#### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM JC/OH COVER SHEET PG 1

The	JC/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00069193	,	2 Total page	es filed: 32
3 (	CANDIDATE /	MS / MRS / MR	FIRST		MI		
	DFFICEHOLDER	The Honorable	Gloria M.			Date Received	E USE ONLY
						ELECTRON	NICALLY FILED
						01/15/2025	
		NICKNAME	LAST Rincones		SUFFIX	01/10/2020	
	CANDIDATE /	ADDRESS / PO BOX; AP	F / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delive	red or Date Postmarked
	DFFICEHOLDER //AILING	P.O. Box 4480					
	ADDRESS					Receipt #	Amount
Ιг	Change of Address	Brownsville, TX 78523				Date Processed	
						Date 110003300	
						Date Imaged	
5 (	CAMPAIGN	MS / MRS / MR	FIRST			MI	
	REASURER	Mr.	Jesus R. Rick				
	JAME						
		NICKNAME	LAST			SUFFIX	
			Canales				
6 (	CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE);	AP'	T / SUITE #; CITY;		STATE; ZIP CODE
	REASURER	845 E. Harrison St.					
<i>⊢</i>	DDRESS						
(F	Residence or Business)	Brownsville, TX 78520					
	CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
	REASURER HONE	(956) 546-7766					
	REPORT TYPE	X January 15	30th day before		Runoff	15th day afte	er campaign treasurer
			Sour day below				(officeholder only)
		July 15	8th day before	election	Exceeded modified reporting limit	Final Report	(Attach C/OH-FR)
	PERIOD COVERED	Month Day Year			Month Day	Year	
	OVERED	07/01/2024	11	IROUGH	12/31/202	4	
10 E	ELECTION	ELECTION DATE Month Day Year			ELECTION TYPE		
		Month Day Tea		Primary	Runoff	Other	
				Seneral	Special		
L							
11 (	DFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
		District Judge District 445	5 Cameron				
					•		
			GO 1	TO PAGE 2			
Form	is provided by Te	exas Ethics Commission		hics.state.tx.u	S	\//	ersion V4.1.0.5dd2ace2
					-	• • •	

#### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 32

I

13 C / OH NAME	Rincones, Gloria M. (	The Honorable)	14 Filer ID 00069193	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expe These expenditures may have been made with d officeholders are required to report this inform	nout the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAM	ЛЕ	
		COMMITTEE CAMPAIGN TREASURER ADD	DRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE		<b>\$</b> 0.00
				<b>\$</b> 59,002.00
EXPENDITURE	· · · · · · · · · · · · · · · · · · ·	PLEDGES, LOANS, OR GUARANTEES OF L ZED POLITICAL EXPENDITURES	JANS)	\$ 2,227.70
TOTALS	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 15,950.33
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TI	HE LAST DAY OF THE	<b>\$</b> 43,153.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	S AS OF THE LAST DAY	<b>\$</b> 5,009.03
17 AFFIDAVIT				•
			enalty of perjury, that the ac les all information required t de.	
		The Ho	norable Gloria M. Rinco	nes
		Signatu	re of Candidate or Officeho	lder
AFFIX NC	TARY STAMP / SEAL AB	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 offi	cer administering oath	Printed name of officer administering oat	h Title of office	r administering oath
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

#### FORM JC/OH \/**\_**/

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			C	OVER SHE	3 of 32
18 FII	ER NAM	ΛE	19 Filer ID	(Ethics Commi	ssion Filers)
Ri	ncones	Gloria M. (The Honorable)	00069193		
		E SUBTOTALS SCHEDULE		SUBTOT	AL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	59,002.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	;	\$	15,950.33
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	INS	\$	

SUBTOTALS - JC/OH

SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

8.

9.

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11.

