#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00061857 30 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Lyda A. NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Ness-Garcia CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 2801 N. Florence MAILING Receipt # Amount **ADDRESS** Change of Address El Paso, TX 79902 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** The Honorable Lyda A. NAME NICKNAME LAST **SUFFIX** Ness-Garcia **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** c/o Wyatt Underwood **ADDRESS** 705 Texas (Residence or Business) El Paso, TX 79901 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (915) 920-1849 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

**GO TO PAGE 2** 

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District Judge Place El Paso District 383 El Paso

383

Family District Court Judge Place El Paso District

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

### FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Ness-Garcia, Lyda A	. (The Honorable	)	<b>14</b> Filer ID 00061857	(Ethics Con	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditure	ns accepted or political expenditi s may have been made without required to report this informatio	the candidate's or off	iceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAI	ME			
_	GENERAL					
		COMMITTEE ADI	DRESS			
	SPECIFIC					
		COMMITTEE CAI	MPAIGN TREASURER NAME			
		COMMITTEE CAI	MPAIGN TREASURER ADDRE	SS		
<b>16</b> CONTRIBUTION TOTALS			CONTRIBUTIONS(OTHER THAI CONTRIBUTIONS MADE ELE		s, \$	6,742.39
		ICAL CONTRIBU		10)	\$	13,484.78
EXPENDITURE	<del></del>	IZED POLITICAL E	S, OR GUARANTEES OF LOAN EXPENDITURES	15)	\$	1,779.90
TOTALS	4. TOTAL POLIT	ICAL EXPENDIT	TIDES			
	TOTAL FOLIT	ICAL EXPENDIT	UNLS		\$	3,559.80
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	17,842.94
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		ALL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
			I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
			The Honora	able Lyda A. Ness-0	Garcia	
			Signature o	f Candidate or Officeh	nolder	
AFFIX NC	TARY STAMP / SEAL AB	OVE				
				, this the		day
of	, 20, to co	ertify which, witness	s my hand and seal of office.			
Signature of offi	cer administering oath	Printed name	e of officer administering oath	Title of office	cer administer	ing oath

