GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00085817	2 Total pages filed: 27	
3	COMMITTEE NAME				OFFICE USE ONLY	
	Justicia Fronteriza	PAC			Date Received	
					01/15/2025	
4	COMMITTEE ADDRESS		TY;	STATE; ZIP CODE		
	ADDIE33	1535 Raphael Circle			Date Hand-delivered or Date Postmarked	
	Change of Address					
	L °	El Paso, TX 79936			Receipt # Amount	
					Date Processed	
					Date Imaged	
5		MS / MRS / MR FIRST			MI	
	TREASURER NAME	Raquel				
		NICKNAME LAST	•••••		SUFFIX	
		Rojo				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY;	STATE; ZIP CC	DE
ľ	TREASURER	1535 Raphael Circle			····-,	
	STREET ADDRESS					
	(Residence or Business)	El Paso, TX 79936				
7	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #; CITY	; STATE; ZIP CC	DDE
	MAILING	1535 Raphael Circle				
	ADDRESS					
		El Paso, TX 79936				
L	Change of Address			TENCION		
8	CAMPAIGN TREASURER		ΕX	TENSION		
	PHONE	(915) 472-9133				
Ļ	252057					
9	REPORT TYPE	X January 15 3	0th	day before election	Dissolution (Attach PAC-DR)	
			th d	ay before election	10th day after campaign treasurer	
		July 15			termination	
			luno	tt.		
10	PERIOD	Month Day Year		Month Day	Year	
	COVERED	-	HR	OUGH 12/31/2024		
11	ELECTION	ELECTION DATE		ELECTION TYPE		
			Prim	_	Other	
			C			
			Gen	eral Special		
	GO TO PAGE 2					
For	rms provided by Tex	xas Ethics Commission www.e	thic	cs.state.tx.us	Version V4.1.0.5dd2	2ace2
		-				

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Justicia Fronteriza PAC			00085817	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	0 Official chaldren			
	 Officeholders Assisted 			
	(Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA	· •		
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,569.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,277.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	9,025.51
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			I	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
			el Rojo	
		Signature of Ca	mpaign Treası	ırer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, tl	nis the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath
L Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

SUBTOTALS - GPAC		
		OVER SHEET PG 3 3 of 27
17 COMMITTEE NAME Justicia Fronteriza PAC	18 Filer ID 00085817	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,569.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO)R	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 1,277.31
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 4/27	
2	FILER NAME			3	Filer ID (Ethics Commission	1 Filers)
	Justicia Fron				00085817	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	07/21/2024	Carrillo, Veronica				\$10.00
	I	6 Contributor address; City; State; Zip Code		ł		
	I					
	I					
	I	El Paso, TX 79902				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Payroll Tax A	Analyst	University of Tex			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/21/2024	Carrillo, Veronica				\$10.00
	1	Contributor address; City; State; Zip Code				
	I					
	I					
		El Paso, TX 79902				
		ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Payroll Tax A	Analyst	University of Tex			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/21/2024	Carrillo, Veronica				\$10.00
	I	Contributor address; City; State; Zip Code		1		
	I					
	I					
		El Paso, TX 79902	-			
		ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Payroll Tax A	Analyst	University of Tex			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	10/21/2024	Carrillo, Veronica				\$10.00
	I	Contributor address; City; State; Zip Code		1		
	I					
	I					
		El Paso, TX 79902		Ĺ		
		Ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Payroll Tax A	Analyst	University of Tex	_		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	_
	11/21/2024	Carrillo, Veronica				\$10.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		El Paso, TX 79902	1			
		ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Payroll Tax A	Analyst	University of Tex			

SCHEDULE A1

				—		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/10 Rpt: 5/27	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Justicia Fron	iteriza PAC		I	00085817	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/04/2024	Crawford, Constance				\$10.00
		6 Contributor address; City; State; Zip Code		1		
	l					
	l					
Ļ		El Paso, TX 79902				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	El Paso Cou	- -	Not employed	. 		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/04/2024					\$10.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	El Paso, TX 79902				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	El Paso Cou		Not employed	"		
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/04/2024	Crawford, Constance	/			\$10.00
	00/0 //202	Contributor address; City; State; Zip Code		ł		#1 0.02
	l					
	l	El Paso, TX 79902				
		ipation / Job title (See Instructions)	Employer (See Instructions	<u>-</u> 3)		
	El Paso Cou	nty	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/04/2024	Crawford, Constance				\$10.00
	I	Contributor address; City; State; Zip Code		1		
	l					
	l					
	Dringing occu	El Paso, TX 79902 Ipation / Job title (See Instructions)	Employer (See Instructions			
	El Paso Cou		Not employed	5)		
╞		-		—	Amount of Contribution (¢)	
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#: Crawford, Constance)		Amount of Contribution (\$)	\$10.00
	11/04/2027	Contributor address; City; State; Zip Code		ł		ψ10.00
	l	Continuutor address, City, State, Zip Code				
	I					
	l	El Paso, TX 79902				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	El Paso Cou	inty	Not employed			