12. X

TO FILER

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The Instru	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 1/20 Rpt: 4/32
2 FILER NAME				<b>3</b> Filer ID (Ethics Commission Filers)
Rincones, G	Gloria M. (The Honorable)			00069193
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
10/31/2024	Alaniz, Noe			\$150.00
	6 Contributor address; City; Sta			1
	San Benito, TX 78586			
8 Contributor's	Principal Occupation		9 Contributor's Job Title	
Law			Attorney	
10 Contributor's	employer/law firm		11 Law firm of contributor's sp	bouse (if any)
Alaniz Law	Firm, PLLC		N/A	
12 If contributor	is a child, law firm of parent(s) (if ar	ıy)		
N/A			N/A	
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/11/2024	Armstrong, Ronald (Mr.)			\$500.00
	Contributor address; City; Sta			
	Brownsville, TX 78521			
Contributor's	Principal Occupation		Contributor's Job Title	
Law			Attorney	
Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
The Armstro	ong Firm		N/A	
If contributor	is a child, law firm of parent(s) (if ar	ıy)		
N/A			N/A	
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/22/2024	Ayala, Jose (Dr.)			\$1,500.00
	Contributor address; City; Sta	ate; Zip Code		1
	Brownsville, TX 78520			
Contributor's	Principal Occupation		Contributor's Job Title	•
Medical			Doctor	
Contributor's employer/law firm Law firm of contributor's sp			bouse (if any)	
Jose Luis Ayala DPM PA N/A				
If contributor	is a child, law firm of parent(s) (if ar	ıy)		
N/A			N/A	

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/20 Rpt: 5/32	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Rincones, G	loria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/13/2024	Barrera, Ricardo (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Harlingen, TX 78550		
8 Contributor's F	I Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's e	employer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
	Law Firm PC	N/A	
12 If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/17/2024	Bingham, Leslie (Ms.)		\$250.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	
Medical		Senior VP/Hospital CEC	C
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Valley Baptis	st Health System	N/A	
If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/22/2024	Bossolo, Jose (Dr.)	/	\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78526		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Health		Doctor	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Dr. Jose A Bossolo Jr. N/A			
If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 3/20 Rpt: 6/32	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	loria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
10/07/2024	Canales, Rick (Mr.)		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Law Office o	f Rick Canales, PC	N/A	
12 If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/25/2024	Cornejo, Anthony (Mr.)		\$750.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	
Law		Attorney	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
	ce of Anthony M Cornejo	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/01/2024	Court Ordered Solutions Safety Check		\$2,500.00
	Contributor address; City; State; Zip Code		
	Edinburg, TX 78539		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm		Law firm of contributor's sp	ouse (if any)
lf e cretniku ten is			
	s a child, law firm of parent(s) (if any)		
1			

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 4/20 Rpt: 7/32	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	loria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/10/2024	De Garduno, Cerise (Ms.)		\$350.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's F	I Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's e	emplover/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
	f Cerise R. De Garduno	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/24/2024	De La Fuente Jr., Oscar (Mr.)	/	\$1,000.00
	Harlingen, TX 78550		
Contributor's F	Principal Occupation	Contributor's Job Title	
Law		Attorney	
	employer/law firm	Law firm of contributor's sp	
	f Oscar De La Fuente, Jr	N/A	
	s a child, law firm of parent(s) (if any)	11/7 (	
N/A	s a child, law lifth of parent(s) (if any)	N/A	
		IN/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/01/2024	De Leon, Cesar (Mr.)		\$1,500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Law Office of Cesar De Leon N/A			
If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 5/20 Rpt: 8/32	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Gloria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/10/2024	Delgadillo, Abel (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's	employer/law firm	<b>11</b> Law firm of contributor's sp	pouse (if any)
	of Abel Delgadilo	N/A	
	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/10/2024	Dominguez, Alex (Mr.)		\$250.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
Law Offices	of Alejandro Dominguez	N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/04/2024	Erwin Jr., Dan (Mr.)		\$2,000.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
	omployor/low firm	-	neuse (if any)
Contributor's employer/law firmLaw firm of contributor's spRoerig Olivera & FisherN/A		Jouse (ii any)	
_		N/A	
If contributor is a child, law firm of parent(s) (if any)			
N/A		N/A	

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 6/20 Rpt: 9/32	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Gloria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/09/2024	Esparza & Garza LLC		\$300.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	<b>11</b> Law firm of contributor's sp	nouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any)		
	is a child, law little of parent(s) (it any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/10/2024	Ewane, Kennith (Dr.)		\$1,500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	•
Medical		Doctor	
Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	r Urology, PLLC	N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
12/05/2024	Figueroa, Analisa		\$150.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's employer/law firm Law firm of contribut		Law firm of contributor's sp	pouse (if any)
Law Office of Analisa Figueroa, PLLC N/A		N/A	
If contributor	is a child, law firm of parent(s) (if any)	1	
N/A		N/A	