### **SUBTOTALS - JC/OH**

### FORM JC/OH COVER SHEET PG 3

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					0 01 00
<b>18</b> FIL	ER NAN	1E	19 Filer ID	(Ethic	cs Commission Filers)
Ne	ss-Gar	cia, Lyda A. (The Honorable)	00061857		
	HEDUL ME OF		SUBTOTAL AMOUNT		
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	13,484.78
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	4. X SCHEDULE E(J): LOANS (JUDICIAL)				2,714.86
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	3,559.80
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
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.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	4,627.10
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 1/4 Rpt: 4/30
2	FILER NAME	. Luda A (Tha Hanarahla)			3	Filer ID (Ethics Commission Filers)
	Ness-Garcia	a, Lyda A. (The Honorable)			L	00061857
4	Date 07/12/2024	<ul><li>5 Full name of contributor Carreon &amp; Beltran</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$) \$190.82
		El Paso, TX 79902				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oou	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	09/17/2024	Claudio Flores Jr PC Contributor address; City;	<u> </u>			\$339.53
		El Paso, TX 79901				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	09/10/2024	Longoria, Delia Virginia Contributor address; City;	State; Zip Code			\$150.00
		El Paso, TX 79912				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oou	se (if any)
		a Longoria Attorney at Law				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 2/4 Rpt: 5/30
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Ness-Garcia	, Lyda A. (The Honorable)				00061857
4	Date 07/15/2024	<ul><li>5 Full name of contributor Mena, Gilbert D</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$194.02
		El Paso, TX 79922				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	_	
	Attorney			Attorney		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
	Daniel Mena	Attorney at Law				
12	! If contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	10/24/2024	Ness , Amy Contributor address; City;	State; Zip Code			\$97.01
		Hollywood, CA 90068				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
_			i a)			
	ii contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	08/26/2024	Ramirez, Enriquez	ш ` .	,		\$200.00
		Contributor address; City;  El Paso, TX 79901	State; Zip Code		•	
$\vdash$	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if anv)
		nirez Attorney at Law				
		s a child, law firm of parent(s) (if	any)	l		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this 1	orm.	1	Total pages Schedule A(J)1: Sch: 3/4 Rpt: 6/30
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Ness-Garcia	ı, Lyda A. (The Honorable)			l	00061857
4	Date 08/01/2024			7	Amount of Contribution (\$) \$2,425.25	
		El Paso, TX 79903				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u> </u>	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oou	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	11/22/2024	Sam Flores Law Firm  Contributor address; City;	State; Zip Code			\$1,455.15
		El Paso, TX 79903				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	П	Amount of Contribution (\$)
	12/31/2024	Sam Flores Law Firm			l	\$970.10
		Contributor address; City; El Paso, TX 79903	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 4/4 Rpt: 7/30
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Ness-Garcia	, Lyda A. (The Honorable)				00061857
4	Date 08/28/2024	<ul><li>5 Full name of contributor Spencer Trial Attorneys</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$375.00
		El Paso, TX 79902				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u>.                                    </u>	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	08/24/2024	Vasquez, Arturo  Contributor address; City;	State; Zip Code		•	\$200.00
		El Paso, TX 79901				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
		f Arturo Vasquez				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	12/31/2024	Williams, John	_			\$145.51
		Contributor address; City; El Paso, TX 79901	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	John William	ns Attorney at Law				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instructio	on Guide explains how to complete this f	orm.	1	ges Schedule E(J): 2 Rpt: 8/30
2	FILER NAME Ness-Garcia, Ly	da A. (The Honorable)		3 Filer ID 000618	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS			<b>\$</b> 1,357.43
5	Date of loan 08/15/2024	7 Name of lender out-of-state PA Ness Garcia, Lyda	C (ID#:	)	9 Loan Amount (\$) \$957.43
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate  11 Maturity Date
	No	El Paso, TX 79901			08/15/2024
12	Lender's Principal	I Occupation	13 Lender's Job Title		
	Judge		Judge		
14	Lender's Employer State of Texas	r/Law Firm	15 Law Firm of lender's spous	se (if any)	
16	If lender is child, la	w firm of parent(s) (if any)			
17	Description of Coll  X None	ateral	18 Check if personal funds we	ere deposited	d into political account (See Instructions)
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
200	X not applicable	21 Guarantor address; City; State;	Zip Code		
	Guarantor's Princip		24 Guarantor's Job Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's spouse (if any)		
27	If guarantor is child	d, law firm of parent(s) (if any)			

	LOANS (J	UDICIAL)			SCHEDULE <b>E(J)</b>
	The Instruction	on Guide explains how to complete this f	orm.		tal pages Schedule E(J): h: 2/2 Rpt: 9/30
2	FILER NAME Ness-Garcia, Ly	da A. (The Honorable)			er ID (Ethics Commission Filers) 061857
4	TOTAL OF UN	IITEMIZED LOANS			\$ 1,357.43
5	Date of loan 07/02/2024	7 Name of lender	C (ID#:		9 Loan Amount (\$) \$400.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	El Paso, TX 79901			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Judge		Judge		
14	Lender's Employe State of Texas	r/Law Firm	15 Law Firm of lender's spous	se (if any	у)
16	If lender is child, la	w firm of parent(s) (if any)			
17	Description of Coll  X None	ateral	18 Check if personal funds we	ere depo	osited into political account (See Instructions)
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
23	X not applicable  Guarantor's Princi	21 Guarantor address; City; State; pal Occupation	Zip Code  24 Guarantor's Job Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if a	any)
27	If guarantor is child	d, law firm of parent(s) (if any)			

