Co	de						
		N	/IcAllen, TX	78504									
	PURPOSE OF EXPENDITURE		Contribution	s/Donations	d at the top of this s Made By Political Com	,	(b)		, TX,	de of Texas. Com officeholder living nocratic Res	expense	e	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Indidate/Offic	eholder nam	e	Office sou	ght			Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollin Gift/Awards/Memorials Expense Printir	Repayment/Reimbursemen Overhead/Rental Expense g Expense gg Expense es/Wages/Contract Labor complete this form.					
1	Total pages Schedule F1:	ILER NAME		3 Filer ID (Ethics Commission Filers)				
	Sch: 6/13 Rpt: 12/19	Compian Richardson, Regina (Ms.)		00087926				
4	Date 10/30/2024	ayee name Iidalgo County Bar Association						
6	Amount (\$) \$750.00	ayee address; City; State; Zip 23 W. Cano St. Edinburg, TX 78539	Code					
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense p				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name Office s	sought	Office held				
	Date	'ayee name						
	11/06/2024	lobby Lobby						
	Amount (\$) \$76.49	Payee address; City; State; Zip 600 N. 10th St.	Code					
	PURPOSE	IcAllen, TX 78504						
	OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office :	sought	Office held				
	Date	ayee name						
	10/31/2024	celly's on 10th						
	Amount (\$) \$1,000.00	ayee address; City; State; Zip 200 Trenton Rd.	Code					
		IcAllen, TX 78504						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Indidate/Officeholder name Office s	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		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense umittee Legal Services The Instruction Guide exp	2	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		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		Siumo II			2	Filer ID (Ethics Commission Filers)
T	Sch: 7/13 Rpt: 13/19		Compian Richardson, Regina (Ms	5.)			3	00087926
4	Date	5	Payee name					
	11/04/2024		Lopez, Sara					
6	Amount (\$) \$625.00		Payee address; City; P O Box 202 Robstown, TX 78380	State;	Zip Cod	e		
8	PURPOSE	(a)	Category (See Categories listed at the top of	this scher	edule) (b) Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor			Check if travel	ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	Of	ffice soug	nt		Office held
	Date		Payee name					
	10/31/2024		Mejia, Juan					
	Amount (\$)		Payee address; City;	State;	Zip Cod	e		
	\$200.00		507 W. 6th St. Weslaco, TX 78596					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Salaries/Wages/Contract Labor	this sched	dule) (ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Of	ffice soug	nt		Office held
	Date		Payee name					
	11/04/2024		Mission Event Center					
	Amount (\$) \$205.00		Payee address; City; 200 N. Shary Rd.	State;	Zip Cod	e		
			Mission, TX 78572					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Event Expense	this scheo	dule) (ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Of	ffice soug	nt		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Con Credit Card Payment			-	Office Overhead/Rental Expense Beverage Expense Polling Expense wards/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: 8/13 Rpt: 14/19		Compian Richardson, Regina (Ms.)				00087926	
4	Date	5	Payee name					
	10/30/2024		Northern Cameron County Democrats					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le			
	\$1,500.00		207 S. Commerce St.					
			Harlingen, TX 78550					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Contributions/Donations Made By	,	Check if travel		de of Texas. Complete Schedule T.	
	EXPENDITORE		Candidate/Officeholder/Political Comm	ittee		, TX	officeholder living expense	
					sponsorship			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C)ffice sou	Jht		Office held	
	Date		Payee name					
	11/01/2024		Ollervides, Lily					
	Amount (\$) Payee address; City; State; Zip Code							
	\$400.00							
	+ 100100							
			McAllen, TX 78501					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Advertising Expense				de of Texas. Complete Schedule T. officeholder living expense	
					media marke			
					media marke	unç		
	Complete ONLY if direct		Candidate/Officeholder name C)ffice sou	iht		Office held	
	expenditure to benefit C/Oł							
	Date		Payee name					
	11/06/2024		Olvera, Rosaura					
	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$100.00							
			Brownsville, TX 78520					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.	
