CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to con	nplete this form.	1 Filer ID (Ethics Commiss 00035579	ion Filers)	2 Total pages filed: 33
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Roberto D.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2025
	Bobby	Guerra		301117	
4 CANDIDATE /	· ·		V.	710,0005	Date Hand-delivered or Date Postmarked
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; A 10213 N. 10th St.	PI/SUITE#; CII	Υ;	ZIP CODE	Date natio-delivered of Date Postmarked
MAILING ADDRESS					Receipt # Amount
l <u> </u>	Ste B				
Change of Address	McAllen, TX 78504				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER	Mrs.	Olga C.		••••	
NAME		Oiga Oi			
	NICKNAME	LAST		SUFFIX	
		Gabriel			
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	APT	/ SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	4512 N. 4th Street				
(Residence or Business)	McAllen, TX 78504				
7 CAMPAICN	AREA CODE PH	IONE NUMBER	VIENCIONI		
7 CAMPAIGN TREASURER	(956) 207-5125	ONE NUMBER E	EXTENSION		
PHONE	(950) 207-5125				
8 REPORT					
TYPE	January 15	30th day before	e election F	Runoff	15th day after campaign treasurer
					appointment (officeholder only)
	X July 15	8th day before		Exceeded modified eporting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Yea	ar		Month Day	Year
COVERED	01/01/2025		IROUGH	06/30/2025	
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month Day Yea	ar XP	rimary	Runoff	Other
	03/03/2026	∏g	eneral	Special	
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)
	State Representative D	istrict 41 Hidalgo		State Representa	ative District 41
	1				
		GO T	O PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 33

13 C / OH NAME	Guerra, Roberto D. (he Honorable)	14 Filer ID 00035579	(Ethics Commission Filers)						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political ex These expenditures may have been made of officeholders are required to report this info	without the candidate's or office	eholder's knowledge or						
Additional Pages	— COMMITTEE TYPE COMMITTEE NAME									
ш°	GENERAL									
		COMMITTEE ADDRESS								
	SPECIFIC									
		COMMITTEE CAMPAIGN TREASURER N	NAME							
		COMMITTEE CAMPAIGN TREASURER A	ADDRESS							
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHE ES OF LOANS, OR CONTRIBUTIONS MAI		\$ 0.00						
		AL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF	LOANS)	\$ 0.00						
EXPENDITURE TOTALS	\$ 3,126.44									
	\$ 65,834.51									
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$ 6,373.10						
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOATING PERIOD	ANS AS OF THE LAST DAY	\$ 0.00						
17 AFFIDAVIT			r penalty of perjury, that the acc cludes all information required t Code.							
		The	Honorable Roberto D. Gue	rra						
		Sign	ature of Candidate or Officehol	der						
AFFIX NO	TARY STAMP / SEAL ABO	DVE								
Sworn to and subs	cribed before me, by the s	aid	, this the	day						
		rtify which, witness my hand and seal of of								
Signature of offi	Signature of officer administering Printed name of officer administering Title of officer administering oath									

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			CC	OVER SHEET PG 3 3 of 33
	ILER NA Guerra,	(Ethics Commission Filers)		
	SCHEDU NAME O	SUBTOTAL AMOUNT		
1	. 🔲	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
2	ı. 🗆	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3	s. 🔲	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4	i. 🔲	SCHEDULE E: LOANS		\$
5	i. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 54,704.83
6	i. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 1,500.00
7	. <u> </u>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8	s. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 9,629.68
ç). <u> </u>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
1	.0.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
1	.1.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
1	.2. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 29,627.61