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 10/30	Ness-Garcia, Lyda A. (The Honorable) 00061857
4	Date	5 Payee name
	11/25/2024	Bradshaw, Andrew
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$180.00	5810 Clearcreek Dr
		Denver, CO 80212
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Web assistance
		vveb assistance
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	07/10/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo
		Waltham , MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  email
		email
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	09/10/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo
		Waltham , MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		email email
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/3 Rpt: 11/30	Ness-Garcia, Lyda A. (The Honorable) 00061857
4	Date	5 Payee name
	10/10/2024	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo
		Waltham , MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		email acct
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/25/2024	Kedai Pho
	Amount (\$)	Payee address; City; State; Zip Code
	\$131.39	720 Grand Avenue
		Glenwood Springs, CO 81601
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Dinner with attorneys & health care professionals
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/25/2024	Maverick Gas
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.61	3098 University
		Las Cruces, NM 88011
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		gas
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/3 Rpt: 12/30	Ness-Garcia, Lyda A. (The Honorable) 00061857
4	Date	5 Payee name
	11/25/2024	Maverick Gas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.05	3098 University
		Las Cruces, NM 88011
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  gas
		gus
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
⊨	Date	Payee name
	08/15/2024	Ness Garcia, Lyda (The Honorable)
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	confidential
		confidential
		EL Paso, TX 79902
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense repayment loan
		repayment loan
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	Davida marta
	Date 09/19/2024	Payee name Noce Carcia, Lyda (The Henerable)
L		Ness Garcia, Lyda (The Honorable)
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	confidential
		confidential
		EL Paso, TX 79902
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		reimbursement
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

Total pages Schedule I: Sch: 1/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers 00061857
Date 10/15/2024	5 Payee name A Race against blindness	
Amount (\$) 10.00	7 Payee Address; City; State; Zip 3316 S. Higley Glibert , AZ 85297	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (I Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (See instructions regarding type of information required. donation
Date	Payee name	
12/09/2024	A Race against blindness	
Amount (\$) 10.00	Payee Address; City; State; Zip 3316 S. Higley	
	Glibert , AZ 85297	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<ul> <li>Description (See instructions regarding type of information required. charitable donation</li> </ul>
Date	Payee name	
07/10/2024	Albertsons	
Amount (\$) 112.40	Payee Address; City; State; Zip 3100 N. Mesa	
	El Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (I Food/Beverage Expense	Description (See instructions regarding type of information required.  Office
Date	Payee name	
07/31/2024	Albertsons	
Amount (\$) 79.71	Payee Address; City; State; Zip 3100 N. Mesa	
	El Paso, TX 79902	
	(a) Category (See instructions for examples of acceptable categories)   (I Food/Beverage Expense	b) Description (See instructions regarding type of information required

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 2/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers 00061857
Date 08/19/2024	5 Payee name Albertsons	
Amount (\$) 6.78	7 Payee Address; City; State; Zip 3100 N. Mesa El Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.  Coffee
Date	Payee name	
09/16/2024	Albertsons	
Amount (\$) 286.02	Payee Address; City; State; Zip 3100 N. Mesa	
	El Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.  Food for Court event
Date 07/10/2024	Payee name Bank Of America	
Amount (\$) 10.00	Payee Address; City; State; Zip 330 N. Mesa	
	El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.  fee
Date	Payee name	
10/17/2024	Bank Of America	
Amount (\$) 20.00	Payee Address; City; State; Zip 330 N. Mesa	
	El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.  Bank fees

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Total pages Schedule I: Sch: 3/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00061857
Date 11/12/2024	5 Payee name Bank Of America
Amount (\$) 12.00	7 Payee Address; City; State; Zip 330 N. Mesa El Paso, TX 79901
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking  (b) Description Bank fee
Date	Payee name
10/02/2024	Bath and Body Work
Amount (\$) 30.96	Payee Address; City; State; Zip 655 Sunland Park
	El Paso, TX 79912
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) air fresheners courtroom  (b) Description (See instructions regarding type of information required air freshener courtroom
Date	Payee name
07/10/2024	Community Auction
Amount (\$) 216.49	Payee Address; City; State; Zip 139 Hill Country Lane
	Hotsprings, AR 71909
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description (See instructions regarding type of information required Donation to cancer foundation
Date 11/12/2024	Payee name Constant Contact
Amount (\$) 79.95	Payee Address; City; State; Zip 1601 Trapelo
PURPOSE OF EXPENDITURE	Waltham, MA 02451  (a) Category (See instructions for examples of acceptable categories) Advertising Expense  (b) Description (See instructions regarding type of information required email

