

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00065774	<b>2</b> Total pages filed:  12								
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI The Honorable Rebeca C.		<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b> 03/31/2025								
	NICKNAME LAST SUFFIX Martinez										
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 12373  San Antonio, TX 78212		Date Hand-delivered or Date Postmarked								
			Receipt # Amount								
			Date Processed								
			Date Imaged								
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Dr. William T.										
	NICKNAME LAST SUFFIX Gonzaba M.D.										
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 720 Pleasanton Rd.  San Antonio, TX 78214										
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 921-3800										
<b>8</b> REPORT TYPE	<table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>			<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)
<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)								
<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)								
<b>9</b> PERIOD COVERED	Month Day Year      Month Day Year 07/01/2024      THROUGH      12/31/2024										
<b>10</b> ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special								
<b>11</b> OFFICE	OFFICE HELD (if any) Court of Appeals, Chief Justice District 4		<b>12</b> OFFICE SOUGHT (if known)								

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 12

13 C / OH NAME	Martinez, Rebeca C. (The Honorable)	14 Filer ID	(Ethics Commission Filers)
		00065774	

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 12,074.18
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 44,762.99
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Rebeca C. Martinez  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - JC/OH

FORM JC/OH  
COVER SHEET PG 3

3 of 12

<b>18 FILER NAME</b> Martinez, Rebeca C. (The Honorable)		<b>19 Filer ID</b> (Ethics Commission Filers) 00065774	
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	11,754.25
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	269.98
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	49.95
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	2.31

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/4 Rpt: 4/12	<b>2</b> FILER NAME Martinez, Rebeca C. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00065774
<b>4</b> Date 08/05/2024	<b>5</b> Payee name AFL-CIO	
<b>6</b> Amount (\$) \$1,700.00	<b>7</b> Payee address; City; State; Zip Code 231 West Cypress, Ste. 115  San Antonio, TX 78212	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Program and Directory Ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/19/2024	Payee name Apple, Inc	
Amount (\$) \$9.99	Payee address; City; State; Zip Code 1 Apple Park Way  Cupertino, CA 95014	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense icloud storage fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2024	Payee name Bexar County Women's Bar Association	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 9506 Wahada  San Antonio, TX 78217	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Event - Autumn Affair
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/4 Rpt: 5/12	<b>2</b> FILER NAME Martinez, Rebeca C. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00065774
<b>4</b> Date 08/02/2024	<b>5</b> Payee name Chase	
<b>6</b> Amount (\$) \$9,156.84	<b>7</b> Payee address; City; State; Zip Code PO Box 1423  Charlotte, NC 28209-1423	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Repayment of total Chase credit card charges made during last reporting period.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2024	Payee name That's Great News	
Amount (\$) \$387.42	Payee address; City; State; Zip Code 900 Northrop Road PO Box 5021 Wallingford, CT 06492	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printed/frame publication
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/18/2024	Payee name TurnItBlue	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 780 Utica Ave  Boulder, CO 80304	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense webpage hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 6/12	<b>2</b> FILER NAME Martinez, Rebeca C. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00065774
<b>4</b> Date 08/19/2024	<b>5</b> Payee name TurnItBlue	
<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 780 Utica Ave  Boulder, CO 80304	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense webpage hosting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name TurnItBlue		
Amount (\$) \$50.00	Payee address; City; State; Zip Code 780 Utica Ave  Boulder, CO 80304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense webpage hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name TurnItBlue		
Amount (\$) \$50.00	Payee address; City; State; Zip Code 780 Utica Ave  Boulder, CO 80304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense webpage hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/4 Rpt: 7/12	<b>2</b> FILER NAME Martinez, Rebeca C. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00065774
<b>4</b> Date 11/18/2024	<b>5</b> Payee name TurnItBlue	
<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 780 Utica Ave  Boulder, CO 80304	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense webpage hosting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/18/2024	Payee name TurnItBlue	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 780 Utica Ave  Boulder, CO 80304	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense webpage hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/1 Rpt: 8/12	<b>2</b> FILER NAME Martinez, Rebeca C. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00065774
<b>4</b> CREDIT CARD ISSUER	Name of financial institution Chase Bank		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT	(a) Amount Charged \$134.99	(b) Date of Charge 12/03/2024	(c) Date(s) Credit Card Issuer Paid
<b>7</b> PAYEE	(a) Payee name Southwest Airlines		(b) Payee address; City, State, Zip Code 2702 Love Field Dr Dallas, TX 78235
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Travel from El Paso returning from New Chief Justice Investiture
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$134.99	(b) Date of Charge 12/03/2024	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name Southwest Airlines		(b) Payee address; City, State, Zip Code 2702 Love Field Dr Dallas, TX 78235
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Travel to El Paso for New Chief Justice Investiture
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		



# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/2 Rpt: 9/12	<b>2</b> FILER NAME Martinez, Rebeca C. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00065774
<b>4</b> Date 08/09/2024	<b>5</b> Payee name Apple, Inc	
<b>6</b> Amount (\$) \$9.99  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 1 Apple Park Way  Cupertino, CA 95014	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense icloud storage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Apple, Inc	
Amount (\$) \$9.99  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1 Apple Park Way  Cupertino, CA 95014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense icloud storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2024	Payee name Apple, Inc	
Amount (\$) \$9.99  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1 Apple Park Way  Cupertino, CA 95014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense icloud storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 2/2 Rpt: 10/12	<b>2</b> FILER NAME Martinez, Rebeca C. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00065774
<b>4</b> Date 11/09/2024	<b>5</b> Payee name Apple, Inc	
<b>6</b> Amount (\$) \$9.99  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 1 Apple Park Way  Cupertino, CA 95014	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense icloud storage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Apple, Inc	
Amount (\$) \$9.99  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1 Apple Park Way  Cupertino, CA 95014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense icloud storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/2 Rpt: 11/12
2 FILER NAME Martinez, Rebeca C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065774
4 Date 07/31/2024	5 Name of person from whom amount is received Wells Fargo	8 Amount (\$) \$0.41
	6 Address of person from whom amount is received; City; State; Zip Code  San Francisco, CA 94104	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer interest	
Date 08/30/2024	Name of person from whom amount is received Wells Fargo	Amount (\$) \$0.40
	Address of person from whom amount is received; City; State; Zip Code  San Francisco, CA 94104	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer interest	
Date 09/30/2024	Name of person from whom amount is received Wells Fargo	Amount (\$) \$0.37
	Address of person from whom amount is received; City; State; Zip Code  San Francisco, CA 94104	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer interest	
Date 10/30/2024	Name of person from whom amount is received Wells Fargo	Amount (\$) \$0.38
	Address of person from whom amount is received; City; State; Zip Code  San Francisco, CA 94104	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer interest	
Date 11/29/2024	Name of person from whom amount is received Wells Fargo	Amount (\$) \$0.37
	Address of person from whom amount is received; City; State; Zip Code  San Francisco, CA 94104	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer interest	

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 2/2 Rpt: 12/12

2 FILER NAME

Martinez, Rebeca C. (The Honorable)

3 Filer ID (Ethics Commission Filers)  
00065774

4 Date

12/31/2024

5 Name of person from whom amount is received

Wells Fargo

8 Amount (\$)

\$0.38

6 Address of person from whom amount is received; City; State; Zip Code

San Francisco, CA 94104

7 Purpose for which amount is received  
interest

☐ Check if political contribution returned to filer