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/10 Rpt: 6/27	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Justicia Fron	iteriza PAC			00085817	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/04/2024	Crawford, Constance				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		El Paso, TX 79902				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	El Paso Cou	nty	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	11/30/2024	NAVARRO, SUSANA				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		El Paso, TX 79902				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/17/2024	Schulte, Kim				\$15.00
		Contributor address; City; State; Zip Code		1		
		El Paso, TX 79932		Ĺ		
	Principal occu counselor	pation / Job title (See Instructions)	Employer (See Instructions magellan	5)		
			пауенан	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/17/2024	Schulte, Kim				\$15.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79932				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> .)		
	counselor		magellan)		
╞				T	t (Ω-stribution (Φ)	
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#: Schulte, Kim)		Amount of Contribution (\$)	\$15.00
	09/1//2024					ΦT0.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79932				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> រ)		
	counselor	,	magellan	-,		
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 4/10 Rpt: 7/27	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Justicia Fron				00085817	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/17/2024	Schulte, Kim				\$15.00
	I	6 Contributor address; City; State; Zip Code		1		
		El Paso, TX 79932				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	counselor		magellan			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/17/2024	Schulte, Kim				\$15.00
	I	Contributor address; City; State; Zip Code		1		
		El Paso, TX 79932	1			
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	counselor		magellan			
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	07/15/2024	Segura, Bernadette				\$10.00
		Contributor address; City; State; Zip Code				
		EL Paso TV 70002				
_	Dringingloog	El Paso, TX 79903 Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney		Legal aid	>)		
╞				-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢10.00
	08/15/2024	Segura, Bernadette				\$10.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79903				
⊢	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Attorney		Legal aid	,		
⊢	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	09/15/2024	Segura, Bernadette	/			\$10.00
	00,20.2	Contributor address; City; State; Zip Code				-
		El Paso, TX 79903				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Legal aid			
⊢						

SCHEDULE A1

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 5/10 Rpt: 8/27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Justicia Fror	iteriza PAC		00085817
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/15/2024	Segura, Bernadette		\$10.00
	6 Contributor address; City; State; Zip Code		
	El Paso, TX 79903		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))
Attorney		Legal aid	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/15/2024	Segura, Bernadette		\$10.00
	Contributor address; City; State; Zip Code		
	El Paso, TX 79903		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	.))
Attorney		Legal aid	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/15/2024	Segura, Bernadette		\$10.00
	Contributor address; City; State; Zip Code		
	El Paso, TX 79903		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	.))
Attorney		Legal aid	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/24/2024	Starr, Carl		\$1.00
	Contributor address; City; State; Zip Code		
	El Paso, TX 79902		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	.))
Not Employe	≥d	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/24/2024	Starr, Carl		\$1.00
	Contributor address; City; State; Zip Code		
	El Paso, TX 79902		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions)	.)
Not Employe		Not Employed	, ,

SCHEDULE	A1
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F	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 6/10 Rpt: 9/27	
2	FILER NAME	FILER NAME		3	Filer ID (Ethics Commission	Filers)
	Justicia Fron	iteriza PAC			00085817	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/24/2024	Starr, Carl				\$1.00
		6 Contributor address; City; State; Zip Code		1		
		El Paso, TX 79902				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed and the second se	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/24/2024	Starr, Carl				\$1.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/24/2024	Starr, Carl				\$1.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed set of the set of t	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	·)		Amount of Contribution (\$)	
	09/24/2024	Starr, Carl				\$1.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79902				
	Principal occupation / Job title (See Instructions) Employer (See Instruction		5)			
	Not Employed Not Employed					
Date		Full name of contributor out-of-state PAC (ID#:_	·)		Amount of Contribution (\$)	
	10/24/2024	Starr, Carl				\$1.00
		Contributor address; City; State; Zip Code				
	El Paso, TX 79902					
	Principal occupation / Job title (See Instructions) Employer (See Instruction		5)			
	Not Employed Not Employed					
			•			
1						