Total pages Schedule I: Sch: 4/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	[	3 Filer ID (Ethics Commission Filers 00061857
Date 10/01/2024	5 Payee name Domino's pizza		
Amount (\$) 26.69	7 Payee Address; City; State; Zip 2601 N. Mesa El Paso, TX 79902		
PURPOSE OF EXPENDITURE		(b) Description (So office lunch	ee instructions regarding type of information required.
Date 07/05/2024	Payee name El Paso Executive Women's Lions Club		
Amount (\$) 60.00	Payee Address; City; State; Zip PO Box 97-3242  El Paso, TX 79997		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Fees	<b>(b)</b> Description (Something Membership fe	ee instructions regarding type of information required.
Date 08/02/2024	Payee name El Paso Executive Women's Lions Club		
Amount (\$) 60.00	Payee Address; City; State; Zip PO Box 97-3242  El Paso, TX 79997		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Fees	(b) Description (South	ee instructions regarding type of information required.
Date 09/20/2024	Payee name Etsy		
Amount (\$) 61.08	Payee Address; City; State; Zip 117 Adams St  Brooklyn, NY 11201		
PURPOSE OF EXPENDITURE	<u> </u>	(b) Description (Single Staff	ee instructions regarding type of information required.

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Total pages Schedule I: Sch: 5/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00061857
Date 10/17/2024	5 Payee name Etsy
Amount (\$) 61.09	7 Payee Address; City; State; Zip 117 Adams St  Brooklyn, NY 11201
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense (b) Description gift bday
Date	Payee name
11/01/2024	Etsy
Amount (\$) 61.09	Payee Address; City; State; Zip 117 Adams St  Brooklyn, NY 11201
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense Gift staff  (See instructions regarding type of information required Gift staff
Date	Payee name
11/27/2024	Famous Daves
Amount (\$) 162.38	Payee Address; City; State; Zip Airway
	El Paso, TX 79385
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Event Expense  (b) Description (See instructions regarding type of information required Thanksgiving lunch staff
Date	Payee name
08/05/2024	Glias Coffee
Amount (\$) 12.61	Payee Address; City; State; Zip 4841 Alberta Ave
	El Paso, TX 79901
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required Food/Beverage Expense Coffee for staff

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Total pages Schedule I: Sch: 6/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
Date 08/12/2024	5 Payee name Glias Coffee	
Amount (\$) 7.93	7 Payee Address; City; State; Zip 4841 Alberta Ave El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.)  Coffee office
Date	Payee name	
08/13/2024	Glias Coffee	
Amount (\$) 13.00	Payee Address; City; State; Zip 4841 Alberta Ave	
	El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.)  Coffee office
Date	Payee name	
08/19/2024	Glias Coffee	
Amount (\$) 6.00	Payee Address; City; State; Zip 4841 Alberta Ave	
	El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.  Coffee staff
Date	Payee name	
12/09/2024	House of Pizza	
Amount (\$) 46.24	Payee Address; City; State; Zip Stanton	
	El Paso, TX 79901	
	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.

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Total pages Schedule I: Sch: 7/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
Date 08/14/2024	5 Payee name Luby's	·
Amount (\$) 10.27	7 Payee Address; City; State; Zip 500 E San Antonio El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.)  Office Lunch
Date	Payee name	
08/05/2024	Lyft	
Amount (\$) 41.04	Payee Address; City; State; Zip 185 Berry St Suite 400 San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.)  Conference travel
Date	Payee name	
08/05/2024	Lyft	
Amount (\$) 30.94	Payee Address; City; State; Zip 185 Berry St Suite 400 San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Travel Out of District	(b) Description (See instructions regarding type of information required.  Conference travel
Date 08/05/2024	Payee name Lyft	L
Amount (\$) 77.62	Payee Address; City; State; Zip 185 Berry St Suite 400 San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Travel Out of District	(b) Description (See instructions regarding type of information required. conference travel airport

