#### 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) 00020316 26 CANDIDATE / MS / MRS / MR **FIRST** ΜI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Fernando G. NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Mancias CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 93rd District Court MAILING Receipt # Amount **ADDRESS** 100 N. Closner, 2nd Floor Change of Address Edinburg, TX 78539 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Elisa NAME NICKNAME LAST **SUFFIX** Struthers STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 7412 N. 31st St. **ADDRESS** (Residence or Business) Mcallen, TX 78504 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 793-7590 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx| 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**

11 OFFICE

Day

11/05/2024

OFFICE HELD (if any)

District Judge District 93 Hidalgo

Year

Month

Primary

χ General

Runoff

Special

12 OFFICE SOUGHT (if known)

District Judge District 93

Other

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 26

13 C / OH NAME	Mancias, Fernando (	G. (The Honorable)	<b>14</b> Filer ID 00020316	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expe These expenditures may have been made wit d officeholders are required to report this inforr	hout the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE			
_	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NA	ME	
		COMMITTEE CAMPAIGN TREASURER AD	DRESS	
<b>16</b> CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER ES OF LOANS, OR CONTRIBUTIONS MADE		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF L	OANE	\$ 0.00
EXPENDITURE	3. TOTAL UNITEM	\$ 0.00		
TOTALS	4. TOTAL POLIT	ICAL EVDENDITUDES		
	4. IOTAL POLIT	ICAL EXPENDITURES		<b>\$</b> 71,935.73
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF T RIOD	HE LAST DAY OF THE	<b>\$</b> 53,059.10
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOAN TING PERIOD	S AS OF THE LAST DAY	\$ 0.00
<b>17</b> AFFIDAVIT			enalty of perjury, that the ac des all information required ode.	
		The He	norable Fernando G. Ma	noine
			ure of Candidate or Officeho	
AFFIX NO	ΓARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office	9.	
Signature of offic	er administering oath	Printed name of officer administering oa	th Title of office	er administering oath
	-	-		·

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

# FORM JC/OH COVER SHEET PG 3

				3 of 26
18 FILER NA	ME	19 Filer ID	(Ethics	Commission Filers)
	Fernando G. (The Honorable)	00020316		
	LE SUBTOTALS SCHEDULE		SI	UBTOTAL AMOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$	0.00
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	71,935.73
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. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	11,350.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	LOANS (J	UDICIAL)				SCHEE	OULE E	(J)
	The Instruction	on Guide explains how to complete this	form.	1		iges Schedule 1 Rpt: 4/26	e E(J):	
2	FILER NAME Mancias, Fernar	ndo G. (The Honorable)	3 Filer ID 000203			(Ethics Con	nmission Fil	ers)
4	TOTAL OF UN	IITEMIZED LOANS		•		\$		0.00
5	Date of loan	7 Name of lender out-of-state P	AC (ID#:		)	9 Loan Am	ount (\$)	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code			10 Interest F		
						<b>11</b> Maturity	Date	
12	Lender's Principal	Occupation	13 Lender's Job Title			•		
14	Lender's Employe	r/Law Firm	15 Law Firm of lender's spous	se (if	any)			
16	If lender is child, la	aw firm of parent(s) (if any)	_ <b>L</b>					
17	Description of Coll	ateral	18 Check if personal funds w	ere d	leposited	d into political (See Inst		
19	GUARANTOR INFORMATION	20 Name of guarantor	22 Amount Guarantee					(\$)
23	not applicable  Guarantor's Princi	21 Guarantor address; City; State; pal Occupation	Zip Code  24 Guarantor's Job Title					
25	Guarantor's Emplo	over/I aw Firm	<b>26</b> Law Firm of guarantor's sp	ากแร	e (if anv)	1		
			<b>20</b> 24.1					
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 Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica	
	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: 1/18 Rpt: 5/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	09/02/2024	Buitierrez, Gencho
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$550.00	101 Bridge St
		Port Isabel, TX 78578
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit Gree	
	Date	Payee name
	07/31/2024	Carrera, Miguel
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	135 Paseo Del Prado #48
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  Contract Labor
		Contract Edibor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/02/2024	Circle K
	Amount (\$)	Payee address; City; State; Zip Code
	\$73.21	3912 N McColl Rd
	Ψ10.21	COLE IT MOCOLI I LA
		Mcallen, TX 78501
	DUDDOCE	Tu.
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Gas Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1 