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/27	
2	FILER NAME	FILER NAME		3	Filer ID (Ethics Commission	Filers)
	Justicia Fror	iteriza PAC			00085817	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/24/2024	Starr, Carl				\$1.00
		6 Contributor address; City; State; Zip Code		1		
		El Paso, TX 79902	•			
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	11/24/2024	Starr, Carl				\$1.00
		Contributor address; City; State; Zip Code]		
		El Paso, TX 79902				
_	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	$\overline{\Gamma}$		
	Not Employe		Not Employed	3)		
╞				—	Amount of Contribution (\$)	
	Date 11/24/2024	Full name of contributor out-of-state PAC (ID#: Starr, Carl)		Amount of Contribution (\$)	\$1.00
	11/2 4 /2024			•		Ψ1.00
		Contributor address, City, State, Zip Code				
		El Paso, TX 79902				
		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Not Employe	3d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/24/2024	Starr, Carl				\$1.00
		Contributor address; City; State; Zip Code		1		
		El Paso, TX 79902				
\vdash	Drincinal occu	ei Paso, 1X 79902 Ipation / Job title (See Instructions)	Employer (See Instructions			
	Not Employe		Not Employed	5)		
╞				—	Associated Contribution (\$)	
	Date 12/24/2024	Full name of contributor out-of-state PAC (ID#: Starr, Carl)		Amount of Contribution (\$)	\$1.00
Contributor address; City; State; Zip Code			•		Ψ1.00	
	Contributor address; City; State; Zip Code					
		El Paso, TX 79902				
\vdash			Employer (See Instructions	5)		
	Not Employed Not Employed					
I I						

SCHEDULE	A1
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The Instruc	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 8/10 Rpt: 11/27	
2 FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
Justicia Fron				00085817	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
07/05/2024	Staudt, Kathleen	1			\$20.00
1	6 Contributor address; City; State; Zip Code		1		
. I	1	1			
. I	1	1			
	El Paso, TX 79912				
	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Not Employe	;d	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/05/2024	Staudt, Kathleen	1			\$20.00
1	Contributor address; City; State; Zip Code		1		
	1	1			
	1	1			
	El Paso, TX 79912				
	ipation / Job title (See Instructions)	Employer (See Instructions	3)		
Not Employe	bt	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
09/05/2024	Staudt, Kathleen	1			\$20.00
	Contributor address; City; State; Zip Code				
	1	1			
	1	1			
	El Paso, TX 79912	!			
	upation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	;d	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
07/08/2024	Stone, Briana	1			\$27.00
1	Contributor address; City; State; Zip Code	1	1		
	1	1			
1		1			
	Buda, TX 78610				
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Attorney		state agency			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/08/2024	Stone, Briana				\$27.00
1	Contributor address; City; State; Zip Code	1	1		
	Buda, TX 78610				
Principal occupation / Job title (See Instructions) Employer (See Instructions)		5)			
Attorney state agency					
1					

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 9/10 Rpt: 12/27
2 FILER NAM	1E		3 Filer ID (Ethics Commission Filers)
Justicia Fi	onteriza PAC		00085817
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)
09/08/202	4 Stone, Briana		\$27.
	6 Contributor address; City; State; Zip Code		
	Buda, TX 78610	i	
-	cupation / Job title (See Instructions)	9 Employer (See Instructions	\$)
Attorney		state agency	
Date		t:)	Amount of Contribution (\$)
10/08/202			\$27.
	Contributor address; City; State; Zip Code		
	Buda, TX 78610		
Principal or	cupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Attorney		state agency	''
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
11/08/202		/	\$27.
11,00,202	Contributor address; City; State; Zip Code		· · · · ·
	Contributor address, City, State, Zip Code		
	Buda, TX 78610		
Principal or	cupation / Job title (See Instructions)	Employer (See Instructions	\$)
Attorney		state agency	
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
12/08/202	4 Stone, Briana		\$27.
	Contributor address; City; State; Zip Code		1
Dringinglig	Buda, TX 78610		
Principal oc Attorney	cupation / Job title (See Instructions)	Employer (See Instructions state agency	;)
Date 07/05/202	Full name of contributor out-of-state PAC (ID# 4 Valdez, Jesus	·	Amount of Contribution (\$) \$15.
011031202	· · · · · · · · · · · · · · · · · · ·		φ±Ο.'
	Contributor address; City; State; Zip Code		
	El Paso, TX 79922		
Principal or	Principal occupation / Job title (See Instructions) Employer (See Instruction		<u> </u> 3)
Retired N/A			, ,