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Total pages Schedule Sch: 8/18 Rpt:	I: 2 FILER NAME Ness-Garcia, Lyda A. (The Honorable) 3 Filer ID (Ethics Commission Filers 00061857
Date 08/12/2024	5 Payee name Margin notes
Amount (\$) 14.60	7 Payee Address; City; State; Zip 7460 Cimarron El Paso, TX 79911
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Book (b) Description Book (See instructions regarding type of information required Book
Date	Payee name
09/20/2024	Margin notes
Amount (\$) 10.81	Payee Address; City; State; Zip 7460 Cimarron
PURPOSE OF EXPENDITURE	El Paso, TX 79911  (a) Category (See instructions for examples of acceptable categories) Books  (b) Description (See instructions regarding type of information required Book office
Date 08/05/2024	Payee name Marshalls
Amount (\$) 121.25	Payee Address; City; State; Zip 801 Sunland Park El Paso, TX 79912
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Decor  (b) Description (See instructions regarding type of information required Office Decor
Date 08/08/2024	Payee name Microsoft
Amount (\$) 18.38	Payee Address; City; State; Zip One Microsoft way  Redmond , WA 98052
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) software (See instructions regarding type of information required software)

#### SCHEDULE I

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Total pages Schedule I: Sch: 9/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)		3 Filer ID (Ethics Commission Filers 00061857
Date 08/23/2024	5 Payee name Microsoft		
Amount (\$) 2.26	7 Payee Address; City; State; Zip One Microsoft way  Redmond , WA 98052		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) software	(b) Description software	(See instructions regarding type of information required.
Date	Payee name		
09/03/2024	Microsoft		
Amount (\$) 18.50	Payee Address; City; State; Zip One Microsoft way		
	Redmond , WA 98052		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) software	(b) Description software	(See instructions regarding type of information required.
Date	Payee name		
09/03/2024	Microsoft		
Amount (\$) 18.38	Payee Address; City; State; Zip One Microsoft way		
	Redmond , WA 98052		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Software	(b) Description software	(See instructions regarding type of information required.
Date	Payee name		
09/03/2024	Microsoft		
Amount (\$) 34.63	Payee Address; City; State; Zip One Microsoft way		
PURPOSE OF EXPENDITURE	Redmond , WA 98052  (a) Category (See instructions for examples of acceptable categories) software	(b) Description software	(See instructions regarding type of information required.

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Total pages Schedule I: Sch: 10/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
Date 09/04/2024	5 Payee name Microsoft	
Amount (\$) 9.72	7 Payee Address; City; State; Zip One Microsoft way  Redmond , WA 98052	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Software	(b) Description (See instructions regarding type of information required.) software
Date	Payee name	
09/25/2024	Microsoft	
Amount (\$) 31.46	Payee Address; City; State; Zip One Microsoft way  Redmond , WA 98052	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Software	(b) Description (See instructions regarding type of information required. software internal purchase
Date 10/03/2024	Payee name Microsoft	
Amount (\$) 43.28	Payee Address; City; State; Zip One Microsoft way  Redmond , WA 98052	
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required. software
Date 11/01/2024	Payee name Microsoft	
Amount (\$) 21.64	Payee Address; City; State; Zip One Microsoft way  Redmond , WA 98052	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) software	(b) Description (See instructions regarding type of information required. software fee