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

1 Total pages Schedule F Sch: 2/18 Rpt: 6/26 4 Date 10/04/2024 6 Amount (\$) \$50.0	Mancias, Fernando G. (The Honorable)  5 Payee name Circle K
Sch: 2/18 Rpt: 6/26  4 Date 10/04/2024  6 Amount (\$)	Mancias, Fernando G. (The Honorable)  5 Payee name Circle K
10/04/2024 6 Amount (\$)	Circle K
6 Amount (\$)	
` '	7 Payes address: City State 7in Code
\$50.0	7 Payee address; City; State; Zip Code
	3912 N McColl Rd
	Mcallen, TX 78501
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	Expense Check if Austin, TX, officeholder living expense  Gas Expense
	Cas Expense
9 Complete ONLY if direct	t Candidate/Officeholder name Office sought Office held
expenditure to benefit C	
_	
Date	Payee name
10/21/2024	Circle K
Amount (\$)	Payee address; City; State; Zip Code
\$52.9	4 3912 N McColl Rd
	Mcallen, TX 78501
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.  Expense Check if Austin, TX, officeholder living expense
	Expense
Complete ONLY if direct	t Candidate/Officeholder name Office sought Office held
expenditure to benefit C	
Data	<u> </u>
\$61.4	0 3912 N McColl Rd
	Mcallen, TX 78501
PURPOSE	
OF	
	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas
OF EXPENDITURE  Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas  t Candidate/Officeholder name Office sought Office held
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas  t Candidate/Officeholder name Office sought Office held
OF EXPENDITURE  Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas  t Candidate/Officeholder name Office sought Office held
Date 10/30/2024 Amount (\$) \$61.4	Payee name Circle K Payee address; City; State; Zip Code

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

	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: 3/18 Rpt: 7/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	12/30/2024	Circle K
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.64	3912 N McColl Rd
		Mcallen, TX 78501
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Gas
		Gas
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	·	
	Date	Payee name
	10/24/2024	De La Fuente, Melissa
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	504 Montemorelos
		Alton, TX 78573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	GOTV Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  GOTV
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	12/17/2024	De La Fuente, Melissa
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 504 Montemorelos
	\$1,000.00	504 Montemorelos
		Alt. TV 70770
		Alton, TX 78573
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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)

	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: 4/18 Rpt: 8/26	Mancias, Fernando G. (The Honorable)	00020316
4	Date	5 Payee name	
	12/23/2024	Dick's Sporting Goods	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	716 E. Expressway 83	
	!		
	l	Mcallen, TX 78503	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	1
	OF EXPENDITURE	Donation	ravel outside of Texas. Complete Schedule T.
	-	Check if A  Donation	Austin, TX, officeholder living expense
	l	Donation	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		emoc neid
_	Date	Payee name	
	07/22/2024	Embassy Suites	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$297.21	4337 S Padre Island Dr,	
	Φ291.21	4337 3 Faule Island DI,	
	!	October Object TV 70414	
		Corpus Christi, TX 78411	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	1 ravel outside of Texas. Complete Schedule T.
	EXPENDITURE	Tiotel Expense	Austin, TX, officeholder living expense
	1	H	dicial Conference
	!		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	Mancias, Fernando	District Judge District 93
	Date	Payee name	
	08/23/2024	Eronini, Patrick	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,200.00	1111 W. Nolana	
	!		
	!	Mcallen, TX 78504	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	1
	OF EXPENDITURE		ravel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if A	Austin, TX, officeholder living expense
	1	Contract I	_abor
	0 1: 0 1: 0		0%
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
		Mancias, Fernando	District Judge District 93

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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)

	Credit Card r dyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 5/18 Rpt: 9/26	Mancias, Fernando G. (The Honorable)	00020316
4	Date	5 Payee name	
	07/29/2024	Flores, Sandra	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$600.00	2024 Fir Avenue	
		Mcallen, TX 78501	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Galaries/Wages/Contract Eabor	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		Contract Labo	
	l		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	<sup>H</sup> Mancias, Fernando	District Judge District 93
	Date	Payee name	
	10/01/2024	Flores, Sandra	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,700.00	2024 Fir Avenue	
		Mcallen, TX 78501	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Julianes/ Wages/Contract Eabor	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		Contract Labo	
	l		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	ч	
	Date	Payee name	
	08/15/2024	Garza, Maricela	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	301 N 8th	
		Mcallen, TX 78501	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	0017	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		GOTV	, 17, Officerolder living expense
	l		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	<sup>H</sup> Mancias, Fernando	District Judge District 93