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 7/20 Rpt: 10/32	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	iloria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
08/19/2024	Flanagan, Michael (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
8 Contributor's	I Principal Occupation	9 Contributor's Job Title	I
Law		Attorney	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
	of Michael E. Flanagan	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/23/2024	Galarza, Santiago		\$1,000.00
10/20/2024	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	Brownsville, TX 78520		
O susteille standa		O antributaria Jak Titla	
	Principal Occupation	Contributor's Job Title	
Law		Attorney	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
	of Santiago Galarza	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/14/2024	Gamez Jr., Ernest (Mr.)		\$2,500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Law Office of Ernesto Gamez, Jr., P.C. N/A			
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 8/20 Rpt: 11/32	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Gloria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#	)	7 Amount of Contribution (\$)
10/10/2024	Garcia, Erin (Ms.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
	fice of Erin H. Garcia, PLLC	N/A	
12 If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of Contribution (\$)
10/10/2024	Garza, Aron		\$1,000.00
	Contributor address; City; State; Zip Code		
	San Benito, TX 78586		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
Law Office	of Aron David Garza	N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)
10/10/2024	Garza, Aron	//	\$1,000.00
	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	San Benito, TX 78586		
Contributorio		Contributor's Job Title	
Law	Principal Occupation		
		Attorney	
Contributor's employer/law firm Law firm of contributor's sp Law Office of Aron David Garza N/A			bouse (if any)
		N/A	
If contributor	is a child, law firm of parent(s) (if any)	N/A	
IN/A		N/A	
1			

The Instru	ction Guide explains how to complete	1 Total pages Schedule A(J)1: Sch: 9/20 Rpt: 12/32	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Gloria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7 Amount of Contribution (\$)
10/10/2024	Garza, David		\$200.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's	employer/law firm	<b>11</b> Law firm of contributor's s	pouse (if any)
Garza & Ga		N/A	
12 If contributor	is a child, law firm of parent(s) (if any)	I	
N/A		N/A	
Date	Full name of contributor Out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
10/10/2024	Garza, Elizabeth		\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
Valdez Gar	za Law Firm, PC	N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PA	AC (ID# <sup>.</sup> )	Amount of Contribution (\$)
10/10/2024	Garza, Noe (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
	omployor/low firm	-	nouse (if any)
Contributor's employer/law firmLaw firm of contributor's spLaw Office of Noe D. Garza, JrN/A			
If contributor is a child, law firm of parent(s) (if any) N/A N/A			
1			

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 10/20 Rpt: 13/32	
2 FILER NAME	2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Rincones, G	loria M. (The Honorable)			00069193
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
10/10/2024	Garza, Rene			\$300.00
	6 Contributor address; City; Sta	te; Zip Code		
	San Benito, TX 78586			
8 Contributor's I	Principal Occupation		9 Contributor's Job Title	
Law			Attorney	
10 Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if any)
Cameron Co	ounty District Attorney		N/A	
12 If contributor i	s a child, law firm of parent(s) (if ar	ıy)		
N/A			N/A	
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/28/2024	Garza III, Reynaldo (Mr.)			\$2,500.00
	Contributor address; City; Sta	te; Zip Code		
	Brownsville, TX 78520-523	3		
Contributor's I	Principal Occupation		Contributor's Job Title	•
Law			Attorney	
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)
Garza & Ga	rza		N/A	
If contributor i	s a child, law firm of parent(s) (if ar	y)		
N/A			N/A	
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/10/2024	Gonzalez, Chester (Mr.)			\$250.00
	Contributor address; City; Sta	te; Zip Code		
	Brownsville, TX 78521			
Contributor's I	Principal Occupation		Contributor's Job Title	
Law			Attorney	
Contributor's employer/law firm Law firm of contributor's sp		Law firm of contributor's sp	bouse (if any)	
Chester R. Gonzalez, Attorney and Counselor at Law N/A		N/A		
If contributor is a child, law firm of parent(s) (if any)				
N/A			N/A	