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	
1	Total pages Schedule F1:	1
-	Sch: 1/16 Rpt: 4/33	Guerra, Roberto D. (The Honorable) 00035579
4	Date	5 Payee name
	03/20/2025	Affordable Art & Frame
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.00	1701 W. Dove Ave
		Ste E
		McAllen, TX 78504
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Nedra Kinerk - resolution framework
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/04/2025	Appleton, Lovette (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,895.00	1394 N. Loop Drive
		San Jose, CA 95126
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Rent - Legislative Session Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		January rent - Austin rental during session
		bandary tent. Addititental during 30331011
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/28/2025	Appleton, Lovette (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,450.00	1394 N. Loop Drive
	Ψο, 100.00	100 TH 200p Billio
		San Jose, CA 95126
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Rent - Legislative Session Check if travel outside of Texas. Complete Schedule T.
	-	X Check if Austin, TX, officeholder living expenseFebruary rent & move out fee - Austin rental during
		session
	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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		<u> </u>
1	Total pages Schedule F1: Sch: 2/16 Rpt: 5/33	2 FILER NAME3 Filer ID(Ethics Commission Filers)Guerra, Roberto D. (The Honorable)00035579
4	Date	5 Payee name
	04/04/2025	Carcamo, Ericka (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$130.00	2513 Quick Fort Dr
		Loandar TV 79641
		Leander, TX 78641
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	cleaning service for rental - Legislative
		Session X Check if Austin, TX, officeholder living expense
		house cleaning expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/17/2025	Carcamo, Ericka (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$130.00	2513 Quick Fort Dr
		Leander, TX 78641
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	cleaning service for rental - Legislative
	LAI LIIDITORE	Session X Check if Austin, TX, officeholder living expense
		house cleaning expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/01/2025	Carcamo, Ericka (Ms.)
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$130.00	2513 Quick Fort Dr
		Leander, TX 78641
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	cleaning service for rental - Legislative
	EXPENDITURE	Session X Check if Austin, TX, officeholder living expense
		house cleaning expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
<u> </u>		

SCHEDULE F1

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

	Contributions/ Donations Made By 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: 3/16 Rpt: 6/33	Guerra, Roberto D. (The Honorable) 00035579	
4	Date	5 Payee name	_
	05/15/2025	Carcamo, Ericka (Ms.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$130.00	456 That Way	
		Austin, TX 78701	
8	PURPOSE		
0	OF	(a) Category (See Categories listed at the top of this schedule) cleaning service for rental - Legislative (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Session X Check if Austin, TX, officeholder living expense	
		house cleaning expense	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	06/06/2025	Carcamo, Ericka (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$130.00	2513 Quick Fort Dr	
		Leander, TX 78641	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) cleaning service for rental - Legislative (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Session X Check if Austin, TX, officeholder living expense	
		house cleaning expense	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiditure to beriefit C/Oi		
	Date	Payee name	
	02/04/2025	Carrera, Christian (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$812.00	2627 McCormack Drive	
		Edinburg, TX 78542	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
		Check if Austin, TX, officeholder living expense	
		salary supplement	
	Complete ONII V if direct	Condidate/Officeholder name Office county	
	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 -

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: 4/16 Rpt: 7/33	Guerra, Roberto D. (The Honorable) 00035579
4	Date	5 Payee name
	03/10/2025	Carrera, Christian (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	2627 McCormack Drive
		Edinburg, TX 78542
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		salary supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	03/20/2025	Carrera, Christian (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,083.60	2627 McCormack Drive
		Edinburg, TX 78542
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense
		Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/20/2025	Carrera, Christian (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2627 McCormack Drive
	Ψ000.00	ZOZI MICCOMILLON BING
		Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		salary supplement
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
		·