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

	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: 6/18 Rpt: 10/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	12/06/2024	Garza, Romualdo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,750.00	304 Alamo St
		Edinburg, TX 78541
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	Mancias, Fernando District Judge District 93
	Date	Payee name
	11/25/2024	H.E.Butt Grocery
	Amount (\$)	Payee address; City; State; Zip Code
	\$397.50	200 US W Expy 83
		McAllen, TX 78501
	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.
		Check if Austin, TX, officeholder living expense  Food Donation
		1 ood Bondaon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/05/2024	H.E.Butt Grocery
	Amount (\$)	Payee address; City; State; Zip Code
	\$129.22	200 US W Expy 83
		McAllen, TX 78501
	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.
		Check if Austin, TX, officeholder living expense  Food
		1 000
	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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 7/18 Rpt: 11/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	07/01/2024	HEB #590
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$69.10	901 Trenton Road
		McAllen, TX 78501
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Gas Expense
		Gas Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Date	
	Date	Payee name
	07/12/2024	HEB #590
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.01	901 Trenton Road
		McAllen, TX 78501
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Gas Expense
		Ous Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
-	Data	
	Date 07/02/2024	Payee name HEB Grocery
	Amount (\$)	Payee address; City; State; Zip Code
	\$167.90	901 Trenton Rd.
		McAllen, TX 78501
	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.
		Check if Austin, TX, officeholder living expense Food Expense Donation
		1 ood Expense Donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### 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

	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: 8/18 Rpt: 12/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	07/29/2024	HEB Grocery
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$159.62	901 Trenton Rd.
		McAllen, TX 78501
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Food Expense
		. 333ps33
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	<u>-</u>
	11/05/2024	Payee name HEB Grocery
		•
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.26	901 Trenton Rd.
		McAllen, TX 78501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related    Check if travel outside of Texas. Complete Schedule T.   Check if Austin, TX, officeholder living expense
		Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	09/19/2024	Hidalgo County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	1111 W. Nolana
	\$10,000.00	IIII W. INDIAIIA
		Madllar, TV 70504
		McAllen, TX 78504
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	GOTV Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		GOTV
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	Mancias, Fernando District Judge District 93

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee Leg	/Awards/Memorials Ex al Services			ages	s/Contract Labor	Travel Out of I OTHER (enter	District a category not listed above)	
		_	Th	e Instruction Guid	le explains l	how to con	nple	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission File	rs)
	Sch: 9/18 Rpt: 13/26		Mancias, Fern	ando G. (The F	Honorable	<u>:</u> )			00020316		
4	Date	5	Payee name								
	07/01/2024		Hidalgo Count	y Tejano Demo	ocrats						
6	Amount (\$)	7	Payee address;	City;	State;	; Zip Coo	de				
	\$1,000.00		3503 Northeas	st Parkwav							
	, ,										
			San Antonio, T	X 78218							
8	PURPOSE	(a)	Category (See C	ategories listed at the	top of this sch	odulo)	(b)	Description			
	OF	``	GOTV	ategories listed at the	top of this sch	edule)	( - ,		side of Texas. Co	mplete Schedule T.	
	EXPENDITURE							Check if Austin, TX	K, officeholder livi	ng expense	
								GOTV			
9	Complete ONLY if direct		Candidate/Officeh	older name	C	Office soug	aht		Office	neld	
_	expenditure to benefit C/O		Sariaració, Omoci	iolael Hame		Jilloo Soug	,		- Cilioc I	1014	
	Date		Payee name								
	12/16/2024		Holiday Wine	& Liquor #16							
	Amount (\$)	┝	Payee address;	City;	State.	; Zip Coo	10				
	` '			•	State,	, Zip Coc	JC				
	\$409.33		705 Dove Ave	Suite A							
			Mcallen, TX 78	3504							
	PURPOSE	(a)	Category (See C	ategories listed at the	top of this sche	edule)	(b)	Description			
	OF		Food/Beverage		100 01 1110 0011	Julia		Check if travel outs	side of Texas. Co	mplete Schedule T.	
	EXPENDITURE							Check if Austin, TX	K, officeholder livi	ng expense	
								Beverage Expe	ense		
	Complete ONLY if direct		Candidate/Officeh	older name	C	Office soug	ht		Office	neld	
	expenditure to benefit C/O	Н									
	5.	_									
	Date		Payee name								
	09/25/2024		Lopez, Amy								
	Amount (\$)		Payee address;	City;	State;	; Zip Coo	de				
	\$1,000.00		2109 Liberty S	t							
			Mission, TX 78	2572							
		L				-					
	PURPOSE OF	(a)	Category (See C	ategories listed at the	top of this sche	edule)	(b)	Description			
	EXPENDITURE		GOTV					Check if travel outs			
								COTY	k, officenolaer livi	ng expense	
								GOTV			
	Complete ONLY if direct		Candidate/Officeh	older name	C	Office soug	ght		Office	neld	
	expenditure to benefit C/OI	H I	Mancias, Ferna	ndo					Distric	t Judge District 93	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l 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: 10/18 Rpt: 14/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	09/11/2024	Main Street Checks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.76	920 19th St
		Birmingham, AL 35203
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Checks
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	08/06/2024	O'Reilly
	Amount (\$)	Payee address; City; State; Zip Code
	\$284.43	7312 North 23rd Street
	,	
		Mcallen, TX 78504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Transportation Related
		Transportation Related
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
H	Data	
	Date	Payee name
	08/29/2024	PSJA Education Fundraiser
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	601 E. Kelly Avenue
		Pharr, TX 78577
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Education Fund
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	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: 11/18 Rpt: 15/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	10/30/2024	Pena, Adelina
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	2320 Dominique Drive
		Pharr, TX 78577
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	GOTV Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		GOTV
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	07/05/2024	Robledo, Miguel
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	914 S 15th St
		Mcallen, TX 78501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	09/10/2024	Rodriguez, Henry
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	1011 Ursula St. Apt. D
		Mission, TX 78572
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Contract Labor
		Contract Labor
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		manolac, i cinariac

