FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00083777 39 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Jose A. NAME Date Received **ELECTRONICALLY FILED** 07/14/2025 NICKNAME LAST **SUFFIX** Joe Ramirez CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Veronica Selpulveda NAME NICKNAME LAST **SUFFIX** Martinez **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 341-4193 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 464 Hidalgo

GO TO PAGE 2

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 39

13 C / OH NAME	Ramirez, Jose A. (Th	e Honorable)	14 Filer ID 00083777	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages				
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		 ZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	JS)	\$ 0.00
EXPENDITURE TOTALS	· ·	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 45,210.54
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 53,367.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.		
		The Hon	orable Jose A. Ramire	ez
		Signature o	f Candidate or Officehol	der
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE		
		aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	er administering oath	Printed name of officer administering oath	Title of office	r administering oath

FORM JC/OH **SUBTOTALS - JC/OH COVER SHEET PG 3** 3 of 39 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00083777 Ramirez, Jose A. (The Honorable) **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ 3. SCHEDULE E(J): LOANS (JUDICIAL) \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 45,210.54 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/36 Rpt: 4/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
L	06/03/2025	Academy Sporting Goods
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$158.01	651 E. Trenton
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Payee name
	02/20/2025	Alex's Boot Shoe & Luggage
┡		
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.15	608 E University Dr,
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign event expense
		Sampaigh event expense
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	02/10/2025	Anita's Cafe
L	Amount (\$)	Payee address; City; State; Zip Code
	\$67.00	2102 N. McColl Rdq
	Ψ07.00	2102 N. Miccoll Nuq
		Ediphura TV 70541
		Edinburg, TX 78541
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		office meeting
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
Г		

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

l	Credit Cara r ayment	The Instruction Guide explains how to complete this for	m.			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
l	Sch: 2/36 Rpt: 5/39	Ramirez, Jose A. (The Honorable)	00083777			
4	Date	5 Payee name	•			
	01/21/2025	Best Buy				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
l	\$297.65	8012 N. 10th St.				
l						
l		McAllen, TX 78504				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on			
l	OF EXPENDITURE	Event Expense	f travel outside of Texas. Complete Schedule T.			
			f Austin, TX, officeholder living expense JN event expense			
		Campang	in event expense			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O					
F	Date	Payee name				
l	01/18/2025	CARRERA, MIGUEL				
┝	Amount (\$)	Payee address; City; State; Zip Code				
	\$12,000.00	135 PASEO DEL PRADO AVE				
		EDINBURG, TX 78539				
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on			
	OF EXPENDITURE	Consulting Expense	f travel outside of Texas. Complete Schedule T.			
	LAI LINDITORE		f Austin, TX, officeholder living expense			
		campaig	n consulting expense			
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OH					
F	Date	Payee name				
	01/09/2025	COSTA MESSA				
┢	Amount (\$)	Payee address; City; State; Zip Code				
l	\$156.94	5248 N. 10TH ST.				
l						
		MCCALLEN, TX 78504				
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on			
l	OF EXPENDITURE	Food/Beverage Expense	f travel outside of Texas. Complete Schedule T.			
l	LXI LINDITORE		f Austin, TX, officeholder living expense			
		office me	eeung			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/Ol		Office field			
\vdash						

