# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

|                         |                            |                  | 1 Filer ID<br>(Ethics Commis<br>00067897 | sion Filers)                      | 2 Total pages file     |                 |
|-------------------------|----------------------------|------------------|--|-----------------------------------|------------------------|-----------------|
| 3 CANDIDATE /           | MS / MRS / MR              | FIRST            |  | MI                                | OFFICE U               | SE ONLY         |
| OFFICEHOLDER<br>NAME    | The Honorable              | Alejandro        |  |                                   | Date Received          |                 |
| 10.000                  |                            |                  |  |                                   | ELECTRONICA            | I I V EII ED    |
|                         |                            |                  |  |                                   |                        | LLI FILLD       |
|                         | NICKNAME                   | LAST             |  | SUFFIX                            | 01/16/2025             |                 |
|                         | Alex                       | Dominguez        |  |                                   |                        |                 |
| 4 CANDIDATE /           | ADDRESS / PO BOX; APT      | / SUITE #; CIT   | Y;                                       | ZIP CODE                          | Date Hand-delivered or | Date Postmarked |
| OFFICEHOLDER            | 855 E. Harrison            |                  |  |                                   |                        |                 |
| MAILING<br>ADDRESS      |                            |                  |  |                                   | Receipt #              | Amount          |
| Change of Address       | Brownsville, TX 78520      |                  |  |                                   |                        |                 |
| Officinge of Address    | Brownsville, 17 76520      |                  |  |                                   | Date Processed         |                 |
|                         |                            |                  |  |                                   |                        |                 |
|                         |                            |                  |  |                                   | Date Imaged            |                 |
|                         |                            |                  |  |                                   |                        |                 |
| 5 CAMPAIGN<br>TREASURER | MS / MRS / MR              | FIRST            |  | MI                                |                        |                 |
| NAME                    |                            | Jacklyn          |  |                                   |                        |                 |
|                         |                            |                  |  |                                   |                        |                 |
|                         | NICKNAME                   | LAST             |  | SUFFIX                            |                        |                 |
|                         |                            | Verdin           |  |                                   |                        |                 |
|                         |                            |                  |  |                                   |                        |                 |
| 6 CAMPAIGN              | STREET ADDRESS (NO PO      | BOX PLEASE):     | APT                                      | / SUITE #; CITY;                  | STA <sup>-</sup>       | TE; ZIP CODE    |
| TREASURER               | 855 E. Harrison St.        | - //             |  | , - ,                             |                        | ,               |
| ADDRESS                 |                            |                  |  |                                   |                        |                 |
| (Residence or Business) | D                          |                  |  |                                   |                        |                 |
|                         | Brownsville, TX 78520      |                  |  |                                   |                        |                 |
|                         |                            |                  |  |                                   |                        |                 |
| 7 CAMPAIGN              | AREA CODE PHON             | E NUMBER E       | EXTENSION                                |                                   |                        |                 |
| TREASURER               | (956) 244-3136             |                  |  |                                   |                        |                 |
| PHONE                   | (000) 211 0200             |                  |  |                                   |                        |                 |
| 8 REPORT                |                            |                  |  |                                   |                        |                 |
| TYPE                    | X January 15               | 30th day before  | election                                 | Runoff                            | 15th day after cam     | paign treasurer |
|                         |                            | <b>-</b>         |  | _                                 | appointment (office    | eholder only)   |
|                         | July 15                    | 8th day before 6 | election                                 | Exceeded modified reporting limit | Final Report (Attac    | ch C/OH-FR)     |
|                         |                            |                  |  |                                   |                        |                 |
| 9 PERIOD                | Month Day Year             |                  |  | Month Day                         | Year                   |                 |
| COVERED                 | 07/01/2024                 | TH               | IROUGH                                   | 12/31/202                         | 24                     |                 |
|                         |                            |                  |  |                                   |                        |                 |
| 10 ELECTION             | ELECTION DATE              |                  |  | ELECTION TYPE                     |                        |                 |
|                         | Month Day Year             | XPt              | rimary                                   | Runoff                            | Other                  |                 |
|                         | 03/12/2024                 | П                | eneral                                   | Special                           |                        |                 |
|                         |                            |                  |  |                                   |                        |                 |
| 11 OFFICE               | OFFICE HELD (if any)       | I                |  | 12 OFFICE SOUGHT                  | (if known)             |                 |
| III OFFICE              | State Representative Distr | ict 37           |  | State Represent                   |                        |                 |
|                         | State Representative Distr | 101 37           |  | State Represent                   | dive District 37       |                 |
|                         |                            |                  |  |                                   |                        |                 |
|                         |                            |                  |  |                                   |                        |                 |
|                         |                            |                  |  |                                   |                        |                 |
|                         |                            | GO T             | O PAGE 2                                 |                                   |                        |                 |
| I                       |                            |                  |  |                                   |                        |                 |