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Fees Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense 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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 12/18 Rpt: 16/26	2 FILER NAME Mancias, Fernando G. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00020316	
4	Date 10/24/2024	5 Payee name Rodriguez, Henry	
6	Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 1011 Ursula St. Apt. D  Mission, TX 78572	_
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contract Labor	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 10/10/2024	Payee name Rodriguez, Sandra	
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 3400 Umar Ave	

	Mcallen, TX 78504		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this salaries/Wages/Contract Labor	schedule) (I	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name	Office sougl	office held

Date 11/20/2024	Payee name Spec's
Amount (\$) \$332.60	Payee address; City; State; Zip Code 7700 N 10th St C
	Mcallen, TX 78504
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Beverage Donation

Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services Salaries/Wages/Contract Labor	r	OTHER (enter a	category not listed above)	
	Credit Card Fayment		The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2	FILER NAME	3	Filer ID	(Ethics Commission Filers)	
	Sch: 13/18 Rpt: 17/26		Mancias, Fernando G. (The Honorable)		00020316		
4	Date	5	Payee name				_
	09/27/2024		Stripes				
6	Amount (\$)	7	Payee address; City; State; Zip Code				-
_	\$61.00	ı	2100 Trenton				
	¥0 <u>1</u> .00						
			Maglian TV 70520				
		├	Mcallen, TX 78539				_
8	PURPOSE OF		Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		Transportation Equipment / transcated		de of Texas. Com officeholder living		
			Expense	1001111 171	, cinconcidor name	, expense	
9	Complete ONLY if direct		andidate/Officeholder name Office sought		Office he	əlq	-
•	expenditure to benefit C/OI		and date, of motification mains		Omoo n	ord.	
	Data	_					=
	Date	1	Payee name				
	07/01/2024	<u> </u>	Struthers, Elisa				_
	Amount (\$)		Payee address; City; State; Zip Code				
	\$1,500.00		7412 N 31st St				
			Mcallen, TX 78504				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b) Description	า			
	OF EXPENDITURE		Salaries/Wages/Cornitact Eabor			plete Schedule T.	
			Contract I		officeholder living	g expense	
			Contract i	Labui			
	Commiste ONII V if diseast	<u> </u>	andidate/Officeholder name Office sought		Office he	stat	_
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Officeholder name Office sought  Iancias, Fernando		Office he	Judge District 93	
	·	- '	iancias, Fernando		District		_
	Date		Payee name				
	08/03/2024		Struthers, Elisa				
	Amount (\$)		Payee address; City; State; Zip Code				
	\$1,500.00		7412 N 31st St				
			Mcallen, TX 78504				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b) Description	n			_
	OF EXPENDITURE				de of Texas. Com	plete Schedule T.	
	EXPENDITURE				officeholder living	j expense	
			Contract I	Labor			
							_
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Officeholder name Office sought		Office he	eld	
	experiulture to beliefit C/OI	17					
_		_					

