JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to co	mplete this form.	1 Filer ID (Ethics Comm 00068017	,	2 Total pages fi	ed: .5	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI			
OFFICEHOLDER	The Honorable	Jaime E.			OFFICE	JSE UNL I	
NAME					Date Received		
					ELECTRONIC	ALLY FILED	
	NICKNAME	LAST		SUFFIX	01/15/2025		
		Tijerina					
		пјенна					
4 CANDIDATE /	ADDRESS / PO BOX; A	.PT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivered o	r Date Postmarked	
	P.O. Box 4015						
MAILING ADDRESS					Receipt #	Amount	
Change of Address	McAllen, TX 78502				Date Processed		
					Date Imaged		
					Dato magoa		
E CAMDAICN		FIDET			<u> </u>		
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST			МІ		
NAME		Diane E.					
	NICKNAME	LAST			SUFFIX		
		Tijerina			COLLING		
		пјенна					
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	AP	T / SUITE #; CITY;	STA	TE; ZIP CODE	
TREASURER ADDRESS	4517 Ben Hogan Ave.						
ADDRE35							
(Residence or Business)							
	McAllen, TX 78503						
7 CAMPAIGN TREASURER	AREA CODE PH	IONE NUMBER	EXTENSION				
PHONE	(956) 299-8386						
8 REPORT							
TYPE	X January 15	30th day befor	e election	Runoff	15th day after ca		
					appointment (offi	ceholder only)	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)	
9 PERIOD	Month Day Yea	ar		Month Day	Year		
COVERED	10/27/2024	т	HROUGH	12/31/202	4		
10 ELECTION	ELECTION DATE			ELECTION TYPE	_		
	Month Day Yea		Primary	Runoff	Other		
	11/05/2024		General	Special			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT			
	Court Of Appeals, Just	ce Place 4 Distric	t 13 Hidalgo	Court of Appeals	,Chief Justice Pl	ace 1 District 13	
		GO	TO PAGE 2				
⊢orms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	IS	Versi	on V4.1.0.5dd2ace	

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 15

L

13 C / OH NAME	Tijerina, Jaime E. (Tl	ne Honorable)	14 Filer ID 00068017	(Ethics Commissi	ion 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 offic	ceholder's knowled	dge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	X GENERAL	Texas Alliance for Life			
		COMMITTEE ADDRESS			
	SPECIFIC SPECIFIC	800 Centre Park Dr.			
		Austin, TX 78754			
		COMMITTEE CAMPAIGN TREASURER NAM	ЛЕ		
		Shaw, James			
		COMMITTEE CAMPAIGN TREASURER ADD	DRESS		
		4505 Corazon Cv			
		Round Rock, TX 78681			
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS(OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE		\$	0.00
		ICAL CONTRIBUTIONS		\$	4,819.73
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	
TOTALS 4. TOTAL POLITICAL EXPENDITURES					0.00
				\$	9,647.08
CONTRIBUTION	5. TOTAL POLITIC REPORTING PI	AL CONTRIBUTIONS MAINTAINED AS OF THERIOD	HE LAST DAY OF THE	\$	3,552.91
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS	S AS OF THE LAST DAY	\$	0.00
17 AFFIDAVIT	-				
		l swear, or affirm, under pe true and correct and includ under Title 15, Election Co	les all information required		
		The H	lonorable Jaime E. Tijer	ina	
			re of Candidate or Officeho		
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subs	cribed before me, by the	aid	, this the	da	٩V
		ertify which, witness my hand and seal of office			2
Signature of offi	cer administering oath	Printed name of officer administering oat	h Title of office	er administering oa	ath
Forms provided by Te	xas Ethics Commission	n www.ethics.state.tx.us		Version V4.1.0.	.5dd2ace

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT **SUPPORT & TOTALS**

FORM JC/OH ADDENDUM

				Page 3 of 15		
C / OH NAME	Tijerina, Jaime E. (Th	e Honorable)	Filer ID 00068017	(Ethics Commission Filers)		
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have	of political expenditures by political committees to support the candidate / officeholder. These been made without the candidate's or officeholder's knowledge or consent. Candidates and ed to report this information only if they receive notice of such expenditures				
	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Judicial Fairness PAC				
		COMMITTEE ADDRESS				
	SPECIFIC	919 Congress Ave				
		Ste 455				
		Austin, TX 78701				
		COMMITTEE CAMPAIGN TREASURER NAME Parsley, Lee				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
		919 Congress Ave				
		Ste 455				
		Austin, TX 78701				

FORM JC/OH **COVER SHEET PG 3**

		4 of 15
	19 Filer ID 00068017	(Ethics Commission Filers)
		SUBTOTAL AMOUNT
ONTRIBUTIONS (JUDICIAL)		\$ 4,819.