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

2 of 4

| 13 C / OH NAME                                 | Dominguez, Alejandro (The Honorable)  |   | <b>14</b> Filer ID 00067897   | (Ethics Con  | nmission Filers) |
|--|---|---|---|--------------|------------------|
| 15 NOTICE<br>FROM<br>POLITICAL<br>COMMITTEE(S) | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |   |   |              |                  |
| Additional Pages                               | COMMITTEE TYPE  | COMMITTEE NAME  |   |              |                  |
| ш°   | GENERAL   |   |   |              |                  |
|  |   | COMMITTEE ADDRESS   |   |              |                  |
|  | SPECIFIC  |   |   |              |                  |
|  |   | COMMITTEE CAMPAIGN TREASU                                   | IRER NAME   |              |                  |
|  |   | COMMITTEE CAMPAIGN TREASU                                   | IRER ADDRESS  |              |                  |
| 16 CONTRIBUTION<br>TOTALS                      |   | ZED POLITICAL CONTRIBUTIONS<br>ES OF LOANS, OR CONTRIBUTION | (OTHER THAN PLEDGES, LOANS,<br>IS MADE ELECTRONICALLY)  | \$           | 0.00             |
|  |   | AL CONTRIBUTIONS<br>LEDGES, LOANS, OR GUARANTE              | ES OF LOANS)  | \$           | 0.00             |
| EXPENDITURE<br>TOTALS                          | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$   |   |   | 0.00         |                  |
|  | 4. TOTAL POLITIC  | AL EXPENDITURES   |   | \$           | 1,750.00         |
| CONTRIBUTION<br>BALANCE                        | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$   |   |   | \$           | 1,074.24         |
| OUTSTANDING<br>LOAN TOTALS                     | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   |   |   | \$           | 180,000.00       |
| <b>17</b> AFFIDAVIT                            |   |   | , under penalty of perjury, that the ac<br>and includes all information required<br>lection Code. |              |                  |
|  |   |   | The Honorable Alejandro Domir   |              |                  |
|  | Signature of Candidate or Officeholder  |   |   |              |                  |
| AFFIX NO                                       | TARY STAMP / SEAL ABO   | OVE   |   |              |                  |
| Sworn to and subs                              | cribed before me, by the s  | aid   | , this the  |              | day              |
| of   | , 20, to ce   | rtify which, witness my hand and sea                        | al of office.   |              |                  |
| Signature of office                            | cer administering   | Printed name of officer adminis                             | stering Title of office   | er administe | ring oath        |