SCHEDULE F1

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

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	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: 5/16 Rpt: 8/33	Guerra, Roberto D. (The Honorable) 00035579
4 Date	5 Payee name
05/09/2025	Carrera, Christian (Mr.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	2627 McCormack Drive
	Edinburg, TX 78542
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	salary supplement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ere.	
Date	Payee name
05/09/2025	Carrera, Christian (Mr.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,419.60	2627 McCormack Drive
	Edinburg, TX 78542
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Transportation Equipment And Related Fxpense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Expense
	mileage remination.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	
Date	Payee name
05/16/2025	Carrera, Christian (Mr.)
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	2627 McCormack Drive
	Edinburg, TX 78542
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	salary supplement
Commission ONUNCY !!	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T-4-1		_
1	Total pages Schedule F1: Sch: 6/16 Rpt: 9/33	2 FILER NAME Guerra, Roberto D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00035579	
4			_
4	Date	5 Payee name	
L	06/12/2025	Carrera, Christian (Mr.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	2627 McCormack Drive	
		Edinburg, TX 78542	
_	DUDDOCE		_
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		salary supplement	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	expenditure to benefit C/OI		
			_
	Date	Payee name	
	05/16/2025	Chiarello, Stephanie (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	11904 Snow Goose Road	
	·		
		Austin, TX 78758	
_	DUBE CO-		_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor	
		salary supplement	
		Salary Supplement	
\vdash	Complete ONII V if alias -t	Condidate/Officeholder name Office cought	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_
	Date	Payee name	
	05/21/2025	Industrial Awards	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$69.00	60 Saint Mark Road	
		Taylors, SC 29687	
	DUDD05-		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel systems of Tayon Complete Schedule T	
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		reimburse Rep. Eddie Morales - officeholder	
		committee gift	
L	Complete ONII V if alias -t	Condidate/Officeholder name Office cought	_
	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 -

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: 7/16 Rpt: 10/33	Guerra, Roberto D. (The Honorable) 00035579
4	Date	5 Payee name
	01/27/2025	Kendrick, Christi (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,100.00	2513 Quick Fort Dr
		Leander, TX 78641
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Deposit - Legislative Session Check if travel outside of Texas. Complete Schedule T. Check if Avertin TV officeholder living greeners
		\times \text{Check if Austin, TX, officeholder living expense} \text{Security deposit & pet deposit - Austin rental}
		Socially deposit a per deposit Triadili Territar
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialture to beliefit C/OI	'
	Date	Payee name
	01/27/2025	Kendrick, Christi (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	2513 Quick Fort Dr
		Leander, TX 78641
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Rent - Legislative Session Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		\[\times
		pro rated form 7 hastin remail during essenting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/04/2025	Kendrick, Christi (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,200.00	2513 Quick Fort Dr
	Ψ1,200.00	2010 Quick Fort Di
		Leander, TX 78641
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Deposit - Legislative Session
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		remainder of security deposit - Austin rental during session
	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: 8/16 Rpt: 11/33	Guerra, Roberto D. (The Honorable) 000355	79
4	Date	5 Payee name	
	02/13/2025	Kendrick, Christi (Ms.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,571.83	2513 Quick Fort Dr	
		Leander, TX 78641	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Rent - Legislative Session Check if travel outside of Texas. Check if Austin, TX, officeholder	
		1 -	Austin rental during session
		pro rateur estaday tent	Additive that during session
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	e held
	expenditure to benefit C/O		e neiu
	Date		
	Date	Payee name	
	03/01/2025	Kendrick, Christi (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,000.00	2513 Quick Fort Dr	
		Leander, TX 78641	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Rent - Legislative Session Check if travel outside of Texas.	
		X Check if Austin, TX, officeholder	
		March rent - Austin renta	li duffing session
_	Complete ONL V if direct	Condidate/Officeholder name Office cought Office	o hold
	Complete ONLY if direct expenditure to benefit C/OI	•	e held
	Date	Payee name	
	04/01/2025	Kendrick, Christi (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,000.00	2513 Quick Fort Dr	
		Leander, TX 78641	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Rent - Legislative Session	•
	LAFENDITORE	X Check if Austin, TX, officeholder	
		April rent - Austin rental of	during session
	Complete ONLY if direct expenditure to benefit C/O	•	e held
	experiulture to benefit C/Oi)	

