### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commission 00085753	n Filers)	2 Total pages t	filed: 12
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER		Christine				USE ONLY
NAME		CHIISUNE			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/14/2025	
		Vasquez Hort	ick	00111/		
		vasquez non				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	206 E. Locust St.					
ADDRESS					Receipt #	Amount
	Con Antonia TV 70212					
Change of Address	San Antonio, TX 78212				Date Processed	•
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER		Vinnie				
NAME	1011.5.	VIIIIIIE				
	NICKNAME	_AST			SUFFIX	
		Abrego-Sanch	ez			
6 CAMPAIGN	STREET ADDRESS (NO PO E	BOX PLEASE):	APT / S	SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	3711 River Falls	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,		,
ADDRESS						
(Residence or Business)						
	San Antonio, TX 78259					
7 CAMPAIGN TREASURER	AREA CODE PHONE	ENUMBER E	EXTENSION			
PHONE	(210) 862-1084					
-						
8 REPORT						
TYPE	X January 15	30th day before	e election 🗌 Ru	noff		ampaign treasurer
					appointment (of	
	July 15	8th day before		ceeded modified	Final Report (At	tach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TF	IROUGH	12/31/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimary	Runoff	Other	
			1			
			ieneral	Special		
11 OFFICE	OFFICE HELD (if any)	•	1	2 OFFICE SOUGHT	(if known)	
	District Judge District 225 E	Bexar				
		GO 1	O PAGE 2			
Forme provided by Ta	was Ethics Commission	1404041 -4	hice state ty us		1/0	ion \// 1 0 Edd2aca
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us		vers	ion V4.1.0.5dd2ace2

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

FORM JC/OH COVER SHEET PG 2 2 of 12

T

13 C / OH NAME	Vasquez Hortick, Ch	ristine (The Honora	able)	14 Filer ID 00085753	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	. These expenditures	accepted or political expenditu may have been made without quired to report this information	the candidate's or offi	iceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	E			
	GENERAL					
SPECIFIC         COMMITTEE CAMPAIGN TREASURER NAME         COMMITTEE CAMPAIGN TREASURER ADDRESS						
16 CONTRIBUTION TOTALS			ONTRIBUTIONS(OTHER THAN CONTRIBUTIONS MADE ELE		, \$	0.00
		ICAL CONTRIBU			\$	0.00
	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES					
TOTALS					\$	0.00
4. TOTAL POLITICAL EXPENDITURES					\$	4,040.84
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING P		S MAINTAINED AS OF THE L	AST DAY OF THE	\$	31,317.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		t	swear, or affirm, under penalty rue and correct and includes a under Title 15, Election Code.			
			The Honorable	e Christine Vasque:	z Hortick	
		-	Signature of	Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AE	OVE				
Sworn to and subs	cribed before me, by the	said		, this the		day
of	, 20, to c	ertify which, witness	my hand and seal of office.			
Signature of offi	cer administering oath	Printed name of	of officer administering oath	Title of offic	cer administer	ing oath
Forms provided by Te	exas Ethics Commissio	n www.e	ethics.state.tx.us		Version V4	4.1.0.5dd2ace2