20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 4,819.73
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 CONTRIBUTIONS	\$ 9,647.08
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 57.80

SUBTOTALS - JC/OH

Tijerina, Jaime E. (The Honorable)

18 FILER NAME

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 1/3 Rpt: 5/15
2 FILER NAME Tijerina, Jaim	e E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068017
10/28/2024	 5 Full name of contributor out-of-state PAC (ID#: Arechiga, Armando 6 Contributor address; City; State; Zip Code 	7 Amount of Contribution (\$) \$208.20	
	McAllen, TX 78501		
	rincipal Occupation	•	
Education 10 Contributor's e McAllen ISD	mployer/law firm	Teacher 11 Law firm of contributor's sp	bouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date 11/08/2024	Full name of contributor out-of-state PAC (ID#:_ Boswell, Chris Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$520.51
Contributor's P	Harlingen, TX 78550 rincipal Occupation	Contributor's Job Title	
Lawyer		Lawyer	
Contributor's e Self Employe	mployer/law firm d	Law firm of contributor's sp	bouse (if any)
	a child, law firm of parent(s) (if any)		
Date 11/09/2024	Full name of contributor out-of-state PAC (ID#: Garcia, Ricardo Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$520.51
	McAllen, TX 78503		
	rincipal Occupation	Contributor's Job Title	
Lawyer	mployer/law firm	Lawyer Law firm of contributor's sp	nouse (if any)
Self Employe			
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided b	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.5dd2ace2

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/3 Rpt: 6/15	
2 FILER NAME Tijerina, Jain	ne E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068017
4 Date 11/08/2024	 5 Full name of contributor out-of-state PAC (ID#: Garcia, Roberto (Mr.) 6 Contributor address; City; State; Zip Code 	7 Amount of Contribution (\$) \$100.00	
	Edinburg, TX 78504		
	Principal Occupation	9 Contributor's Job Title	
Retired		Retired	
10 Contributor's e N?A	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date 12/20/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/20/2024	John Guerra Campaign Contributor address; City; State; Zip Code	\$200.00	
	Mission, TX 78574		
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 (\$)
11/11/2024	Jones, Galligan, Key & Lozano LLP		\$2,500.00
	Contributor address; City; State; Zip Code		
	Weslaco, TX 78596		
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)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instru	ction Guide explains how to complete th	1 Total pages Schedule A(J)1: Sch: 3/3 Rpt: 7/15	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Tijerina, Jai	ne E. (The Honorable)		00068017
4 Date	5 Full name of contributor Out-of-state PAC (I	7 Amount of Contribution (\$)	
11/11/2024	Nye Law Office PLLC	\$250.00	
	6 Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78411		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of Contribution (\$)
11/13/2024	Rupert, Kyle	D#)	\$520.51
11,10,2021	Contributor address; City; State; Zip Code		
	Edinburg, TX 78540		
Constributerile		Contributorio Job Title	
Developer	Principal Occupation	Contributor's Job Title Owner	
	employer/law firm Proportion	Law firm of contributor's sp	oouse (if any)
Santa Cruz			
If contributor	s a child, law firm of parent(s) (if any)		

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollir Gift/Awards/Memorials Expense Printi	Repayment/Reimbursement Overhead/Rental Expense g Expense gs (Expense es/Wages/Contract Labor 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:	ILER NAME	-	3 Filer ID (Ethics Commission Filers)		
	Sch: 1/7 Rpt: 8/15	ijerina, Jaime E. (The Honorable)		00068017		
4	Date	ayee name				
	10/31/2024	pple.com				
6	Amount (\$) \$0.99	ayee address; City; State; Zip Dne Park Way Cupertino, CA 95014	Code			
8	PURPOSE		(b) Description			
0	OF	Category (See Categories listed at the top of this schedule)		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense rtising		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office	sought	Office held		
	Date	ayee name				
	12/03/2024	pple.com				
	Amount (\$)	ayee address; City; State; Zip	Code			
	\$0.99	Dne Park Way Cupertino, CA 95014				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) dvertising Expense		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense ertising		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office	sought	Office held		
	Date	ayee name				
	12/31/2024	pple.com				
	Amount (\$)	ayee address; City; State; Zip	Code			
	\$0.99	one Apple Pkwy				
		Cupertino, CA 95014	- 1			
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) dvertising Expense		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense ertising		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office	sought	Office held		