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Sift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ers)
	Sch: 3/36 Rpt: 6/39	Ramirez, Jose A. (The Honorable) 00083777	
4	Date	5 Payee name	
	06/27/2025	Chapa, Melissa	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	1118 W. 4TH ST.	
		WESLACO, TX 78596	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
•	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Donation	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	experiulture to beliefit C/O	п	
	Date	Payee name	
	06/03/2025	Costco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$65.00	1501 W. Kelly Ave.	
		Pharr, TX 78577	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Office Expense	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
		···	
	Date	Payee name	
	06/03/2025	Costco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$86.45	1501 W. Kelly Ave.	
		Pharr, TX 78577	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Office Expense	
	Complete ONU V & direct	Condidate/Officeholder name Office south	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex nmittee Legal Services The Instruction Guid	Salaries/	Wages	s/Contract Labor		Travel Out of Dist OTHER (enter a d	rict category not listed above)	
1	Total pages Schedule F1: Sch: 4/36 Rpt: 7/39	2	FILER NAME Ramirez, Jose A. (The Honora	ahla)		3		Filer ID 00083777	(Ethics Commission Filers	3)
4	Date 03/12/2025	5	Payee name Devine Ideas Flower Shop	abie)				00063777		
6	Amount (\$) \$269.53	7	Payee address; City; 100 S 12th Ave Edinburg , TX 78539	State; Zip C	ode					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the t Event Expense	top of this schedule)	(b)		ГΧ,	de of Texas. Comp officeholder living SE		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ught			Office he	ld	
	Date 01/03/2025		Payee name El Jardin Mexican Restaurant							
	Amount (\$) \$168.76		Payee address; City; 2405 E. University Dr. Edinburg , TX 78539	State; Zip C	oue					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the t Food/Beverage Expense	top of this schedule)	(b)	=		de of Texas. Comp officeholder living		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ught			Office he	ld	
	Date 02/26/2025		Payee name Extra Space Storage							
	Amount (\$) \$177.64		Payee address; City; 1317 E. Jackson Pharr , TX 78577	State; Zip C	ode					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the t Event Expense	top of this schedule)	(b)	<u> </u>	ГΧ,	de of Texas. Comp officeholder living SE		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ught			Office he	ld	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 5/36 Rpt: 8/39	Ramirez, Jose A. (The Honorable) 00083777			
4	Date	5 Payee name			
	03/26/2025	Extra Space Storage			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$127.00	1317 E. Jackson			
		Pharr , TX 78577			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		campaign expense			
		Gampaigh Expense			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
9	expenditure to benefit C/O				
	Date	Payee name			
	04/28/2025	Extra Space Storage			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$127.00	1317 E. Jackson			
		Pharr, TX 78577			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
		Campaign expense Campaign expense			
		Sumpaign expense			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	Date	Payee name			
	05/27/2025	Extra Space Storage			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$127.00	1317 E. Jackson			
		Pharr, TX 78577			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
		Campaign Expense			
		Campaign Expense			
	Complete ONLY if direct	Condidate/Office helder notes Office possible			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u>_</u>	T-t-1	1
1	Total pages Schedule F1: Sch: 6/36 Rpt: 9/39	2 FILER NAME Ramirez, Jose A. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00083777
4	Date	5 Payee name
	06/26/2025	Extra Space Storage
6	Amount (\$) \$226.00	7 Payee address; City; State; Zip Code 1317 E. Jackson Pharr, TX 78577
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Campaign expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/06/2025	Family Dollar
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.34	3511 W. Hwy 107
	DUDDOS-	Edinburg, TX 78539
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Toyas, Complete Schedule T
	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
		donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/10/2025	Foundation, Speedy Memorial
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	504 E. 11th St.
		San Juan, TX 78589
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	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
		Candidate/Officeholder/Political Committee
		Memorial Foundation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commis	ssion Filers)
Sch: 7/36 Rpt: 10/39	Ramirez, Jose A. (The Honorable)		00083777	
4 Date	5 Payee name			
01/01/2025	GONZALEZ, DOMINIQUE			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$4,500.00	703 W. NOLANA LOOP APT 8207			
	PHARR, TX 78577			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	Check if travel o	outside of Texas. Complete Schedule T.	
LAFENDITORE			TX, officeholder living expense	
		SOCIAL MED	ЛА	
O Complete ONLY if direct	Candidata/Officeholder name Office acu	aht.	Office hold	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	gnı	Office held	
Date	Payee name			
04/17/2025	Gateway Printing			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$1.23	315 S. Closner			
	Edinburg, TX 78539			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense	ш	outside of Texas. Complete Schedule T. TX, officeholder living expense	
		office supplies		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O	Н			
Date	Payee name			
01/08/2025	HEB			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$32.38	1212 S. Closner			
	Edinburg, TX 78589			
PURPOSE	_	(b) Description		
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel of	outside of Texas. Complete Schedule T.	
EXPENDITURE	Event Expense	=	TX, officeholder living expense	
		campaign eve	ent expense	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O	<u></u>			
				<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 8/36 Rpt: 11/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	02/21/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$171.68	901 Trenton Rd
		Edinburg, TX 78504
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL	Check if Austin, TX, officeholder living expense
		campaign event expense
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/23/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$89.70	1212 S Closner Blvd
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign event expense
		cumpaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davisa nama
	04/01/2025	Payee name HEB
	Amount (\$) \$1,875.00	Payee address; City; State; Zip Code 1212 S Closner Blvd
	Φ1,075.00	1212 S Closifer Bivu
		E II I TV 70500
		Edinburg, TX 78539
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign expense-gift cards
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/36 Rpt: 12/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	04/29/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$110.00	1212 S Closner Blvd
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Expense
		Sampangupanas
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	04/11/2025	Hidalgo County Bar Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	323 W. Cano, 1st Fl.
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense dues/fees expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	02/16/2025	Hobby Lobby
	Amount (\$)	Payee address; City; State; Zip Code
	\$111.98	7600 N 10th St Building 300
		Mcallenn, TX 78504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		office supplies
		от о
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		
1	Total pages Schedule F1:	
	Sch: 10/36 Rpt: 13/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	01/02/2025	Home Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$715.13	801 Trenton Rd
		Modillon TV 70E01
		McAllen, TX 78501
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign event expense
		Campaign event expense
_	Complete ONLY !! -!!!	Condidate/Officeholder name Office county
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2025	Home Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,435.76	801 Trenton Rd
		McAllen, TX 78501
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign event expense
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Data	Davida nama
	Date	Payee name
	01/10/2025	Home Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$571.33	801 Trenton Rd
		McAllen, TX 78501
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign event expense
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	, , , , , , , , , , , , , , , , , , , ,
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 11/36 Rpt: 14/39	Ramirez, Jose A. (The Honorable)	00083777
4	Date	5 Payee name	•
	01/13/2025	Home Depot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$215.44	801 Trenton Rd	
		McAllen , TX 78501	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			campaign event expense
_			200
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/13/2025	Home Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$909.14	801 Trenton Rd	
		McAllen, TX 78501	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense campaign event expense
			campaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Since hold
	Date	Dove name	
	01/14/2025	Payee name Home Depot	
		·	
	Amount (\$) \$590.02	Payee address; City; State; Zip Code 801 Trenton Rd	
	\$390.02	oot Helion Ru	
		Madley TV 70501	
		McAllen , TX 78501	
	PURPOSE OF	, , ,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
			campaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete the	his form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 12/36 Rpt: 15/39	Ramirez, Jose A. (The Honorable)	00083777
4	Date	5 Payee name	·
	01/27/2025	Home Depot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$256.21	801 Trenton Rd	
		McAllen , TX 78501	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE		Check if Austin, TX, officeholder living expense
		Cai	mpaign event expense
a	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
J	expenditure to benefit C/Ol		Office field
_	Date		
	01/27/2025	Payee name Home Depot	
	Amount (\$) \$711.52	Payee address; City; State; Zip Code 801 Trenton Rd	
	\$711.52	801 Henton Ru	
		Modllon TV 79501	
	DUDDOOF	McAllen , TX 78501	
	PURPOSE OF	, , , , , , , , , , , , , , , , , , ,	Scription Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	L Event Expense	Check if Austin, TX, officeholder living expense
		car	mpaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	
	Date	Payee name	
	01/27/2025	Home Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$11.33	801 Trenton Rd	
		McAllen , TX 78501	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Cal	mpaign event expense
	Complete ONLV if direct	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/Ol	9	Office field