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 10/10 Rpt: 13/27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Justicia Fror	nteriza PAC		00085817
4 Date 08/05/2024	5 Full name of contributor out-of-state PAC (ID#: Valdez, Jesus)	7 Amount of Contribution (\$) \$15.00
00/00/2024			ψ10.00
	6 Contributor address; City; State; Zip Code El Paso, TX 79922		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Retired		N/A	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/05/2024	Valdez, Jesus		\$15.00
	Contributor address; City; State; Zip Code		•
	El Paso, TX 79922		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		N/A	, ,
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)
10/05/2024	Valdez, Jesus	,	\$15.00
	Contributor address, City, State, Zip Code		
	El Paso, TX 79932		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions) 5)
Retired		Retired	·
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
11/05/2024	Valdez, Jesus		\$15.00
	Contributor address; City; State; Zip Code		•
	El Paso, TX 79932		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	S)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/05/2024	Valdez, Jesus		\$15.00
	Contributor address; City; State; Zip Code		
	El Paso, TX 79932		
Principal occupation / Job title (See Instructions) Employer (See Instructions)		s)	
Retired Retired			

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 Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District gr - Gift/Awards/Memorials Expense Printing Expense		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	rs)	
Sch: 1/14 Rpt: 14/27	Justicia Fronteriza PAC 00085817		
4 Date	5 Payee name		
07/01/2024	ACTION NETWORK		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$10.00	1900 L Street NW, Suite 900		
Expenditure from corporate funds	Washington, DC 20036		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
08/01/2024	ACTION NETWORK		
Amount (\$)	Payee address; City; State; Zip Code		
\$10.00	1900 L Street NW, Suite 900		
Expenditure from corporate funds	Washington, DC 20036		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Tech		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
09/03/2024	ACTION NETWORK		
Amount (\$)	Payee address; City; State; Zip Code		
\$10.00	1900 L Street NW, Suite 900		
Expenditure from corporate funds	Washington, DC 20036		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 2/14 Rpt: 15/27	Justicia Fronteriza PAC 00085817		
4 Date	5 Payee name		
10/01/2024	ACTION NETWORK		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$10.00	1900 L Street NW, Suite 900		
Expenditure from corporate funds	Washington, DC 20036		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H		
Date	Payee name		
11/01/2024	ACTION NETWORK		
Amount (\$)	Payee address; City; State; Zip Code		
\$10.00	1900 L Street NW, Suite 900		
Expenditure from corporate funds	Washington, DC 20036		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H		
Date	Payee name		
12/02/2024	ACTION NETWORK		
Amount (\$)	Payee address; City; State; Zip Code		
\$10.00	1900 L Street NW, Suite 900		
Expenditure from corporate funds	Washington, DC 20036		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H		