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/20 Rpt: 14/32	
2 FILER NAME	2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)
Rincones, G	loria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
10/23/2024	Hernandez, Ernie (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
The Law Off	ice of Ernie J Hernandez, PLLC	N/A	
12 If contributor is	s a child, law firm of parent(s) (if any)	•	
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/05/2024	Hinojosa, Gilbert (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's Principal Occupation Contributor's Job Title		Contributor's Job Title	
Law		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
Law Office o	f Gilberto Hinojosa & Associates P.C.	N/A	
If contributor is	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/18/2024	Jones, Galligan, Key & Lozano, L.L.P.		\$1,500.00
	Contributor address; City; State; Zip Code		
	Weslaco, TX 78596		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of con		Law firm of contributor's sp	ouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/20 Rpt: 15/32
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	iloria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#	)	7 Amount of Contribution (\$)
10/10/2024	Kowalski, Fred (Mr.)		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
	of Fred A. Kowalski	N/A	
12 If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/09/2024	Lawler III, Marion (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
Lawler & As	sociates, P.C.	N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
10/10/2024	Full name of contributor of-state PAC (ID#: Limas Jr., Fabian (Mr.)	)	\$500.00
10/10/2024			
	Contributor address; City; State; Zip Code		
	B		
	Brownsville, TX 78520		
	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
Law Office of	f Fabian Limas Jr	N/A	
If contributor is a child, law firm of parent(s) (if any)			
N/A		N/A	

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/20 Rpt: 16/32
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Rincones, G	Gloria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)
10/30/2024	Lucio, Erick (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
Hamilton &	Lucio, P.C.	Hamilton & Lucio, P.C.	
12 If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
10/10/2024	Martinez, Antonio (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's Principal Occupation Contributor's Job Title			
Law		Attorney	
	employer/law firm	Law firm of contributor's s	pouse (if any)
Martinez, Ba	arrera y Martinez, LLP	N/A	
	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
11/25/2024	McCullough, Gene		\$500.00
	Contributor address; City; State; Zip Code		
	Harlingen, TX 78551		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)	
McCullough	and McCullough	N/A	
If contributor is a child, law firm of parent(s) (if any)			
N/A		N/A	

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/20 Rpt: 17/32	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
	loria M. (The Honorable)		00069193	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
08/05/2024	Mendez III, Juan (Mr.)		\$500.00	
	6 Contributor address; City; State; Zip Code			
	Brownsville, TX 78520			
8 Contributor's F	I Principal Occupation	9 Contributor's Job Title	I	
Law		Attorney		
		-		
10 Contributor's e		<b>11</b> Law firm of contributor's sp	ouse (ii any)	
Mendez Law		N/A		
	s a child, law firm of parent(s) (if any)			
N/A		N/A		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
09/18/2024	Peralez Franz LLP		\$2,500.00	
	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	ouse (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 (\$)	
08/15/2024	Perez, Kenny (Mr.)		\$2,500.00	
	Contributor address; City; State; Zip Code			
	Prowneyille TX 79521			
	Brownsville, TX 78521			
	Principal Occupation	Contributor's Job Title		
Law		Attorney		
	employer/law firm	Law firm of contributor's sp	ouse (if any)	
Kenny Perez	z Law	N/A		
If contributor is	s a child, law firm of parent(s) (if any)			
N/A N/A				
1				

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/20 Rpt: 18/32
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	loria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/21/2024	Quesada, Mario (Dr.)		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78526		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Medical		Doctor	
10 Contributor's	employer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
Orthopedic I	nstitute of Rio Grande Valley	N/A	
12 If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/23/2024	Ramirez, Victor (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		•
	·····, ····		
	Brownsville, TX 78521		
Contributor's I	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Law Office o	of Victor R Ramirez	N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:	<b>`</b>	Amount of Contribution (\$)
10/10/2024	Full name of contributor out-of-state PAC (ID#: Rendon, Aaron (Mr.)	)	\$1,500.00
10/10/2024			\$1,500.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520	1	
	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
Law Office o	of Aaron Wallace Rendon, PLLC	N/A	
If contributor is a child, law firm of parent(s) (if any)			
N/A N/A		N/A	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 16/20 Rpt: 19/32
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	loria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/16/2024	Robertson, Dale (Mr.)		\$250.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78526-8130		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's e	employer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
	ertson, Attorney at Law	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/23/2024	Rodriguez III, Albert (Mr.)	/	\$1,500.00
	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	Brownsville, TX 78502		
Contributor's I	Principal Occupation	Contributor's Job Title	
Law		Attorney	
	amala (ar flau) firm		
	employer/law firm	Law firm of contributor's sp	ouse (ii any)
	ucio Law Group, PLLC	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/30/2024	Roerig, Oliveira, & Fisher, LLP		\$1,000.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
O sustaile standa		Operatelike standa dala Tida	
Contributors	Principal Occupation	Contributor's Job Title	
Contributor's	amployor/low firm	Low firm of contributor's sn	
Contributor's employer/law firm Law firm of contributor's		Eaw Infin of Contributor 3 Sp	
If contributor i	s a child, law firm of parent(s) (if any)		
	s a child, law littl of parent(s) (it any)		