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Gitt/Awards/Memorials Expense Printing Expense I ravei Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed at Credit Card Payment The Instruction Guide explains how to complete this form.				ed above)									
				The Insti	ruction Guid	de explains	how to co	mple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Com	mission Filers)
	Sch: 13/36 Rpt: 16/39		Ramirez, Jos	se A. (1	The Hono	rable)					00083777	7	
4	Date	5	Payee name										
	01/27/2025		Home Depot	t									
6	Amount (\$)	7	Payee addres	s; C	City;	State	; Zip Co	de					
	\$15.90		801 Trenton	Rd									
			McAllen , TX	78501	_								
8	PURPOSE	(a)	Category (See	- Categorie	es listed at the	ton of this sch	edule)	(b)	Description				
	OF		Event Expen		cs listed at the	top or tries son	cudic)	` ,		outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITURE								Check if Austin	, TX,	officeholder liv	ng expense	
									campaign eve	ent	expense		
9	Complete ONLY if direct		Candidate/Offic	eholder	name	(Office sou	ght			Office	held	
	expenditure to benefit C/OI	Н											
	Date		Payee name										
	01/27/2025		Home Depot	t									
	Amount (\$)		Payee addres	s; C	City;	State	; Zip Co	de					
	\$60.70		801 Trenton	Rd									
			McAllen , TX	78501	_								
_	PURPOSE	┢	Category (See					(b)	Description				
	OF		Event Expen		es listed at the	top of this sch	edule)	(~)	_ `	outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITURE		Event Expen	130					Check if Austin				
									campaign eve	ent	expense		
	Complete ONLY if direct		Candidate/Offic	eholder	name	(Office sou	ght			Office	held	
	expenditure to benefit C/OI	Н											
	Date		Payee name										
	01/27/2025		Home Depot	t									
	Amount (\$)		Payee addres	s; C	City;	State	; Zip Co	de					
	\$278.14		801 Trenton	Rd									
			McAllen , TX	78501	_								
	PURPOSE	-	Category (See			ton of this s-l-	odulo)	(b)	Description				
	OF		Event Expen		es iisteu at trie	top of this scri	edule)	(~)		outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITURE		Event Expen	130					Check if Austin	, TX,	officeholder liv	ng expense	
									campaign eve	ent	expense		
	Complete ONLY if direct		Candidate/Offic	eholder	name	(Office sou	ght			Office	held	
	expenditure to benefit C/OI	Н											

SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/36 Rpt: 17/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	02/10/2025	Home Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$175.39	801 Trenton Rd
		McAllen, TX 78501
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign event expense
		campaight event expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	H
-	Date	Payee name
	02/18/2025	Home Depot
		·
	Amount (\$)	
	\$195.72	801 Trenton Rd
		McAllen, TX 78501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign event expense
		campang not on the superior
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	02/18/2025	Home Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$261.26	120 S. Shary Rd.
	φ201.20	120 S. Shary Ru.
		Mission TV 70570
		Mission, TX 78572
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 15/36 Rpt: 18/39	Ramirez, Jose A. (The Honorable)	00083777			
4	Date	5 Payee name				
	02/18/2025	Home Depot				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$334.01	409 N. Jackson Ave				
	l					
	l	Pharr, TX 78577				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n			
	OF EXPENDITURE		travel outside of Texas. Complete Schedule T.			
	1	, –	Austin, TX, officeholder living expense n event expense			
	l	Gampaign	revent expense			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
-	expenditure to benefit C/OI		5555.5			
H	Date	Payee name				
	02/17/2025	Home Depot				
_	Amount (\$)	Payee address; City; State; Zip Code				
	\$393.54	409 N. Jackson Ave				
	Ψ000.0.	400 W. 040NOON / WC				
	l	Pharr, TX 78577				
_	PURPOSE					
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if to	n travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Event Expense	Austin, TX, officeholder living expense			
	I	campaigr	n event expense			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI	1				
	Date	Payee name				
	02/24/2025	Home Depot				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$54.07	409 N. Jackson Rd				
	I					
	1	Pharr, TX 78577				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n			
	OF EXPENDITURE	Event Expense	travel outside of Texas. Complete Schedule T.			
	EXPLINDITORL		Austin, TX, officeholder living expense			
	l	сатраун	n event expense			
_	Complete ONL V if direct	Condidate/Officeholder name Office cought	Office hold			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held			
<u> </u>	<u> </u>					

SCHEDULE F1

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 16/36 Rpt: 19/39	Ramirez, Jose A. (The Honorable) 00083777	
4	Date	5 Payee name	_
	02/22/2025	Home Depot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
l	\$418.49	801 Trenton Rd	
		McAllen, TX 78504	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		campaign event expense	
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
┡	·		
	Date	Payee name	
	03/28/2025	Home Depot	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$841.07	409 N. Jackson Rd	
L		Pharr, TX 78577	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		campaign expense	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
F	Date	Payee name	
	03/31/2025	Home Depot	
Н	Amount (\$)	Payee address; City; State; Zip Code	
	\$521.75	409 N. Jackson Rd	
l			
		Pharr, TX 78577	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		campaign expense	
L	0 1: 0:::::::::::::::::::::::::::::::::		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
L			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/36 Rpt: 20/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	01/24/2025	Home Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.33	409 N. Jackson Rd
		Pharr, TX 78577
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event expense
		Event expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name
L	03/28/2025	HomeGoods
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.05	7600 N 10th St Ste 100
		McAllen, TX 78504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign expense
		Campaign expense
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Data	Davida marra
	Date 01/06/2025	Payee name
L		Howling Rabbits
	Amount (\$)	Payee address; City; State; Zip Code
	\$286.09	1200 Auburn Ave Ste. 350
		McAllen, TX 78504
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense office meeting
		Office friceting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
\vdash		