### 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 Legal Services

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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)

	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: 14/18 Rpt: 18/26	Mancias, Fernando G. (The Honorable)	00020316
4	Date	5 Payee name	•
	09/02/2024	Struthers, Elisa	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,500.00	7412 N 31st St	
		Mcallen, TX 78504	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Ontract Labor
			onitati Lazor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		District Judge District 93
_	Date	Payee name	
	10/22/2024	Struthers, Elisa	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	7412 N 31st St	
		Mcallen, TX 78504	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Ontract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	10/03/2024	Struthers, Elisa	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	7412 N 31st St	
		Mcallen, TX 78504	
	PURPOSE OF	, ,	escription
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			ontract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Mancias, Fernando	District Judge District 93

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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
OTHER (poter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
_	Sch: 15/18 Rpt: 19/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	12/01/2024	Struthers, Elisa
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	7412 N 31st St
		Mcallen, TX 78504
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	09/13/2024	Sunoco
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	2900 W Nolana Loop
	Ψ30.00	2000 W Wolana 200p
		McAllen, TX 78504
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Expense Lx Check if Austin, TX, officeholder living expense Gas
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/19/2024	The Vineyard Wine Co.
	Amount (\$)	Payee address; City; State; Zip Code
	\$216.37	125 E Pecan Blvd
		Mcallen, TX 78501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gift for Donation
	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 -

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

ement Solicitation/Fundraising Expense
ense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (output a category not listed above)

	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: 16/18 Rpt: 20/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	09/16/2024	Total Wine
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$372.95	800 E Expressway 83 Suite 200
		Mcallen, TX 78503
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Beverage Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/01/2024	Victory Fund
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	PO Box 1265
		Mission, TX 78573
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	GOTV Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  GOTV
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 07/03/2024	Payee name Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.86	2800 W Nolana
		Mcallen, TX 78503
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Gas
		Jus
_	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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 17/18 Rpt: 21/26	Mancias, Fernando G. (The Honorable) 00020316
4	Date	5 Payee name
	08/27/2024	Walmart
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$61.04	2800 W Nolana
		Mcallen, TX 78503
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Gas
		- Ous
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	09/03/2024	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.78	2800 W Nolana
		Mcallen, TX 78503
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Gas
		Ous
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	D :	
	Date	Payee name
	11/12/2024	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$62.88	2800 W Nolana
		Mcallen, TX 78503
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense
		Gas
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### 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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee L	egal Services		s/Wage	es/Contract Labor		OTHER (enter a	a category not listed above)
╙				The mstruction Gui	ide explains now to	comp	lete tills form.	_		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
l	Sch: 18/18 Rpt: 22/26		Mancias, Fer	nando G. (The	Honorable)			l	00020316	
4	Date	5	Payee name					_		
	12/21/2024	_	Walmart							
ᆫ	12/21/2024		vvaiman							
6	Amount (\$)	7	Payee address	s; City;	State; Zip	Code				
l	\$43.54		2800 W Nola	na						
l										
l			Mcallen, TX	70502						
ᆫ			ivicalien, 17	76505						
8	PURPOSE	(a)	Category (See	Categories listed at the	e top of this schedule)	(b)	Description			
l	OF EXPENDITURE		Transportation	n Equipment A	nd Related		Check if travel	outsi	de of Texas. Com	plete Schedule T.
l	LAFENDITORE		Expense				Check if Austin	ı, TX,	officeholder living	g expense
l							Gas			
l										
9	Complete ONLY if direct		Candidate/Offic	eholder name	Office s	ought			Office h	eld
	expenditure to benefit C/O	4								
H	Data		Daves ::-:::							
l	Date		Payee name							
L	10/07/2024		Willie B's BB	Q						
	Amount (\$)		Payee address	s; City;	State; Zip	Code				
l	\$189.16		320 S Alamo	Rd						
l			Alomo TV 7	DE16						
L			Alamo, TX 78	2210						
	PURPOSE	(a)	Category (See	Categories listed at the	e top of this schedule)	(b)	Description			
l	OF EXPENDITURE		Food/Bevera	ge Expense			ш			pplete Schedule T.
l	EXI ENDITORE						ш		officeholder living	g expense
							Food Expens	se		
Г	Complete ONLY if direct		Candidate/Offic	eholder name	Office s	ought			Office h	eld
	expenditure to benefit C/O	4								
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#### SCHEDULE I