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		ental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Intract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 3/14 Rpt: 16/27	Justicia Fronteriza PAC	00085817	
4 Date 12/31/2024	5 Payee name ActBlue		
6 Amount (\$) \$61.77	 7 Payee address; City; State; Zip Code 366 Summer St 		
Expenditure from corporate funds	Somerville, MA 02144-3132		
8 PURPOSE OF EXPENDITURE	Fees	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ct blue fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held	
Date	Payee name		
07/16/2024	Adobe		
Amount (\$) \$21.64	Payee address; City; State; Zip Code 345 Park Ave		
Expenditure from corporate funds	San Jose, CA 95110		
PURPOSE OF EXPENDITURE	Tech	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ech	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held	
Date	Payee name		
07/26/2024	Adobe		
Amount (\$) \$21.64	Payee address; City; State; Zip Code 345 Park Ave		
Expenditure from corporate funds	San Jose, CA 95110		
PURPOSE OF EXPENDITURE	tech	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ch	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 4/14 Rpt: 17/27	Justicia Fronteriza PAC 00085817		
4 Date	5 Payee name		
08/26/2024	Adobe		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$21.64	345 Park Ave		
Expenditure from corporate funds	San Jose, CA 95110		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	tech Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
09/26/2024	Adobe		
Amount (\$)	Payee address; City; State; Zip Code		
\$21.64	345 Park Ave		
Expenditure from corporate funds	San Jose, CA 95110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/28/2024	Adobe		
Amount (\$)	Payee address; City; State; Zip Code		
\$21.64	345 Park Ave		
Expenditure from corporate funds	San Jose, CA 95110		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) TECH (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 		
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 E Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 5/14 Rpt: 18/27	Justicia Fronteriza PAC 00085817
4 Date 11/26/2024	5 Payee name Adobe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$21.64	345 Park Ave
Expenditure from corporate funds	San Jose, CA 95110
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H
Date	Payee name
12/26/2024	Adobe
Amount (\$) \$21.64	Payee address; City; State; Zip Code 345 Park Ave
Expenditure from corporate funds	San Jose, CA 95110
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H
Date	Payee name
09/09/2024	Ella
Amount (\$) \$129.90	Payee address; City; State; Zip Code 2817 YandellDr
Expenditure from corporate funds	El Paso, TX 79903
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 catering
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Overhe Food/Beverage Expense Polling Expen y - Gift/Awards/Memorials Expense Printing Expe	nse Travel Out of District es/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 6/14 Rpt: 19/27	Justicia Fronteriza PAC 00085817				
4 Date	5 Payee name				
12/09/2024	FitFam				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$220.00					
Expenditure from corporate funds	El Paso, TX 79930				
8 PURPOSE OF) Description			
EXPENDITURE	Advertising Expense	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/O	Candidate/Officeholder name Office sough	t Office held			
Date	Payee name				
07/02/2024	Google LLC				
Amount (\$)	Payee address; City; State; Zip Code				
\$15.35	1600 Amphitheatre Pkwy				
Expenditure from corporate funds	Mountain View, CA 94043				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) tech 	 Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Tech 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough H	t Office held			
Date	Payee name				
07/02/2024	Google LLC				
Amount (\$)	Payee address; City; State; Zip Code				
\$12.79	1600 Amphitheatre Pkwy				
Expenditure from corporate funds	Mountain View, CA 94043				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Tech	Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		Tech			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough H	t Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic 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:		-	Filer ID (Ethics Commission Filers)				
Sch: 7/14 Rpt: 20/27	Justicia Fronteriza PAC		00085817				
4 Date 08/02/2024	5 Payee name Google LLC						
6 Amount (\$)	7 Payee address; City; State; Zip Co	de					
\$12.79							
Expenditure from corporate funds	Mountain View, CA 94043						
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght	Office held				
Date	Payee name						
08/02/2024	Google LLC						
Amount (\$)	Payee address; City; State; Zip Co	de					
\$15.35	1600 Amphitheatre Pkwy						
Expenditure from corporate funds	Mountain View, CA 94043						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech		de of Texas. Complete Schedule T. officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght	Office held				
Date	Date Payee name						
09/03/2024	Google LLC						
Amount (\$)	Payee address; City; State; Zip Co	de					
\$15.35	1600 Amphitheatre Pkwy						
Expenditure from corporate funds	Mountain View, CA 94043						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech		de of Texas. Complete Schedule T. officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght	Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Transportation Equipment & Related Expense Travel in District Travel Out of District				
1 Total pages Schedule F1:		5)				
Sch: 8/14 Rpt: 21/27	Justicia Fronteriza PAC 00085817	,				
4 Date 09/03/2024	5 Payee name Google LLC					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$12.79	1600 Amphitheatre Pkwy					
Expenditure from corporate funds	Mountain View, CA 94043					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H					
Date	Payee name					
10/02/2024	Google LLC					
Amount (\$) \$15.35	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy					
φ10.00	1000 Amphilaedue P kwy					
Expenditure from corporate funds	Mountain View, CA 94043					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
10/02/2024	Google LLC					
Amount (\$) \$12.79	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy					
Expenditure from corporate funds	Mountain View, CA 94043					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech					
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 B Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	Transportation Equipment & Related Expense Travel in District Travel Out of District			
	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1: Sch: 9/14 Rpt: 22/27	2 FILER NAME 3 Filer ID (Ethics Commission File Justicia Fronteriza PAC 00085817	ers)			
4 Date	5 Payee name				
11/04/2024	Google LLC				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$27.35	1600 Amphitheatre Pkwy				
Expenditure from corporate funds	Mountain View, CA 94043				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
12/02/2024	Google LLC				
Amount (\$)	Payee address; City; State; Zip Code				
\$15.35	1600 Amphitheatre Pkwy				
Expenditure from corporate funds	Mountain View, CA 94043				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held DH				
Date Payee name					
12/02/2024	Google LLC				
Amount (\$)	Payee address; City; State; Zip Code				
\$12.79	1600 Amphitheatre Pkwy				
Expenditure from corporate funds	Mountain View, CA 94043				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH				