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 17/20 Rpt: 20/32
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Rincones, G	loria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/08/2024	Royston, Rayzor, Vickery & Williams LLP		\$1,000.00
	6 Contributor address; City; State; Zip Code		1
	Brownsville, TX 78521		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	·
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/11/2024	Sanchez Whittington Wood & Orozco, LLP		\$3,000.00
	Contributor address; City; State; Zip Code		1
	Brownsville, TX 78521		
Contributor's I	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)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/02/2024	Sanchez, Daniel (Mr.)		\$2,500.00
	Contributor address; City; State; Zip Code		
	Harlingen, TX 78550		
Contributor's I	Principal Occupation	Contributor's Job Title	
Law Attorney		Attorney	
Contributor's employer/law firm Law firm of contributor's s		bouse (if any)	
The Sanchez Law Firm N/A			
If contributor is a child, law firm of parent(s) (if any)			
N/A		N/A	

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/20 Rpt: 21/32
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)	
	loria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/10/2024	Silva P.A., Jaime (Dr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Medical		Doctor	
10 Contributor's	employer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
Brownsville	Heart Doctors	N/A	
12 If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/10/2024	Solis, Ryan (Mr.)		\$2,500.00
	Contributor address; City; State; Zip Code		
	McAllen, TX 78501		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
Ryan Solis L	aw Group	N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/07/2024	Stapleton, Edward	/	\$52.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)	
Ed Stapleton, Lawyer N/A			
-	s a child, law firm of parent(s) (if any)		
N/A N/A			

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 19/20 Rpt: 22/32
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Rincones, G	Gloria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7 Amount of Contribution (\$)
10/10/2024	Trejo, Micheal		\$500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	•
Law		Attorney	
10 Contributor's	employer/law firm	<b>11</b> Law firm of contributor's s	spouse (if any)
Law Office of	of Micheal P. Trejo	N/A	
12 If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
10/09/2024	Trevino Jr., Ediberto (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
Contributor's	Principal Occupation	Contributor's Job Title	•
Law		Attorney	
Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
Law Office of	of Eddie Trevino Jr PLLC	N/A	
If contributor	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor 🔲 out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
10/23/2024	Troiani, Anthony (Mr.)		\$250.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78520		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		spouse (if any)	
Troiani Law Firm N/A			
If contributor is a child, law firm of parent(s) (if any)			
N/A		N/A	
1			

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/20 Rpt: 23/32	
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Rincones, Gl	oria M. (The Honorable)		00069193
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
10/23/2024	Villarreal, Javier (Mr.)		\$2,500.00
	6 Contributor address; City; State; Zip Code		
	Brownsville, TX 78526		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's e	mployer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
Law Offices of	of Javier Villarreal, PLLC	N/A	
12 If contributor is	a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/10/2024	Zamir, Asim (Dr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Brownsville, TX 78521		
Contributor's F	Principal Occupation	Contributor's Job Title	
Medical		Doctor	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Brownsville C	Children's Clinic	N/A	
If contributor is	a child, law firm of parent(s) (if any)		
N/A		N/A	

	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     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Git/Awards/Memorials Expense     Printing Expense       mmittee     Legal Services       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)		
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 1/8 Rpt: 24/32	Rincones, Gloria M. (The Honorable)	00069193		
4	Date 09/19/2024	Payee name ASAP Printing Solutions			
6	Amount (\$) \$1,116.33	Payee address; City; State; Zip Code 2012 Orchid Ave Brownsville, TX 78504			
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense haterials (shirts)		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	09/17/2024	Cameron County Bar Association - Women's Law Section			
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 103 E Price Rd Ste B Brownsville, TX 78521			
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	outside of Texas. Complete Schedule T. , TX, officeholder living expense Sneakers for Students		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	10/16/2024	Chase			
	Amount (\$) \$5,500.00	Payee address;     City;     State;     Zip     Code       2300 Boca Chica Blvd			
		Brownsville, TX 78521			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense t		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