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 18/36 Rpt: 21/39	2 FILER NAME Ramirez, Jose A. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00083777
4	Date 01/27/2025	5 Payee name Howling Rabbits
6	Amount (\$) \$111.58	7 Payee address; City; State; Zip Code 1200 Auburn Ave Ste. 350
		McAllen, TX 78504
8	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 office meeting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/21/2025	Payee name LOWES
	Amount (\$) \$68.18	Payee address; City; State; Zip Code 1015 E. Expressway 83
		Weslaco , TX 78596
	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 office Supplies
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date 01/02/2025	Payee name Lowe's
	Amount (\$) \$271.13	Payee address; City; State; Zip Code 2802 W. University
		Edinburg, TX 78539
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign event expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 19/36 Rpt: 22/39	Ramirez, Jose A. (The Honorable)	00083777				
4	Date	5 Payee name	'				
	01/21/2025	Lowe's					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$42.15	2802 W. University					
		Edinburg, TX 78539					
8	PURPOSE		Description				
	OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	·	Check if Austin, TX, officeholder living expense				
			campaign event expense				
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/21/2025	Lowe's					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$312.55	2802 W. University					
		Edinburg, TX 78539					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description				
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.				
			Check if Austin, TX, officeholder living expense campaign event expense				
			dampaign event expense				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O	•					
-	Date	Payee name					
	01/27/2025	Lowe's					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$135.31	2802 W. University					
	\$100.01	2002 W. Gillivoloky					
		Edinburg, TX 78539					
	PURPOSE		N. Donastination				
	OF	, , ,	Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense				
			campaign event expense				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
L	expenditure to benefit C/Ol	<u> </u>					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Travel Out of District OTHER (enter a category not listed above)		
Ļ		i		iue explains now	io comp	nete this form.	I			
1	Total pages Schedule F1:	l					3 Filer ID	(Ethics Commission Filers)		
	Sch: 20/36 Rpt: 23/39	l	ez, Jose A. (The Hond	orable)			00083777			
4	Date	5 Payee								
L	03/31/2025	MICH	AELS STORES							
6	Amount (\$)	7 Payee	address; City;	State; Zi	p Code					
	\$213.69	315 E	. TRENTON RD							
		EDINI	BURG, TX 78539							
8	PURPOSE	(a) Catego	Ory (See Categories listed at th	e top of this schedule	<u>)</u> (b) Description				
	OF		Overhead/Rental Exp		' `		outside of Texas. Com	nplete Schedule T.		
	EXPENDITURE						n, TX, officeholder living	g expense		
						office supplie	es			
9	Complete ONLY if direct		ate/Officeholder name	Office	e sough	t	Office h	eld		
	expenditure to benefit C/OI	+								
	Date	Payee	name							
	04/17/2025	1	AELS STORES							
	Amount (\$)	Pavee	address; City;	State; Zi	p Code)				
	\$391.97	1	. TRENTON RD	, —-						
	Ψ031.31									
			DUDO TV 70500							
		FDINI	BURG, TX 78539							
	PURPOSE OF		Ory (See Categories listed at th		(b) Description				
	EXPENDITURE	Office	Overhead/Rental Exp	ense		<u> </u>	outside of Texas. Com			
						office supplie	n, TX, officeholder living	y expense		
						onice supplie				
\vdash	Complete ONLY if direct	Condida	ato/Officeholder neme	O#:-	0.001.01	+	Office b	ald		
	Complete ONLY if direct expenditure to benefit C/OI		te/Officeholder name	OITIC	e sough	ıı	Office h	c iu		
L	·	ı								
	Date	Payee								
L	02/14/2025	MORI	ENO, DAVID							
	Amount (\$)	Payee	address; City;	State; Zi	p Code)				
	\$1,650.00	4901	N. CONWAY AVE.							
		MISS	ION, TX 78573							
	PURPOSE	(a) Catego	Ory (See Categories listed at th	e top of this schedule) (b) Description				
	OF		es/Wages/Contract La		´ `		outside of Texas. Com	nplete Schedule T.		
	EXPENDITURE		3				n, TX, officeholder living	g expense		
						Contract Lab	or			
	Complete ONLY if direct		te/Officeholder name	Office	e sough	t	Office h	eld		
	expenditure to benefit C/OI	H								