							officeholder living expense	
					contract labo	I		
		Ľ	Condidate/Officeholder some	office com	ubt		Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ji it		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 Fees Food/Beverage Exper Gift/Awards/Memorial: mittee Legal Services The Instruction G	s Expense	Office Over Polling Exp Printing Exp Salaries/Wa	pense ages/Contract Labor		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		unce exp		inpieto tine termi	3	Filer ID (Ethics Commission Filers)
1	Sch: 9/13 Rpt: 15/19		Compian Richardson, Reg	ina (Ms.)			3	00087926
4	Date	5	Payee name					
	10/31/2024		Pappadeux					
6	Amount (\$) \$268.02		Payee address; City; 1610 W. Interstate 2 Pharr , TX 78577	State;	; Zip Coc	de		
8	PURPOSE					(b) Description		
ŏ	OF EXPENDITURE		Category (See Categories listed at Food/Beverage Expense	the top of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense Prage
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office soug	yht		Office held
	Date		Payee name					
	11/01/2024		Perez, Richard					
	Amount (\$)		Payee address; City;	State;	; Zip Coo	de		
	\$1,000.00		202 Fig Dr. Edinburg, TX 78539					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at Salaries/Wages/Contract L		edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office soug	jht		Office held
	Date		Payee name					
	11/12/2024		Public Research Group					
	Amount (\$) \$4,874.22		Payee address; City;	State;	; Zip Coo	de		
			Washington, DC 20001					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at Polling Expense	the top of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense I rCh
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office soug	Jht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing nmittee Legal Services Salarie	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			
1	Total pages Schedule F1:	2	· · · · ·			3	Filer ID (Ethics Commission Filers)
-	Sch: 10/13 Rpt: 16/19	-	Compian Richardson, Regina (Ms.)			5	00087926
4	Date	5	Payee name				
	11/04/2024		Rio Grande Valley Diabetes Assoc.				
6	Amount (\$)	7	Payee address; City; State; Zip (Code			
	\$100.00		3200 N. 23rd				
			McAllen, TX 78501				
_	51155005						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(0)	Description	outoi	de of Texas. Complete Schedule T.
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee				officeholder living expense
					donation		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office se	ought			Office held
	Date		Payee name				
	11/04/2024		Salinas, Fernanda				
	Amount (\$)	-	Payee address; City; State; Zip (Code			
	\$200.00		Payee audress, City, State, Zip C	Coue			
	\$200.00						
			McAllen, TX 78501				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.
							officeholder living expense
					contract labor		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office so	ought			Office held
	Date		Payee name				
	11/04/2024		Sam's Club				
	Amount (\$)		Payee address; City; State; Zip 0	Code			
	\$40.29		7601 N. 10th	oouc			
	Q-10.20		100111.1001				
			McAllen, TX 78504				
	DUDDOCE	(0)		(b)	Description		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(0)	Description	nutsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Food/Beverage Expense				officeholder living expense
					camp food/be		
-	Complete ONLY if direct	L(Candidate/Officeholder name Office so	ouaht			Office held
	expenditure to benefit C/OI						
-							

	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/Reimbursement Fees Od/Beverage Expense Polling Expense Gift/Awards/Memorials 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	3 Filer ID (Ethics Commission Filers)			
	Sch: 11/13 Rpt: 17/19	Compian Richardson, Regina (Ms.)	00087926			
4	Date 11/12/2024	Payee name Signs 2 Go, LLC				
6	Amount (\$) \$53.58	Payee address; City; State; Zip Code 304 E. Pecan Blvd. McAllen, TX 78501 Kenter State; Kenter State;				
8	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/30/2024	Signs 2 Go, LLC				
	Amount (\$) \$99.00	Payee address; City; State; Zip Code 304 E. Pecan Blvd.				
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/07/2024	Sunoco				
	Amount (\$) \$27.15	Payee address;City;State;Zip Code802 N. Jackson Rd.				
		Pharr , TX 78577				
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense			
	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/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: 12/13 Rpt: 18/19	Compian Richardson, Regina (Ms.)	00087926			
4	Date 11/05/2024	5 Payee name Sunoco				
6	Amount (\$) \$100.00	Payee address; City; State; Zip Code 802 N. Jackson Rd. Pharr , TX 78577				
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/28/2024	Sunoco				
	Amount (\$) \$361.84	Payee address; City; State; Zip Code 802 N. Jackson Rd. Pharr , TX 78577				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ITS			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/29/2024	Texas Democratic Alliance PAC				
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 700 Veterans Blvd.				
		San Juan, TX 78589				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense			
	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/Politica Credit Card Payment	Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense T By - Gift/Awards/Memorials Expense Printing Expense T		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	3	3 Filer ID (Ethics Commission Filers)	
	Sch: 13/13 Rpt: 19/19	Compian Richardson, Regina (Ms.)		00087926	
4	Date	Payee name			
	11/01/2024	Ybarra, Audrey			
6	Amount (\$) \$500.00	Payee address; City; State; Zip Code Edinburg, TX 78539			
8	FORPOSE 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 phone banking				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought		Office held	
	Date	Payee name			
	11/01/2024	macorner.com			
	Amount (\$) \$209.60	Payee address; City; State; Zip Code macorner.com online website, TX 00000			
	PURPOSE OF EXPENDITURE		avel ou lustin, T	utside of Texas. Complete Schedule T. IX, officeholder living expense chandise	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought		Office held	