		EXPENDITURE CATEGORIES	FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Offic Food/Beverage Expense Poll Gift/Awards/Memorials Expense Prin	Repayment/Reimbursement e Overhead/Rental Expense ng Expense ries/Wages/Contract Labor o 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:	ILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/7 Rpt: 9/15	ijerina, Jaime E. (The Honorable)		00068017
4	Date 11/01/2024	Payee name Evertising LLC		
6	Amount (\$) \$112.03	Payee address; City; State; Zip 1912 Alvarado St Edinburg, TX 78539	Code	
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ard
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office	sought	Office held
	Date	Payee name		
	11/01/2024	Facebook		
	Amount (\$) \$433.55	Yayee address; City; State; Zij Hacker Way	Code	
	PURPOSE OF EXPENDITURE	Menlo Park, CA 94025 Category (See Categories listed at the top of this schedule) Advertising Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Advertising
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name Office	sought	Office held
	Date	ayee name		
	10/31/2024	lernandez, Joacim (Mr.)		
	Amount (\$) \$1,000.00	vayee address; City; State; Zig 317 E Filmore Ave	Code	
		Nton, TX 78573		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		outside of Texas. Complete Schedule T. h, TX, officeholder living expense
ļ	Complete ONLY if direct expenditure to benefit C/O	ndidate/Officeholder name Office	sought	Office held