#### SUBTOTALS - JC/OH

#### FORM JC/OH COVER SHEET PG 3 3 of 12

			0 0 12					
	<b>8</b> FILER NAME <b>19</b> Filer IDVasquez Hortick, Christine (The Honorable)00085753							
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE							
1.	\$							
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS							
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$					
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$					
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 3,820					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$					
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD							
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		<b>\$</b> 220					
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)			
-	Sch: 1/6 Rpt: 4/12	Vasquez Hortick, Christine (The Honorable)	00085753			
4	Date 12/21/2024	5 Payee name Bexar County Democratic Party				
6	Amount (\$) \$25.00	<ul> <li>Payee address; City; State; Zip Code</li> <li>1844 Fredericksburg Rd.</li> <li>San Antonio, TX 78201</li> </ul>				
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense Recurring Donation     </li> </ul>				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/21/2024	Bexar County Democratic Party				
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 1844 Fredericksburg Rd.				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense onation			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/21/2024	Bexar County Democratic Party				
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 1844 Fredericksburg Rd.				
		San Antonio, TX 78201				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense onation			
	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		F F G mmittee L	vent Expense ees ood/Beverage Expense ift/Awards/Memorials E egal Services <b>The Instruction Gui</b> d	xpense	Loan Repay Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reinbursement nead/Rental Expense ense iense iges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/6 Rpt: 5/12		Vasquez Hor	tick, Christine (1	The Honor	rable)			00085753	
4	Date	5	Payee name							
	07/29/2024		Bexar County	y Democratic Pa	arty					
6	Amount (\$)	7	Payee address	s; City;	State	; Zip Cod	е			
	\$500.00		1844 Frederi	cksburg Rd.						
			San Antonio,	TX 78201						
8	PURPOSE	(a)	Category (See	Categories listed at the	top of this sch	nedule)	b) Description			
	OF			/Donations Mad		,		outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		Candidate/O	fficeholder/Politi	cal Comm	nittee	Check if Austir	n, TX	, officeholder living	expense
							Donation			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	eholder name	(	Office soug	ht		Office he	eld
	experiatione to benefit C/Of									
	Date		Payee name							
	09/09/2024		Bexar Count	Young Democ	rats					
	Amount (\$)		Payee address	; City;	State	; Zip Cod	e			
	\$100.00		1844 Frederi			, 1				
	\$100.00		1044116061	choburg rtu.						
			San Antonio,	TX 78201						
	PURPOSE	(a)	Category (See	Categories listed at the	top of this sch	nedule)	b) Description			
	OF EXPENDITURE			/Donations Mad					ide of Texas. Com	•
			Candidate/O	fficeholder/Politi	cal Comm	nittee		ı, TX	, officeholder living	expense
							Donation			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	enolder name	C	Office soug	nt		Office he	210
		-								
	Date		Payee name							
	08/14/2024		Bexar County	/ Young Democ	rats					
	Amount (\$)		Payee address	s; City;	State	; Zip Cod	e			
	\$100.00		1844 Frederi	cksburg Rd.						
			San Antonio,	TX 78201						
	PURPOSE	(a)	Category (See	Categories listed at the	top of this sch	nedule)	b) Description			
	OF EXPENDITURE			/Donations Mad					ide of Texas. Com	
			Candidate/O	fficeholder/Politi	cal Comm	nittee		n, TX	, officeholder living	expense
							Donation			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Office	eholder name	C	Office soug	ht		Office he	eld
		1								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide		Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	FILER		•		·	3	Filer ID	(Ethics Commission Filers)
-	Sch: 3/6 Rpt: 6/12		ez Hortick, Christine (Th	ne Honora	able)			00085753	
4	Date	Payee	name						
	11/21/2024	Eagles	s Flight						
6	Amount (\$)	Payee	address; City;	State;	Zip Cod	9			
	\$100.00	26520	Fire Dance						
		Boern	e, TX 78006						
8	PURPOSE		ry (See Categories listed at the to			b) Description			
ľ	OF		outions/Donations Made		dule)		outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		date/Officeholder/Politica		ttee	Check if Austir	ı, TX	, officeholder living	expense
						Donation			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	O	ffice soug	nt		Office he	ld
	Date	Payee	name						
	10/10/2024	Godac	ldy						
_	Amount (\$)	Pavee	address; City;	State:	Zip Cod	2			
	\$35.16		N. Hayden Rd. #219	oluic,	210 000	5			
	\$55.10	14400							
		Scotts	dale, AZ 85260						
	PURPOSE	<b>a)</b> Catego	ry (See Categories listed at the to	p of this sche	edule)	b) Description			
	OF EXPENDITURE	Email	Domain					ide of Texas. Com	
						Email Domai		, officeholder living	expense
	Complete ONIL V if direct	Condido	te/Officeholder name	0	ffice soug	-+		Office he	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Canulua		0	nice soug	п		Office fie	
_									
	Date	Payee							
	09/30/2024	Godad	ldy						
	Amount (\$)		address; City;	State;	Zip Cod	9			
	\$495.50	14455	N. Hayden Rd. #219						
		Scotts	dale, AZ 85260						
	PURPOSE	<b>a)</b> Catego	ry (See Categories listed at the to	op of this sche	edule) (	b) Description			
	OF EXPENDITURE		te domain/contact list		,	Check if travel	outs	ide of Texas. Com	plete Schedule T.
	EXPENDITORE							, officeholder living	expense
						Website dom	nain	/contact list	
	Complete ONLY if direct	Candida	te/Officeholder name	Of	ffice soug	nt		Office he	ld
	expenditure to benefit C/OI								