			EXPENDITURE CATEGORIE	S 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: 2/8 Rpt: 25/32		Rincones, Gloria M. (The Honorable) 00069193								
4	Date	5	Payee name								
	12/31/2024		Children's Museum of Brownsville								
6	Amount (\$)	7	Payee address; City; State; Z	Zip Coc	e						
	\$1,500.00 501 Ringgold St #5										
			Brownsville, TX 78520								
8	PURPOSE	(a)			b) Description						
ľ	OF	(4)	Category (See Categories listed at the top of this schedul Contributions/Donations Made By	ile)		outs	ide of Texas. Complete Schedule T.				
	EXPENDITURE		Candidate/Officeholder/Political Committee	ee			, officeholder living expense				
					donation						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offic	ce soug	ht		Office held				
	Date		Payee name								
	10/23/2024		DonorBox								
	Amount (\$)		Payee address; City; State; Z	Zip Coc	e						
	\$11.93		1520 Belle View Blvd	•							
			#4106								
			Alexandria, VA 22307								
-	DUDDOCE	(-)									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedul Fees	ıle)	b) Description Check if travel	outs	ide of Texas. Complete Schedule T.				
	EXPENDITURE		rees				, officeholder living expense				
					credit card fe	es	for donation made by Anthony				
					Troiani						
	Complete <u>ONLY</u> if direct		Candidate/Officeholder name Office	ce soug	ht		Office held				
	expenditure to benefit C/OI	٦									
	Date		Payee name								
	11/14/2024		Fiesta Graphics & Embroidery								
	Amount (\$)		Payee address; City; State; Zip Code								
	\$65.00		205 Paredes Line Rd								
	Brownsville, TX 78521										
	PURPOSE	(a)	Category (See Categories listed at the top of this schedul	ıle)	b) Description						
	OF Advertising Expense Check if travel outside of Texas. Complete Schedule T.										
	Check if Austin, TX, officeholder living expense advertising materials										
					advertising fi	aut	Sildis				
	Complete ONL V if direct	Ļ	Candidate/Officeholder name Offic	ce soug	bt		Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			ce soug	111		Office field				