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Total pages Schedule I: Sch: 11/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers 00061857
Date 11/01/2024	5 Payee name Microsoft	
Amount (\$) 75.75	7 Payee Address; City; State; Zip One Microsoft way  Redmond , WA 98052	
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required. software charge
Date	Payee name	
12/03/2024	Microsoft	
Amount (\$) 21.64	Payee Address; City; State; Zip One Microsoft way	
PURPOSE OF EXPENDITURE	Redmond , WA 98052  (a) Category (See instructions for examples of acceptable categories) software	(b) Description (See instructions regarding type of information required software
Date 08/03/2024	Payee name Midzai Creative shop	
Amount (\$) 30.00	Payee Address; City; State; Zip 413 Tillery Lane	
PURPOSE OF EXPENDITURE	Austin, TX 79702  (a) Category (See instructions for examples of acceptable categories)  Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.  gift staff print
Date 07/10/2024	Payee name Mister Car Wash	
Amount (\$) 20.00	Payee Address; City; State; Zip 2921 N. Mesa	
PURPOSE OF EXPENDITURE	El Paso, TX 79902  (a) Category (See instructions for examples of acceptable categories)  Travel In District	(b) Description (See instructions regarding type of information required Car wash for volunteers

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Total pages Schedule I: Sch: 12/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
Date 07/11/2024	5 Payee name Ness Garcia, Lyda (The Honorable)	
Amount (\$) 81.75	7 Payee Address; City; State; Zip confidential confidential EL Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See instructions regarding type of information required reimbursementt
Date	Payee name	
08/16/2024	Ness Garcia, Lyda (The Honorable)	
Amount (\$) 53.00	Payee Address; City; State; Zip confidential confidential EL Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See instructions regarding type of information required. reimburse
Date	Payee name	
07/09/2024	O'Reilly Auto	
Amount (\$) 90.90	Payee Address; City; State; Zip 5118 Doniphan	
	El Paso, TX 79932	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Travel In District	(b) Description (See instructions regarding type of information required. supplies
Date	Payee name	
09/20/2024	Panda Express	
Amount (\$) 28.58	Payee Address; City; State; Zip 13910 Horizon	
	Horizon City, TX 79928	
	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.

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Total pages Schedule I: Sch: 13/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers 00061857
Date 12/05/2024	5 Payee name Park Tavern	·
Amount (\$) 412.00	7 Payee Address; City; State; Zip 204 E. Mills El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Event Expense	(b) Description (See instructions regarding type of information required.  383 Christmas party deposit
Date	Payee name	
12/20/2024	Park Tavern	
Amount (\$) 150.00	Payee Address; City; State; Zip 204 E. Mills	
	El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Event Expense	(b) Description (See instructions regarding type of information required.  Balance of xmas party payment
Date	Payee name	
07/23/2024	Pets Barn	
Amount (\$) 11.34	Payee Address; City; State; Zip Mesa	
	El Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.  Donation to shelter
Date 08/03/2024	Payee name Sifuentez, JoAnne	
Amount (\$) 329.00	Payee Address; City; State; Zip INTERNET	
	INTERNET, TX 00000	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.  Staff and office mugs

Total pages Schedule I: Sch: 14/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061857
Date 10/03/2024	5 Payee name Sonic Drive In		
Amount (\$) 39.83	7 Payee Address; City; State; Zip 7069 S. Desert  Canutillo, TX 79835		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description food	(See instructions regarding type of information required.)
Date	Payee name		
09/20/2024	Starbucks		
Amount (\$) 20.00	Payee Address; City; State; Zip 2300 N. Mesa		
	El Paso, TX 79902		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description coffee	(See instructions regarding type of information required.
Date	Payee name		
09/05/2024	Starbucks		
Amount (\$) 25.76	Payee Address; City; State; Zip 2300 N. Mesa		
	El Paso, TX 79902		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description Coffee	(See instructions regarding type of information required.
Date	Payee name		
08/13/2024	Subway		
Amount (\$) 181.83	Payee Address; City; State; Zip 2625 Mesa		
	El Paso, TX 79902		
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)  Event Expense	(b) Description Family Judge	(See instructions regarding type of information required.