SCHEDULE F1

(Ethics Commission Filers)

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

3 Filer ID

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME

	Sch: 21/36 Rpt: 24/39	Ramirez, Jose A. (The Honorable)	00083777			
4	Date 02/12/2025	5 Payee name MR. PRESS				
6	Amount (\$) \$16.04	7 Payee address; City; State; Zip Coo 224 E. CANO ST.	le			
Ļ		EDINB, TX 78539				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht	Office held		
	Date 02/14/2025	Payee name Margaritas Flower Shop				
	Amount (\$) \$365.70	Payee address; City; State; Zip Coo 901 E Cano St	le			
L		Edinburg, TX 78539				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Empaign event expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht	Office held		
	Date	Payee name				
	01/23/2025	Mi Chula Restaurant				
	Amount (\$) \$54.65	Payee address; City; State; Zip Coo 2314 E. Richardson Rd	le			
		Edinburg, TX 78542				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ampaign event expense		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht	Office held		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/36 Rpt: 25/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	02/03/2025	Office Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$174.28	5115 N. 10th St
		McAllen, TX 78504
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		campaign event expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date 03/11/2025	Payee name
		Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.13	5115 N. 10th St
		McAllen, TX 78504
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/28/2025	Olive Garden
	Amount (\$)	Payee address; City; State; Zip Code
	\$116.23	7812 N 10th St
		McAllen, TX 78504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		office meeting
	Operation Chilly III	Our file to 10 ff as halden name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/36 Rpt: 26/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	01/27/2025	Perez, Andrew
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	500 N. 8th St.
		McAllen, TX 78501
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAFLINDITORL	Candidate/Officeholder/Political Committee
		sponsorship contribution-smokin on the rio 2025
_	Complete ONLY if direct	Condidate/Officeholder name Office country Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	
	Date	Payee name
	02/14/2025	Perez, Andrew
	Amount (\$)	Payee address; City; State; Zip Code
	\$310.00	500 N. 8th St.
		McAllen, TX 78501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	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
		sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/16/2025	Premier Awards & Gifts
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.28	2301 N 10th St
		McAllen, TX 78501
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		office supplies
	Operation ONE VIII II	Open State Office health and a second
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