### SUBTOTALS - C/OH

### FORM C/OH COVER SHEET PG 3

| 3 of 4  |  |          |             |  |  |  |
|---|--|----------|-------------|--|--|--|
| 18 FILER NAME Dominguez, Alejandro (The Honorable)  19 Filer ID (Ethics Commission Filers) 00067897 |  |          |             |  |  |  |
| 20 SCHEDULI<br>NAME OF  | SUBTOTAL AMOUNT  |          |             |  |  |  |
| 1.  | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                              | \$       |             |  |  |  |
| 2.  | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                | \$       |             |  |  |  |
| 3.  | . SCHEDULE B: PLEDGED CONTRIBUTIONS  |          | \$          |  |  |  |
| 4.  | SCHEDULE E: LOANS  |          | \$          |  |  |  |
| 5. X  | X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS         |          | \$ 1,750.00 |  |  |  |
| 6.  | 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                |          | \$          |  |  |  |
| 7.  | 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS       |          | \$          |  |  |  |
| 8.  | 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           |          | \$          |  |  |  |
| 9.  | 9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                  |          | \$          |  |  |  |
| 10.   | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS             | OF C/OH  | \$          |  |  |  |
| 11.   | 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS    |          | \$          |  |  |  |
| 12.   | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS ITO FILER | RETURNED | \$          |  |  |  |
|   |  |          |             |  |  |  |

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

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

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 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: 1/1 Rpt: 4/4           | Dominguez, Alejandro (The Honorable)   | 00067897   |  |
| 4 | Date                        | 5 Payee name   |  |  |
|   | 10/02/2024                  | Gracia, Jonathan   |  |  |
| 6 | Amount (\$)                 | 7 Payee address; City; State; Zip Code   |  |  |
|   | \$500.00                    | 932 E Van Buren St   |  |  |
|   |                             |  |  |  |
|   | l                           | Brownsville, TX 78520  |  |  |
| 8 | PURPOSE                     | (a) Category (See Categories listed at the top of this schedule) (b) De  | escription   |  |
|   | OF<br>EXPENDITURE           | Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.   |  |  |
|   | !                           | Candidate/Officeholder/Political Committee   |  |  |
|   |                             |  | cheral election contribution   |  |
| 9 | Complete ONLY if direct     | Candidate/Officeholder name Office sought  | Office held  |  |
|   | expenditure to benefit C/O  | H Gracia, Jonathan State Represer  | ntative District 37  |  |
|   | Date                        | Payee name   |  |  |
|   | 10/10/2024                  | Rincones, Gloria (Judge)   |  |  |
|   | Amount (\$)                 | Payee address; City; State; Zip Code   |  |  |
|   | \$250.00                    | P.O. Box 4480  |  |  |
|   | !                           |  |  |  |
|   |                             | Brownsville, TX 78523  |  |  |
|   | PURPOSE<br>OF               | The state of the s | escription   |  |
|   | EXPENDITURE                 | Contributions/Donations Made By Candidate/Officeholder/Political Committee   | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |  |
|   | !                           |  | de-election contribution   |  |
|   | !                           |  |  |  |
|   | Complete ONLY if direct     | Candidate/Officeholder name Office sought  | Office held  |  |
|   | expenditure to benefit C/OH | H Rincones, Gloria (Judge) District Judge D  | District 445 District Judge District 445   |  |
| Т | Date                        | Payee name   |  |  |
|   | 12/03/2024                  | Sanchez, David (Judge)   |  |  |
|   | Amount (\$)                 | Payee address; City; State; Zip Code   |  |  |
|   | \$1,000.00                  | 501 E Tyler Ave  |  |  |
|   |                             |  |  |  |
|   |                             | Harlingen, TX 78550  |  |  |
|   | PURPOSE                     | (a) Category (See Categories listed at the top of this schedule) (b) De  | escription   |  |
|   | OF<br>EXPENDITURE           | Contributions/Donations Made By  | Check if travel outside of Texas. Complete Schedule T.   |  |
|   |                             | Candidate/Officeholder/Political Committee   | Check if Austin, TX, officeholder living expense<br>Le-election contribution                             |  |
|   | l                           |  | e-election continuation  |  |
|   | Complete ONLY if direct     | Candidate/Officeholder name Office sought  | Office held  |  |
|   | expenditure to benefit C/O  |  |  |  |
|   |                             |  |  |  |
|   |                             |  |  |  |
|   |                             |  |  |  |