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 Comm

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

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

	Candidate/Officeholder/Politica			Legal Services		g Exper es/Wage	es/Contract Labor		OTHER (enter a	strict a category not listed a	above)
	Credit Card Payment			The Instruction Gu	iide explains how to	comp	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 9/16 Rpt: 12/33		Guerra, Rob	erto D. (The Ho	onorable)				00035579		
4	Date	5	Payee name					·			
	05/01/2025		Kendrick, Cl	nristi (Ms.)							
6	Amount (\$)	7	Payee addres		State; Zip	Code					
Ĭ	\$4,000.00	ľ	2513 Quick		Otato, 2.p	Oodo					
	Ψ-1,000.00		2010 Quion	i oit bi							
			Lagraday TV	7.70044							
			Leander, TX	. 78641							
8	PURPOSE OF	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(b)	Description				
	EXPENDITURE		Rent - Legis	lative Session			=		ide of Texas. Com , officeholder livin	plete Schedule T.	
							X Check if Austin				
										g 5555.5	
9	Complete ONLY if direct	<u> </u>		ceholder name	Office s	ought			Office h	old.	
9	expenditure to benefit C/OI		Sandidate/Onit	ceriolider riairie	Office s	ougin	•		Office II	GIU	
		_									
	Date		Payee name								
	06/01/2025		Kendrick, Cl	nristi (Ms.)							
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code					
	\$1,066.67		2513 Quick	Fort Dr							
			Leander, TX	78641							
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE			lative Session			=			plete Schedule T.	
	EXI ENDITORE						—		, officeholder living		
							pro-rated Jun	ie r	ent - Austin	rental during	session
	Operation ONE V # discort	L	2 11 - 1 - 4 - 10#1		0#:				O#: I-	-1-1	
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	Office s	ougnt	1		Office h	eia	
	·	_									
	Date		Payee name								
	03/20/2025		Lehr, Oliver	(Mr.)							
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code					
	\$50.00		2848 Colling	gwood Drive							
			Round Rock	k, TX 78665							
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE			ges/Contract La				outsi	ide of Texas. Con	plete Schedule T.	
	EXPENDITURE								, officeholder living		
							contract labor	r - ı	moving serv	rice	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Office s	ought			Office h	eld	
	experialitate to beliefft C/OI										

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 Exp Legal Services	Salaries/	Wages	s/Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed	above)
			The Instruction Guide	e explains now to co	ompie	ete this form.				
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 10/16 Rpt: 13/33	Guerra, Ro	berto D. (The Hono	orable)				00035579		
4	Date	5 Payee name								
	05/16/2025	Lehr, Olive	r (Mr.)							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode					
	\$250.00	2848 Collin	gwood Drive							
		Round Roo	k, TX 78665							
8	PURPOSE	(a) Category (s	iee Categories listed at the to	on of this schedule)	(b)	Description				
	OF		ages/Contract Labo		` `		outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE		3			Check if Austin,	TX,	officeholder living	g expense	
						salary supple	me	nt		
9	Complete ONLY if direct		iceholder name	Office so	ught			Office h	eld	
	expenditure to benefit C/OI	4								
	Date	Payee name	!							
	01/16/2025	Linn-San M	lanuel VFP							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode					
	\$250.00	21661 Tx-1	.86							
		Edinburg 3	TV 70E 42							
		Edinburg, 7	X 7854Z							
	PURPOSE OF	(a) Category (S	see Categories listed at the to	pp of this schedule)	(b)	Description				
	EXPENDITURE		ns/Donations Made	,					nplete Schedule T.	
		Candidate/	Officeholder/Politica	ai Committee		donation for fu		officeholder living	y expense	
						donation for it	unc	ıraisci		
_	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	ught			Office h	old	
	expenditure to benefit C/OI		icendidei name	Office Soi	ugnt			Office II	ciu	
	·									
	Date	Payee name								
	01/03/2025	Lone Star N	National Bank							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode					
	\$4,056.21	1505 S. Lo	ne Star Way							
		Edinburg, 7	TX 78539							
	PURPOSE	(a) Category 19	see Categories listed at the to	on of this schedule)	(b)	Description				
	OF	Credit Card		op or ano conceancy	` `		outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE					Check if Austin,	TX,	officeholder living	g expense	
						monthly credit	t ca	ard paymen	t	
					L					
	Complete ONLY if direct		iceholder name	Office so	ught			Office h	eld	
	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 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: 11/16 Rpt: 14/33	Guerra, Roberto D. (The Honorable) 00035579							
4	Date 02/03/2025	5 Payee name Lone Star National Bank							
6	Amount (\$) \$1,793.53	7 Payee address; City; State; Zip Code 1505 S. Lone Star Way							
8	PURPOSE OF EXPENDITURE	Edinburg, TX 78539 (a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense monthly credit card payment							
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held							
	Date 03/03/2025	Payee name Lone Star National Bank							
	Amount (\$) \$1,616.29	Payee address; City; State; Zip Code 1505 S. Lone Star Way							
		Edinburg, TX 78539							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense monthly credit card payment							
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held							
	Date 04/03/2025	Payee name Lone Star National Bank							
	Amount (\$) \$1,018.75	Payee address; City; State; Zip Code 1505 S. Lone Star Way							
		Edinburg, TX 78539							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense monthly credit card payment							
	Complete ONLY if direct expenditure to benefit C/Ol	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 -