l	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	, -	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/36 Rpt: 27/39	Ramirez, Jose A. (The Honorable) 00083777
4		5 Payee name
Ļ	05/08/2025	REYES, NORMA
۱	Amount (\$) \$120.00	7 Payee address; City; State; Zip Code 3457 PFC PEDRO MARTINEZ RD.
	Ψ120.00	5457 FF 6 F EBICO WINTENING TO INC.
		MERCEDES, TX 78570
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/08/2025	ROBLEDO, MIGUEL
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,600.00	914 S. 15TH ST., STE. A
		MOALLEN TV 70501
L	DUDDOCE	MCALLEN, TX 78501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		contract labor
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
F	Date	Payee name
	04/01/2025	Sam's Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.38	7601 N. 10th St
L		McAllen, TX 78504
	PURPOSE OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		food for jurors
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 25/36 Rpt: 28/39	Ramirez, Jose A. (The Honorable)	00083777
4	Date	5 Payee name	'
	01/21/2025	Sherwin-Williams	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$219.08	2223 S. Business Hwy 281	
		Edinburg, TX 78539	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	escription
	OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		Ca	ampaign event expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/10/2025	Smokin Moon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$61.84	1617 W. Polk	
		Pharr, TX 78577	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense ffice meeting
			mee meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	9	
	Date	Payee name	
	02/10/2025	Smokin Moon	
	Amount (\$) \$129.81	Payee address; City; State; Zip Code 1617 W. Polk	
	Ψ129.01	IOI7 W. FOIK	
		Dhaw TV 70577	
		Pharr, TX 78577	
	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	escription Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense
		01	ffice meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/36 Rpt: 29/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	01/06/2025	Stripes
6	Amount (\$)	7 Payee address; City; State; Zip Code 721 N. Closner
	\$24.53	721 N. Clostiei
		Edinburg, TX 78539
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign event-transportation gas
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	02/13/2025	Target
	Amount (\$)	Payee address; City; State; Zip Code
	\$244.71	7400 N. 10th
		McAllen, TX 78504
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fvent Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign event expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Pote	
	Date 02/05/2025	Payee name The UPS Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$71.99	7017 N. 10th St. Ste. N2
		McAllen, TX 78504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		office expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/36 Rpt: 30/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	01/05/2025	Toloa Rooftop
6	Amount (\$) \$236.98	7 Payee address; City; State; Zip Code 1200 Auburn Ave., Ste. 360
		McAllen, TX 78504
8	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 office meeting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/17/2025	University Draft House
	Amount (\$) \$86.88	Payee address; City; State; Zip Code 2405 W. University Dr.
		Edinburg, TX 78539
	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 office meeting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/10/2025	Wal-Mart
	Amount (\$) \$9.71	Payee address; City; State; Zip Code 1724 W. University Dr
		Edinburg, TX 78539
	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 office supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/V The Instruction Guide explains how to co	/ages/Contract Labor mplete this form.	OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Sch: 28/36 Rpt: 31/39	Ramirez, Jose A. (The Honorable)		00083777	
4 Date	5 Payee name			
04/29/2025	Walgreens			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		_
\$190.00	1418 E. University Dr.			
	Edinburg, TX 78539			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Event Expense		outside of Texas. Complete Schedule T. ı, TX, officeholder living expense	
		Campaign Ex		
		13		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght	Office held	
Date	Payee name			_
05/07/2025	Walgreens			
Amount (\$)	Payee address; City; State; Zip Co	de		_
\$507.95	1418 E. University Dr.			
·	,			
	Edinburg, TX 78539			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Event Expense		outside of Texas. Complete Schedule T. ı, TX, officeholder living expense	
		Campaign Ex		
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office sou H	ght	Office held	
Date	Payee name			_
01/30/2025	Whataburger			
Amount (\$)	Payee address; City; State; Zip Co			_
\$21.84	717 E. University Dr.	uc		
Ψ21.04	717 E. Oliversky Dr.			
	Edinburg, TX 78539			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense	=	outside of Texas. Complete Schedule T.	
		office meetin	ı, TX, officeholder living expense	
		omce meeun	y	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office hold	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ynt	Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 29/36 Rpt: 32/39	Ramirez, Jose A. (The Honorable)	00083777
4	Date	5 Payee name	·
	02/26/2025	Whataburger	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$35.91	717 E. University Dr.	
		Edinburg, TX 78539	
8	PURPOSE	-	Description
	OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		0	ffice meeting
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit Grot	'	
	Date	Payee name	
	02/14/2025	amazon.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$52.62	410 Terry Ave N	
l		Seattle, WA 98109	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
l	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
l	EX. ENDITORE	L	Check if Austin, TX, officeholder living expense
l			ffice supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	Office field
-	Date		
	Date 04/04/2025	Payee name	
		amazon.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$51.92	410 Terry Ave N	
		O will MA COACC	
		Seattle, WA 98109	
	PURPOSE OF	, , ,	Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			•
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
l			