		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 Office Overhead/Rental Expense Food/Beverage Expense Poling Expense 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:	EILER NAME	3 Filer ID (Ethics Commission Filers)							
-	Sch: 3/8 Rpt: 26/32	Rincones, Gloria M. (The Honorable)	00069193							
4	Date 10/18/2024	5 Payee name Friendship of Women								
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$500.00       95 E Price Rd       Brownsville, TX 78521									
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee       (b) Description         Image: Contribution of the temperature of the temperature of the temperature of the temperature of temper										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/06/2024	JW Marriott San Antonio Hill Country Resort & Spa								
Amount (\$) Payee address; City; State; Zip Code										
	\$13.80	23808 Resort Pkwy San Antonio, TX 78261								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense at convention							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
	Date	Payee name								
	09/07/2024	JW Marriott San Antonio Hill Country Resort & Spa								
Amount (\$)     Payee address;     City;     State;     Zip Code       \$12.45     23808 Resort Pkwy										
		San Antonio, TX 78261								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Onvention							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	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		Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials ittee Legal Services The Instruction Gu	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 F					3	Filer ID (Ethics Commission Filers)		
-	Sch: 4/8 Rpt: 27/32	F	00069193							
4	Date	<b>5</b> P	ayee name							
	09/08/2024		W Marriott San Antonio Hi	l Country R	Resort & S	ра				
6	Amount (\$)	<b>7</b> P	ayee address; City;	State;	; Zip Cod	e				
	\$12.45 23808 Resort Pkwy									
	San Antonio, TX 78261									
_					i.					
8	PURPOSE OF		ategory (See Categories listed at th	ne top of this scho	edule)	b) Description				
	EXPENDITURE	E	vent Expense					de of Texas. Complete Schedule T. officeholder living expense		
						hotel fee at c				
						noter ice ai e	0110	chuon		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		ndidate/Officeholder name	C	Office soug	ht		Office held		
	Date	Р	ayee name							
	09/08/2024		W Marriott San Antonio Hi	I Country R	Resort & S	ina				
-				-		-				
	Amount (\$)		ayee address; City;	State;	; Zip Cod	e				
	\$707.50	2	3808 Resort Pkwy							
		S	an Antonio, TX 78261							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the ees	ne top of this scho	edule) (	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  hotel for convention					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	Date	Р	ayee name							
	12/20/2024		a Pampa							
-	Amount (\$)		ayee address; City;	State <sup>.</sup>	Zip Cod	<u>م</u>				
	\$1,610.71		230 Pablo Kisel Blvd	State,	, zip cou	C				
	φ1,010.71	_								
		S	te F-102							
		B	rownsville, TX 78526							
	PURPOSE	<b>(a)</b> C	ategory (See Categories listed at th	e top of this sch	edule) (	b) Description				
	OF EXPENDITURE	F	ood/Beverage Expense		ŕ	Check if travel	outsi	de of Texas. Complete Schedule T.		
	EXPENDITORE							officeholder living expense		
						Christmas Pa and Divert C		Luncheon for 445th District Court		
	0 11 0 0 0 0 0									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office 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: 28/32										
4	Date 09/22/2024	5 Payee name Pensxpress									
6	Amount (\$) \$284.00	<ul> <li>Payee address; City; State; Zip Code</li> <li>1070H State Route 34 #196</li> <li>Matawan, NJ 07747</li> </ul>									
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense advertising materials (pens)</li> </ul>									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	11/14/2024	Ricardo's Restaurant									
	Amount (\$) \$545.00	Payee address; City; State; Zip Code 3201 S Expressway 83 Unit C Harlingen, TX 78550									
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense or Ceci Rangel								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held									
	Date	Payee name									
	12/10/2024	Ricardo's Restaurant									
	Amount (\$) \$47.29	Payee address; City; State; Zip Code 3201 S Expressway 83 Unit C Harlingen, TX 78550									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense t								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

			EXPENDITURE	E CATEGOR	RIES FOR E	3OX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Transportati           Food/Beverage Expense         Polling Expense         Travel in Dis           Gift/Awards/Memorials Expense         Printing Expense         Travel Out or						Travel in District Travel Out of Distri	ipment & Related Expense		
1	Total pages Schedule F1:	2 FILEF	RNAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 6/8 Rpt:29/32Rincones, Gloria M. (The Honorable)0006										
4	Date	5 Payee	e name								
	10/16/2024	State	Bar of Texas								
6	Amount (\$)	7 Paye	e address; City;	State;	Zip Code	9					
	\$375.00	P.O.	Box 12487								
		Austi	n, TX 78711-2487								
8	PURPOSE	( <b>a)</b> Categ	Ory (See Categories listed at the	e top of this sch	edule) (k	Description					
	OF EXPENDITURE	Fees						de of Texas. Comple			
						membership		officeholder living e	xpense		
						membership	uut				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candid	ate/Officeholder name	C	Dffice sough	t		Office held	ł		
	Date	Paye	e name								
	11/13/2024	State Bar of Texas									
	Amount (\$)	Paye	e address; City;	State;	Zip Code	9					
\$75.00 P.O. Box 12487											
	DUDDOSE		n, TX 78711-2487		10	<b>N –</b>					
	PURPOSE OF	( <b>a)</b> Categ Fees		e top of this sch	edule) (L	Description	outsi	de of Texas. Comple	ete Schedule T.		
	EXPENDITURE	rees					avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense				
						registered for	rao	conference			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						t			
	Date	Paye	e name								
	12/20/2024	Теха	s Center for the Judicia	ry							
	Amount (\$)	Paye	e address; City;	State;	Zip Code	9					
	\$75.00	1210	San Antonio Street								
		Austi	n, TX 78701								
	PURPOSE OF		Ory (See Categories listed at the		edule) (k	Description	·	do of Tours O	No Cabadula T		
	EXPENDITURE		ributions/Donations Mac lidate/Officeholder/Polit					de of Texas. Comple officeholder living e			
		Can		ical Comm	iiiiee	Awards Banc			Apende		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate/Officeholder name	C	Office sough	t		Office held	1		