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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 Filer ID (Ethics Commission Filers)			
	Sch: 4/6 Rpt: 7/12	Vasquez Hortick, Christine (The Honorable)	00085753			
4	Date 12/30/2024	5 Payee name Hortick, Christine				
6	Amount (\$) \$734.00	7 Payee address; City; State; Zip Code 100 Dolorosa San Antonio, TX 78205				
8	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. ïX, officeholder living expense nt fo expenses			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/15/2024	Northwest Bexar County Democrats				
	Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O.Box 681911 San Antonio, TX 78268				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. "X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	07/01/2024	Pens.com				
	Amount (\$) \$359.28	Payee address; City; State; Zip Code 1 Sharpie Way Building 3 Shelbyville, TN 37160				
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Gitt/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME 3	B Filer ID (Ethics Commission Filers)			
	Sch: 5/6 Rpt: 8/12	Vasquez Hortick, Christine (The Honorable)	00085753			
4	Date 10/15/2024	<ul> <li>Payee name</li> <li>SA Youth</li> </ul>				
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1215 W. Popular San Antonio, TX 78204				
8	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/06/2024	San Antonio Coalition for Veterans & Families				
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 4102 S. New Braunfels Ave.				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. "X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/15/2024	The Gallery Collection				
	Amount (\$) \$327.92	Payee address;City;State;Zip Code400 North Frontage RD				
		Landing, NJ 07850				
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials Expense Printing E	ayment/Reinbursement     Solicitation/Fundraising Expense       erhead/Rental Expense     Transportation Equipment & Related Expense       pense     Travel in District       xpense     Travel Out of District       /ages/Contract Labor     OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 1/3 Rpt: 10/12	2 FILER NAME Vasquez Hortick, Christine (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085753			
4 Date 10/12/2024	5 Payee name Korbel, Susan (Ms.)				
6 Amount (\$) \$100.00	<ul> <li>Payee address; City; State; Zip Co 1931 NW Military HWY 250</li> <li>San Antonio, TX 78213</li> </ul>	de			
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 07/08/2024	Payee name North East Bexar County Democrats				
Amount (\$) \$20.00 Reimbursement from political contributions intended	Payee address; City; State; Zip Co P.O. Box 700766 San Antonio, TX 78270	de			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Recurring Donation			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 08/08/2024	Payee name North East Bexar County Democrats				
Amount (\$) \$20.00	Payee address; City; State; Zip Co P.O. Box 700766	de			
Reimbursement from political contributions intended	San Antonio, TX 78270				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
Advertising Expe Accounting/Banh Consulting Expe Contributions/ D Candidate/Of Credit Card Payr	king nse onations Made B ficeholder/Politic	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement verhead/Rental Expense xpense Expense 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 S Sch: 2/3 Rpt		<ul> <li>FILER NAME</li> <li>Vasquez Hortick, Christine (The Honorable)</li> </ul>		<b>3</b> Filer ID (Ethics Commission Filers) 00085753		
4 Date 09/08/2024		5 Payee name North East Bexar County Democrats	Payee name			
6 Amount (\$)		<ul> <li>Payee address; City; State; Zip C</li> <li>P.O. Box 700766</li> <li>San Antonio, TX 78270</li> </ul>	ode			
8 PURPOSI OF EXPENDITU		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ON</u> expenditure to C/OH		Candidate/Officeholder name	Office sought	Office held		
Date		Payee name				
10/08/2024		North East Bexar County Democrats				
Amount (\$)		Payee address; City; State; Zip C P.O. Box 700766 San Antonio, TX 78270	ode			
PURPOSI OF EXPENDITU		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ON		
Complete <u>ON</u> expenditure to C/OH		Candidate/Officeholder name	Office sought	Office held		
Date 11/08/2024		Payee name North East Bexar County Democrats				
Amount (\$)	\$20.00	Payee address; City; State; Zip C P.O. Box 700766	ode			
Reimbursen political con intended		San Antonio, TX 78270				
PURPOSI OF EXPENDITU		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ON</u> expenditure to C/OH		Candidate/Officeholder name	Office sought	Office held		

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reinbursement verhead/Rental Expense expense Expense 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 G: Sch: 3/3 Rpt: 12/12	2 FILER NAME Vasquez Hortick, Christine (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085753		
4	Date 12/08/2024	5 Payee name North East Bexar County Democrats		1		
6	Amount (\$) \$20.00	7 Payee address; City; State; Zip C P.O. Box 700766	ode			
	political contributions intended	San Antonio, TX 78270				
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	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Officeholder name	Office sought	Office held		