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to cor	-	ete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	-	3 Filer ID (Ethics Commission Filers)
	Sch: 30/36 Rpt: 33/39	Ramirez, Jose A. (The Honorable)		00083777
4	Date	5 Payee name		-
	05/27/2025	amazon.com		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$28.76	410 Terry Ave N		
		Seattle, WA 98109		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Office Expense
				Office Experise
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
ľ	expenditure to benefit C/OI		giit	Office Hold
_	Data			
	Date	Payee name		
	02/12/2025	ebay.com		
	Amount (\$)	Payee address; City; State; Zip Cor	de	
	\$103.89	2145 Hamilton Ave.		
		San Jose, CA 95125		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense campaign event expense
				campaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		giit	Since hold
_	Date	Davis name		
	02/12/2025	Payee name ebay.com		
		-		
	Amount (\$)	Payee address; City; State; Zip Co	ae	
	\$129.89	2145 Hamilton Ave.		
		San Jose, CA 95125		
	PURPOSE OF	, ,	(b)	Description
	EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				campaign event expense
				h 0
-	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		J	
l				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	ve)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	on Filers)
	Sch: 31/36 Rpt: 34/39	Ramirez, Jose A. (The Honorable) 00083777	
4	Date	5 Payee name	
	02/12/2025	ebay.com	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$133.66	2145 Hamilton Ave.	
		San Jose, CA 95125	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		campaign event expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	02/18/2025	ebay.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.90	2145 Hamilton Ave.	
		San Jose, CA 95125	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		campaign event expense	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	02/18/2025	ebay.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.62	2145 Hamilton Ave.	
		San Jose, CA 95125	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		campaign event expense	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	JH	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)	
_	Total names Oct 11 51	<u> </u>	Files ID (Fabire Committee Files)	
1	Total pages Schedule F1: Sch: 32/36 Rpt: 35/39	2 FILER NAME Ramirez, Jose A. (The Honorable)	Filer ID (Ethics Commission Filers) 00083777	
4	Date	5 Payee name		
	02/18/2025	ebay.com		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$21.62	2145 Hamilton Ave.		
		San Jose, CA 95125		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Event Expense	side of Texas. Complete Schedule T.	
			K, officeholder living expense	
		campaign even	т ехрепое	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held	
\vdash	Date	Dayee name		
	02/18/2025	Payee name		
		ebay.com		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$121.24	2145 Hamilton Ave.		
		San Jose, CA 95125		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Event Expense Check if travel out:	side of Texas. Complete Schedule T.	
			K, officeholder living expense	
		campaign even	ı expense	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	02/18/2025	ebay.com		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$150.47	2145 Hamilton Ave.		
		San Jose, CA 95125		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Event Expense Check if travel out:	side of Texas. Complete Schedule T.	
	LA LIBITORE		K, officeholder living expense	
		campaign even	t expense	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held	
	experiorare to benefit C/OI	лп 		

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 33/36 Rpt: 36/39	Ramirez, Jose A. (The Honorable)	00083777
4	Date	5 Payee name	
	03/09/2025	ebay.com	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$81.89	2145 Hamilton Ave.	
		San Jose, CA 95125	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		campaign ev	
		outparg.r.o.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	03/24/2025	ebay.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$28.97	2145 Hamilton Ave.	
	,		
		San Jose, CA 95125	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE		n, TX, officeholder living expense
		campaign ev	rent expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/24/2025	ebay.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$30.27	2145 Hamilton Ave.	
		San Jose, CA 95125	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
			rent expense
			·
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
ı			

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 34/36 Rpt: 37/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	03/24/2025	ebay.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.96	2145 Hamilton Ave.
		San Jose, CA 95125
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign event expense
		campaign event expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/24/2025	ebay.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.29	2145 Hamilton Ave.
	Ψ40.23	ZI43 Hallillon Avc.
		San Jose CA 05125
	DUDDOOF	San Jose, CA 95125
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/14/2025	ebay.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.51	2145 Hamilton Ave.
		San Jose, CA 95125
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		campaign event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 35/36 Rpt: 38/39	Ramirez, Jose A. (The Honorable)	00083777
4	Date	5 Payee name	
	04/14/2025	ebay.com	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$26.14	2145 Hamilton Ave.	
		San Jose, CA 95125	
8	DUDDOCE		
o	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	n, TX, officeholder living expense
		campaign ev	ent expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
Г	Date	Payee name	
	04/14/2025	ebay.com	
Н	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.28	2145 Hamilton Ave.	
	+33.E0		
		San Jose, CA 95125	
_	DUDDOOF		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE		n, TX, officeholder living expense
		campaign ev	ent expense
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	04/14/2025	ebay.com	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.28	2145 Hamilton Ave.	
		San Jose, CA 95125	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel	outside of Texas. Complete Schedule T.
	EXPENDITURE	Livelit Expense	a, TX, officeholder living expense
		campaign ev	ent expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 36/36 Rpt: 39/39	Ramirez, Jose A. (The Honorable) 00083777
4	Date	5 Payee name
	04/14/2025	ebay.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$44.52	2145 Hamilton Ave.
		San Jose, CA 95125
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign event expense
		campaign event expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	01/10/2025	ebay.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.76	2145 Hamilton Ave.
		San Jose, CA 95125
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense office supplies
		onice supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH		
Dete Development		
	Date	Payee name
	06/09/2025	ebay.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.77	2145 Hamilton Ave.
		San Jose, CA 95125
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Event Expense
	Complete ONLY if alice -	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held