

COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC
COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00028389	2 Total pages filed: 13
3 COMMITTEE NAME Hidalgo County Democratic Party Executive Committee			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/14/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 4585 McAllen, TX 78502-4585		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Kenna S. NICKNAME LAST SUFFIX Giffin		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 501 W. Owassa Road Lot 882 Pharr, TX 78577		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 3784 McAllen, TX 78502		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 283-4669		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 01/01/2025 THROUGH Month Day Year 06/30/2025		
11 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	

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COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC
COVER SHEET PG 2

12 COMMITTEE NAME Hidalgo County Democratic Party Executive Committee		13 Filer ID (Ethics Commission Filers) 00028389
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,936.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,094.74
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,051.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 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.

Ms. Kenna S. Giffin

Signature of Campaign Treasurer

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 - CEC**FORM CEC**
COVER SHEET PG 3
3 of 13

17 COMMITTEE NAME Hidalgo County Democratic Party Executive Committee		18 Filer ID (Ethics Commission Filers) 00028389
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,936.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 976.88
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,094.74
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 95.99
10.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 4/13
2 FILER NAME Hidalgo County Democratic Party Executive Committee		3 Filer ID (Ethics Commission Filers) 00028389
4 Date 01/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernando Mancias DBA Judge Fernando Mancias Campaign Fund <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78504	7 Amount of Contribution (\$) \$1,200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granados, AR (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Olby (Mr.) <hr/> Contributor address; City; State; Zip Code Weslaco, TX 78596	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Olby (Mr.) <hr/> Contributor address; City; State; Zip Code Weslaco, TX 78596	Amount of Contribution (\$) \$251.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Olby (Mr.) <hr/> Contributor address; City; State; Zip Code Weslaco, TX 78596	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/13
2 FILER NAME Hidalgo County Democratic Party Executive Committee		3 Filer ID (Ethics Commission Filers) 00028389
4 Date 05/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Olby (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Weslaco, TX 78596	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Olby (Mr.) <hr/> Contributor address; City; State; Zip Code Weslaco, TX 78596	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeaish, Laurel <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeaish, Laurel <hr/> Contributor address; City; State; Zip Code Cambridge, TX 02238-2110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeaish, Laurel (Ms.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/13
2 FILER NAME Hidalgo County Democratic Party Executive Committee		3 Filer ID (Ethics Commission Filers) 00028389
4 Date 04/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeaish, Laurel (Ms.) <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78501	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeaish, Laurel (Ms.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeaish, Laurel (Ms.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olby, Hugh (Mr.) <hr/> Contributor address; City; State; Zip Code Weslaco, TX 78596	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Ana (Ms.) <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/13
2 FILER NAME Hidalgo County Democratic Party Executive Committee		3 Filer ID (Ethics Commission Filers) 00028389
4 Date 01/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Delfina (Ms.) <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78501	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 03/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Delfina (Ms.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Delfina (Ms.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Delfina (Ms.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Delfina (Ms.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/13
2 FILER NAME Hidalgo County Democratic Party Executive Committee		3 Filer ID (Ethics Commission Filers) 00028389
4 Date 06/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Delfina (Ms.) <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78501	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheats, Ned (Mr.) <hr/> Contributor address; City; State; Zip Code Mission, TX 78574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheats, Ned (Mr.) <hr/> Contributor address; City; State; Zip Code Mission, TX 78574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheats, Ned (Mr.) <hr/> Contributor address; City; State; Zip Code Mission, TX 78574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheats, Ned (Mr.) <hr/> Contributor address; City; State; Zip Code Mission, TX 78574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/13
2 FILER NAME Hidalgo County Democratic Party Executive Committee		3 Filer ID (Ethics Commission Filers) 00028389
4 Date 05/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheats, Ned (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Mission, TX 78574	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheats, Ned (Mr.) <hr/> Contributor address; City; State; Zip Code Mission, TX 78574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zapata, Dora (Ms.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 10/13

2 FILER NAME
Hidalgo County Democratic Party Executive Committee

3 Filer ID (Ethics Commission Filers)
00028389

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 11/13

2 FILER NAME
Hidalgo County Democratic Party Executive Committee

3 Filer ID (Ethics Commission Filers)
00028389

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan
02/07/2025

7 Name of lender ☐ out-of-state PAC (ID#: _____)
Giffin, Kenna (Dr.)

9 Loan Amount (\$)
\$976.88

6 Is lender a
financial
institution?
No

8 Lender address; City; State; Zip Code

McAllen, TX 78502

10 Interest Rate
0

11 Maturity Date
02/07/2025

12 Principal occupation / Job title (See Instructions)
Retired

13 Employer (See Instructions)
Retired

14 Description of Collateral
☒ None

15 Check if personal funds were deposited into political account
(See Instructions)
☐ N/A

16 GUARANTOR
INFORMATION

☒ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal occupation

21 Employer (See Instructions)

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.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 12/13	2 FILER NAME Hidalgo County Democratic Party Executive Committee	3 Filer ID (Ethics Commission Filers) 00028389
4 Date 06/20/2025	5 Payee name ActBlue Texas	
6 Amount (\$) \$17.86	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/07/2025	Payee name Barrel House	
Amount (\$) \$976.88	Payee address; City; State; Zip Code 1927 S Tourist Dr. Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 CEC meeting 1/8/2025
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/12/2025	Payee name Texas Democratic Party	
Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Hidalgo County Democratic Party Executive Committee	3 Filer ID (Ethics Commission Filers) 00028389
4 Date 06/30/2025	5 Payee name Lone Star National Bank	
6 Amount (\$) 95.99	7 Payee Address; City; State; Zip 600 E. Nolana McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Service Charges