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 10/14 Rpt: 23/27	Justicia Fronteriza PAC 00085817					
4 Date	5 Payee name					
11/04/2024	Google LLC					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$12.79	1600 Amphitheatre Pkwy					
Expenditure from corporate funds	Mountain View, CA 94043					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
07/24/2024	Microsoft Corporation					
Amount (\$)	Payee address; City; State; Zip Code					
\$10.81	One Microsoft Way					
Expenditure from corporate funds	Redmond, WA 98052					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Tech					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held						
Date	Payee name					
08/26/2024	Microsoft Corporation					
Amount (\$)	Payee address; City; State; Zip Code					
\$10.81	One Microsoft Way					
Expenditure from corporate funds	Redmond, WA 98052					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 11/14 Rpt: 24/27	Justicia Fronteriza PAC 00085817					
4 Date	E Deuro neme					
09/25/2024	5 Payee name Microsoft Corporation					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$10.81	One Microsoft Way					
Expenditure from corporate funds	Redmond, WA 98052					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
10/24/2024	Microsoft Corporation					
Amount (\$)	Payee address; City; State; Zip Code					
\$10.81	One Microsoft Way					
Expenditure from corporate funds	Redmond, WA 98052					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 					
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					
Date	Date Payee name					
11/25/2024	Microsoft Corporation					
Amount (\$)	Payee address; City; State; Zip Code					
\$10.81	One Microsoft Way					
Expenditure from corporate funds	Redmond, WA 98052					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 					
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 Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 12/14 Rpt: 25/27	Justicia Fronteriza PAC 00085817					
4 Date	5 Payee name					
12/26/2024	Microsoft Corporation					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$10.81	One Microsoft Way					
Expenditure from corporate funds	Redmond, WA 98052					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
07/09/2024	SQUARESPACE INC					
Amount (\$)	Payee address; City; State; Zip Code					
\$294.22	\$294.22 225 Varick Street, 12th Floor					
Expenditure from corporate funds	New York, NY 10014					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Tech					
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
09/26/2024	SQUARESPACE INC					
Amount (\$) \$12.00	Payee address;City;State;Zip Code225 Varick Street, 12th Floor					
Expenditure from corporate funds	New York, NY 10014					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 					
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 Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Committee Legal Services			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Caro Payment		The Instruction Guid	de explains h	how to com	plete this form.			
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 13/14 Rpt: 26/27		Justicia Fronteriza PAC					00085817	
4	Date	5 F	Payee name						
	07/29/2024		Zoom Video Communications	s Inc.					
6	Amount (\$)	7 F	Payee address; City;	State;	; Zip Cod	е			
	\$17.04	5	55 Almaden Blvd, 6th Floor						
	Expenditure from corporate funds	San Jose, CA 95113							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Tech							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Dffice soug	ht		Office he	ld
	Date	F	Payee name						
	08/27/2024		Zoom Video Communications	s Inc.					
	Amount (\$)	F	Payee address; City;	State;	; Zip Cod	е			
	\$17.04	5	55 Almaden Blvd, 6th Floor						
	Expenditure from corporate funds		San Jose, CA 95113						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the	top of this sche	edule)			de of Texas. Comp officeholder living	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office name Office sought Office held					ld				
	Date	F	Payee name						
	09/27/2024		Zoom Video Communications	s Inc.					
	Amount (\$)	F	Payee address; City;	State;	; Zip Cod	е			
	\$17.04	5	55 Almaden Blvd, 6th Floor						
	Expenditure from corporate funds		San Jose, CA 95113						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the ech	top of this sche	edule)			de of Texas. Comp officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Office soug	ht		Office he	ld

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 Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food//Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 14/14 Rpt: 27/27	Justicia Fronteriza PAC 00085817				
4 Date	5 Payee name				
10/28/2024	Zoom Video Communications Inc.				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$17.04	55 Almaden Blvd, 6th Floor				
Expenditure from corporate funds	San Jose, CA 95113				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
11/27/2024	Zoom Video Communications Inc.				
Amount (\$)	Payee address; City; State; Zip Code				
\$17.04	55 Almaden Blvd, 6th Floor				
Expenditure from corporate funds	San Jose, CA 95113				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
12/27/2024	Zoom Video Communications Inc.				
Amount (\$) \$17.04	Payee address; City; State; Zip Code 55 Almaden Blvd, 6th Floor				
Expenditure from corporate funds	San Jose, CA 95113				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) tech (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tech 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				