			EXPENDITURE C	CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp	ense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ment/Reimbursement head/Rental Expense ense jense ages/Contract Labor		Travel in District Travel Out of Distr	uipment & Related Expense
1	Total pages Schedule F1:	2		•		<u>.</u>	3	Filer ID	(Ethics Commission Filers)
	Sch: 3/7 Rpt: 10/15		Tijerina, Jaime E. (The Honora	able)				00068017	
4	Date	5	Payee name						
	12/09/2024		Hernandez, Joacim (Mr.)						
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le			
	\$1,000.00		1317 E Filmore Ave						
			Alton, TX 78573						
8	PURPOSE	(a)	Category (See Categories listed at the to	op of this sche	edule)	b Description			
	OF EXPENDITURE		Consulting Expense					de of Texas. Compl officeholder living e	
							, 17,	, onicenoider living e	expense
						Consulting			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С)ffice sou	ht		Office hel	d
	Date		Payee name						
	11/01/2024		MAILCHIMP						
	Amount (\$)		Payee address; City;	State;	Zip Co	le			
	\$140.71		512 Means Street						
			Suite 404						
			Atlanta, GA 30318						
	PURPOSE	(a)	Category (See Categories listed at the to	op of this sche	edule)	(b) Description			
	OF EXPENDITURE		Advertising Expense		,			de of Texas. Compl	
								officeholder living e	expense
						Email Service	9		
	Complete ONLY if direct		andidate/Officeholder name		Office soug	ht		Office hel	d
	expenditure to benefit C/OI					in t		Office field	u
	Date		Payee name						
	12/02/2024		MAILCHIMP						
	Amount (\$)		Payee address; City;	State:	Zip Co	le			
	\$140.71		512 Means Street	,					
			Suite 404						
			Atlanta, GA 30318						
	DUDDOCC								
	PURPOSE OF		Category (See Categories listed at the to	op of this sche	edule)	(b) Description	outsi	de of Texas. Compl	lete Schedule T
	EXPENDITURE		Advertising Expense					officeholder living e	
						Email Service	e		
	Complete <u>ONLY</u> if direct		andidate/Officeholder name	C	Office sou	ht		Office hel	d
	expenditure to benefit C/Oł	-							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/W	xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 4/7 Rpt: 11/15		Tijerina, Jaime E. (The Honorable)				00068017	
4	Date	5	Payee name					
	11/01/2024		Neely Printing					
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode			
	\$508.84		1011Louisiana					
			Corpus Christi, TX 78404					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Advertising Expense	iouuloj		outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE					, TX,	officeholder living expense	
					Signs			
_								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight		Office held	
-	Date		Payee name					
	11/15/2024		Rio Bank					
	Amount (\$)			; ZIP CO	bde			
	\$1.76		PO BOX 4169					
			McAllen, TX 78502					
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Accounting/Banking	,			de of Texas. Complete Schedule T.	
							officeholder living expense	
					Debit Card fe	е		
			Candidate/Officeholder name	0#:00			Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder hame	Office sou	ignt			
_		_						
	Date		Payee name					
	12/16/2024		Rio Bank					
	Amount (\$)			; Zip Co	ode			
	\$1.76		PO BOX 4169					
			McAllen, TX 78502		1			
	PURPOSE OF		Category (See Categories listed at the top of this sch	nedule)	(b) Description			
	EXPENDITURE		Accounting/Banking				de of Texas. Complete Schedule T. officeholder living expense	
					Debit Card fe			
						-		
-	Complete ONLY if direct	L	Candidate/Officeholder name	Office sou	l Jaht		Office held	
	expenditure to benefit C/OF		· · · · · · · · · · · · · · · · · · ·		U -			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense umittee Legal Services The Instruction Guide explains	Office Ov Polling Ex Printing E Salaries/V	erhea kpense xpens Vages	se s/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: 5/7 Rpt: 12/15		Tijerina, Jaime E. (The Honorable)					00068017	
4	Date	5	Payee name						
	11/18/2024		Showit.com						
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode				
	\$30.86		2490 Gilbert Rd. Ste 200						
			Chandler, AZ 85286						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description			
	OF EXPENDITURE		Advertising Expense	,				de of Texas. Com	
								officeholder living	expense
						Website Serv	lce		
_	Complete ONIL V if direct		endidata/Officebalder nome	Office cou				Office he	ld
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ignt			Office he	10
	Date		Payee name						
12/18/2024 Showit.com									
	Amount (\$)		Payee address; City; State	; Zip Co	ode				
	\$30.86		2490 Gilbert Rd. Ste 200						
			Chandler, AZ 85286		_				
	PURPOSE OF		Category (See Categories listed at the top of this sc	hedule)	(b)	Description	outoi	de of Toylog, Com	alata Cabadula T
	EXPENDITURE		Advertising Expense					de of Texas. Comp officeholder living	
						Website Serv			
	Complete ONLY if direct		andidate/Officeholder name	Office sou	ught			Office he	ld
	expenditure to benefit C/OF	Η							
	Date		Payee name						
	11/15/2024		Steve Ray and Associates						
	Amount (\$)		Payee address; City; State	; Zip Co	ode				
	\$3,997.00		901 N Caranchua						
			Corpus Christi, TX 78403						
	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description			
	OF EXPENDITURE		Consulting Expense					de of Texas. Com	
					1			officeholder living	expense
						Consulting/M	eai	a DUY	
	Complete ONUM Station	Ĺ	endidate (Office helder a series	0#:	 			0#:	14
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ignt			Office he	iu
	-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event ExpenseLoan Repayment/ReimbursementFeesOffice Overhead/Rental ExpenseFood/Beverage ExpensePolling ExpenseGift/Awards/Memorials ExpensePrinting 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:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 6/7 Rpt: 13/15	Tijerina, Jaime E. (The Honorable)	00068017					
4	Date	Payee name						
	11/18/2024	Tijerina, Jaime (Mr.)						
6	Amount (\$)	Payee address; City; State; Zip Code						
	\$380.87	4517 Ben Hogan Ave						
		McAllen, TX 78503						
8	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
			i Meet and Greet					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/18/2024	Tijerina, Jaime (Mr.)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$425.78	4517 Ben Hogan Ave						
		McAllen, TX 78503						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/18/2024	Tijerina, Jaime (Mr.)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$441.13	4517 Ben Hogan Ave						
		McAllen, TX 78503						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ally					
	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/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense 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: 7/7 Rpt: 14/15	Tijerina, Jaime E. (The Honorable)	00068017					
4	Date	Payee name						
	11/18/2024	Tijerina, Jaime (Mr.)						
6	Amount (\$)	Payee address; City; State; Zip Code						
	\$464.25	4517 Ben Hogan Ave						
		McAllen, TX 78503						
8	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
		Gonzales Mee						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
11/18/2024 Tijerina, Jaime (Mr.)								
	Amount (\$)	Payee address; City; State; Zip Code						
	\$464.27	4517 Ben Hogan Ave						
		McAllen, TX 78503						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
			incoln Reagan Dinner					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/18/2024	Winred						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$69.73	1776 Wilson Blvd						
		Arlington, VA 22209						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense 9 C					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

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

SCHEDULE K

2 FILER NAME 3 Filer ID (Ethics Con 00068017 4 Date 5 Name of person from whom amount is received 00068017 12/19/2024 Spectrum Reach 8 Amount (\$	nmission Filers)
4 Date 5 Name of person from whom amount is received 8 Amount (\$ 12/19/2024 Spectrum Reach 8 Amount (\$	
12/19/2024 Spectrum Reach	
	;)
	\$57.80
6 Address of person from whom amount is received; City; State; Zip Code	
Charlotte, NC 28203	
7 Purpose for which amount is received Check if political contribution returne	d to filer
Refund	