	The Instruction Guide explains how to complete this form.						
Total pages Schedule I: Sch: 1/4 Rpt:	2 FILER NAME Mancias, Fernando G. (The Honorable)  3 Filer ID (Ethics Commission Filers 00020316						
Date 11/06/2024	5 Payee name Access Esperanza Clinics						
Amount (\$) 1,250.00	7 Payee Address; City; State; Zip 916 E Hackberry Ave B  McAllen, TX 78501						
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (See instructions regarding type of information required.  Donation						
Date	Payee name						
07/01/2024	Amara Foundation						
Amount (\$) 400.00	Payee Address; City; State; Zip 615 Blaze Boulevard						
	Edinburg, TX 78539						
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						
Date	Payee name						
10/15/2024	Basilio Mendoza Running LLC						
Amount (\$) 5,000.00	Payee Address; City; State; Zip 1213 Bella Vista						
	Palmview, TX 78572						
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description Donation						
Date 11/12/2024	Payee name Buell Central High School						
Amount (\$) 400.00	Payee Address; City; State; Zip 218 E. Juarez Ave Pharr, TX 78577						
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description Donation						

### SCHEDULE |

Total pages Schedule I: Sch: 2/4 Rpt:	<b>2</b> FILER NAME Mancias, Fernando G. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020316
Date 07/18/2024	5 Payee name Carrion, Nadine  7 Payee Address; City; State; Zip 217 W Explanada  Weslaco, TX 78599	
Amount (\$) 500.00		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.)  Tuition Fundraiser
Date	Payee name	
11/20/2024	Catholic Charities	
Amount (\$) 350.00	Payee Address; City; State; Zip 111 S 15th St,	
	Mcallen, TX 78501	
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
Date	Payee name	
07/26/2024	Edinburg North High School	
Amount (\$) 500.00	Payee Address; City; State; Zip 3101 N Closner Blvd	
	Edinburg, TX 78541	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.  Parent Booster Club Donation
Date 10/16/2024	Payee name End of Watch EOW	
Amount (\$) 250.00	Payee Address; City; State; Zip 3801 N McColl	
	Mcallen, TX 78501	
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

### SCHEDULE |

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Total pages Schedule I: Sch: 3/4 Rpt:	2 FILER NAME Mancias, Fernando G. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020316
Date 07/01/2024	5 Payee name Garza, Leticia	
Amount (\$)	7 Payee Address; City; State; Zip 2601 Sarah Ave	
100.00	2001 Saran Ave	
	Mcallen, TX 78503	
PURPOSE OF		(b) Description (See instructions regarding type of information required.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Medical Expense Donation
Date	Payee name	
09/04/2024	Lions Club	
Amount (\$)	Payee Address; City; State; Zip	
200.00	301 S. Border Avenue	
	Weslaco, TX 78596	
PURPOSE		<b>(b)</b> Description (See instructions regarding type of information required.
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Donation
Date	Payee name	
09/21/2024	Memorial Funeral Home	
Amount (\$)	Payee Address; City; State; Zip	
1,000.00	311 E. Expressway 83	
	San Juan, TX 78589	
PURPOSE		(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Gift/Awards/Memorials Expense	Memorial Donation
Date	Payee name	
12/16/2024	Moreno, Mario	
Amount (\$)	Payee Address; City; State; Zip	
100.00	1424 Tower St	
	Weslaco, TX 78599	
PURPOSE OF		(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Donation

### SCHEDULE |

	Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/4 Rpt:	Mancias, Fernando G. (The Honorable) 00020316
	Date	5 Payee name
	08/24/2024	Patino, Jorge
	Amount (\$)	7 Payee Address; City; State; Zip
	300.00	703 E Citrus
		Alamo, TX 78514
3	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
-	Date	Payee name
	07/29/2024	Reyes, Andres
	Amount (\$)	Payee Address; City; State; Zip
	500.00	2821 N Main
		Mcallen, TX 78501
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense (b) Description (See instructions regarding type of information required.) Medical Expenses Fundraiser
_	Date	Payee name
	10/31/2024	St Joseph the Worker Catholic Church
_	Amount (\$)	Payee Address; City; State; Zip
	500.00	900 S 23rd St
		Mcallen, TX 78501
	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