			EXPENDITURE CATEGORI	IES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services	erage Expense Office Overhead/Rei bolling Expense Polling Expense ds/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: 7/8 Rpt: 30/32		Rincones, Gloria M. (The Honorable)				00069193			
4	Date	5	Payee name							
	12/03/2024		Texas RioGrande Legal Aid							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le					
	\$154.50 4920 N Interstate Hwy 35									
			Austin, TX 78751							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description					
	OF EXPENDITURE		Contributions/Donations Made By	,	Check if travel		ide of Texas. Complete Schedule T.			
			Candidate/Officeholder/Political Commit	ttee	Check if Austir donation	ı, TX	, officeholder living expense			
					uonation					
9	Complete ONLY if direct		Candidate/Officeholder name Of	fice sou	uht		Office held			
ľ	expenditure to benefit C/Oł			nice sou	jin					
	Date		Payoo nama							
	12/14/2024		Payee name Texas RioGrande Legal Aid							
	Amount (\$)			ZIP CO	le					
	\$150.00		4920 N Interstate Hwy 35							
			Austin, TX 78751							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description		ide of Taura Departure Debadule T			
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee							
			donations							
	Complete ONLY if direct	0	Candidate/Officeholder name Of	ffice sou	Jht		Office held			
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	10/16/2024		USPS							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$205.00		1535 E Los Ebanos Blvd							
			Brownsville, TX 78520							
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description					
	OF EXPENDITURE		Fees				ide of Texas. Complete Schedule T.			
							, officeholder living expense			
					P.O. Box Re	nd	1			
	Complete ONLY if direct	Ļ	Candidate/Officeholder name Of	fice soug	uht		Office held			
	expenditure to benefit C/OI			ທີ່ເຮັດ 2000	ji it					
-										

			EXPENDITURE	CATEGOF	RIES 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         Tr           Food/Beverage Expense         Polling Expense         Tr           / -         Gift/Awards/Memorials Expense         Printing Expense         Tr					Travel in District Travel Out of Dist	uipment & Related Expense				
1	Total pages Schedule F1:	5		C CAPICINE		ipiece .		3	Filer ID	(Ethics Commission Filers)		
1	Sch: 8/8 Rpt: 31/32		Rincones, Gloria M. (The Honorable)									
4	Date	5	Payee name									
	09/29/2024 Whataburger											
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le						
	\$186.31 2021 International Blvd											
			Brownsville, TX 78521									
8	PURPOSE					(h) D	escription					
ľ	OF		Category (See Categories listed at the t Food/Beverage Expense	op of this sche	edule)			outsic	de of Texas. Comp	lete Schedule T.		
	EXPENDITURE		roou/Deverage Expense			F			officeholder living			
						fo	d for jury n	nen	nbers			
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Dffice soug	ht			Office hel	d		
	Date		Payee name									
	10/17/2024		Whataburger									
	Amount (\$)		Payee address; City; State; Zip Code									
	\$130.90		2021 International Blvd									
	φ130.90											
			Brownsville, TX 78521									
	PURPOSE	(a)	Category (See Categories listed at the t	op of this sch	edule)	( <b>b)</b> De	escription					
	OF EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T									
							od for jury n			expense		
						10		nen	IDEIS			
									0111			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							a			
-	Data	1										
	Date 11/22/2024		Payee name									
			Whataburger									
	Amount (\$)		Payee address; City; State; Zip Code									
	\$194.46		2021 International Blvd									
			Brownsville, TX 78521									
	PURPOSE	(a)	Category (See Categories listed at the t	op of this sch	edule)	( <b>b)</b> De	escription					
			Food/Beverage Expense		,		Check if travel o	outsic	de of Texas. Comp	lete Schedule T.		
	EXPENDITURE		0						officeholder living	expense		
						fo	od for jury n	nen	nbers			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought Office held							d		
		•										

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ctio	on Guide explains how to complete this form.		bages Schedule K: 1/1 Rpt: 32/32	
2	FILER NAME				D (Ethics Commission Filers)	
	Rincones, G		0006			
4	Date	5	Name of person from whom amount is received	8 Amount (\$)		
	12/14/2024		Cameron County Imprest Fund			\$914.22
		6	Address of person from whom amount is received; City; State; Zip Code			
			Brownsville, TX 78520			
		7	Purpose for which amount is received Check if p	oliti	cal con	tribution returned to filer
			Reimbursement for New Mexico Conference			