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Total pages Schedule I: Sch: 15/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers 00061857	
Date 08/28/2024	5 Payee name T J Maxx		
Amount (\$) 346.36	7 Payee Address; City; State; Zip 8889 Gateway El Paso, TX 79925		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b)  Decor office	Description (See instructions regarding type of information required, frames for office	
Date	Payee name		
10/02/2024	TFO		
Amount (\$) 113.12	Payee Address; City; State; Zip 7051 S. Desert Blvd  Canutillo, TX 79835		
PURPOSE OF EXPENDITURE		Description (See instructions regarding type of information required.  Gas for staff/volunteer	
Date 07/25/2024	Payee name Taco Bell		
Amount (\$) 31.56	Payee Address; City; State; Zip 2103 Mesa		
PURPOSE OF EXPENDITURE	El Paso, TX 79902  (a) Category (See instructions for examples of acceptable categories) (b) Food/Beverage Expense	Description (See instructions regarding type of information required.  Lunch for staff	
Date 07/22/2024	Payee name Target		
Amount (\$) 24.95	Payee Address; City; State; Zip 801 Sunland Park		
PURPOSE OF EXPENDITURE	El Paso, TX 79912  (a) Category (See instructions for examples of acceptable categories) (b Office Overhead/Rental Expense	Description (See instructions regarding type of information required.  Supplies office	

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Total pages Schedule I: Sch: 16/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
Date 10/02/2024	5 Payee name Texas Exes	
Amount (\$) 25.00	7 Payee Address; City; State; Zip 2110 San Jacinto  Austin, TX 78712	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Fees	(b) Description (See instructions regarding type of information required.) Texas Alumni donation
Date 07/10/2024	Payee name Texas Government service fee	
Amount (\$) 2.00	Payee Address; City; State; Zip 500 E. San Antonio  El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Fees	(b) Description (See instructions regarding type of information required. credit card fee
Date 07/24/2024	Payee name Tippi Teas	
Amount (\$) 17.59	Payee Address; City; State; Zip 2501 N. Stanton  El Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.  For staff
Date 08/05/2024	Payee name Trader Joes	
Amount (\$) 73.65	Payee Address; City; State; Zip 800 S. Shamrock Ave Monrovia, CA 91016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.  Office health & snacks

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Total pages Schedule I: Sch: 17/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857	
Date 08/08/2024	5 Payee name Valero		
Amount (\$) 40.00	7 Payee Address; City; State; Zip 3000 N. Mesa El Paso, TX 79902		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Travel In District	(b) Description (See instructions regarding type of information required.)  Expense for volunteer/staff	
Date	Payee name		
09/10/2024	Valero		
Amount (\$) 37.15	Payee Address; City; State; Zip 3000 N. Mesa		
PURPOSE OF EXPENDITURE	El Paso, TX 79902  (a) Category (See instructions for examples of acceptable categories)  Travel In District	(b) Description (See instructions regarding type of information required.  gas event	
Date 12/06/2024	Payee name Varela, Alice		
Amount (\$) 55.00	Payee Address; City; State; Zip Online Online el Paso, TX 79901		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required:  Cake for Christmas party	
Date 11/27/2024	Payee name Village Inn		
Amount (\$) 17.69	Payee Address; City; State; Zip Mesa		
	El Paso, TX 79902		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.)  Pie for thanksgiving office lunch	

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Total pages Schedule I: Sch: 18/18 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
Date 12/02/2024	5 Payee name Weso Steak House	
Amount (\$) 184.59	7 Payee Address; City; State; Zip 601 N. Mesa El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.)  Dinner lawyers & staff
Date	Payee name	I.
09/30/2024	Whole Foods Market	
Amount (\$) 26.82	Payee Address; City; State; Zip 100 Pitts St	
	El Paso, TX 79912	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) staff
Date	Payee name	
09/23/2024	Wingstop	
Amount (\$) 66.07	Payee Address; City; State; Zip 2900 N. Mesa	
	El Paso, TX 79902	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.  Staff lunch
Date	Payee name	
10/31/2024	walgreens	
Amount (\$) 36.97	Payee Address; City; State; Zip 2800 N. Mesa	
	El Paso, TX 79901	
	(a) Category (See instructions for examples of acceptable categories)	(See instructions regarding type of information required.)