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: 12/16 Rpt: 15/33	Guerra, Roberto D. (The Honorable) 00035579						
4	Date	5 Payee name						
	05/05/2025	Lone Star National Bank						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$2,243.09	1505 S. Lone Star Way						
		Edinburg, TX 78539						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense monthly credit card payment						
		monthly death data payment						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
\vdash	Date	Payee name						
	06/03/2025	Lone Star National Bank						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,374.46	1505 S. Lone Star Way						
	Ψ1,014.40	41,014.40 1 1000 S. Lone Star Way						
		Edinburg, TX 78539						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense monthly credit card payment						
		monthly create early payment						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
_	Date	Payee name						
	03/20/2025	Mehta, Karan (Mr.)						
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 8701 Bluffstone Cove #8207						
	φ50.00	6701 Biulistoffe Cove #6207						
		Austin, TX 78759						
	DUDDOOF	I						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		contract labor - moving service						
	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)

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

	Credit Card Payment The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:								
	Sch: 13/16 Rpt: 16/33	Guerra, Roberto D. (The Honorable) 00035579							
4	Date	5 Payee name							
	05/16/2025	Mehta, Karan (Mr.)							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$500.00	8701 Bluffstone Cove							
		#8207							
		Austin, TX 78759							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Salaries/Wages/Contract Labor							
	LAPENDITORE	Check if Austin, TX, officeholder living expense							
		salary supplement							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
9	expenditure to benefit C/OI								
F	Date	Payee name							
	05/16/2025	Ovalle, Laela (Ms.)							
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 501 S. 14th Street							
	\$250.00	501 S. 14til Street							
		D TV 70707							
		Donna, TX 78537							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		salary supplement							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	1							
	Date	Payee name							
	01/16/2025	Perez, Dahlia (Ms.)							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$850.00	1220 Northpoint Dr							
		Apt A							
		Pharr, TX 78577							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		contract labor for campaign services - TEC report							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Emportant to bonont 0/01								

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: Sch: 14/16 Rpt: 17/33	2 FILER NAME Guerra, Roberto D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00035579
4	Date 05/09/2025	5 Payee name Perez, Dahlia (Ms.)
6	Amount (\$) \$850.00	7 Payee address; City; State; Zip Code 1220 Northpoint Dr Apt A Pharr, TX 78577
8	PURPOSE OF EXPENDITURE	(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. Check if Austin, TX, officeholder living expense contract labor for campaign services - TEC report
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 05/16/2025	Payee name Perez, Dahlia (Ms.)
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 1220 Northpoint Dr Apt A Pharr, TX 78577
	PURPOSE OF EXPENDITURE	(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. Check if Austin, TX, officeholder living expense Salary Supplement
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 03/20/2025	Payee name Silva, Arnold (Mr.)
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 721 W. Sprague
		Edinburg, TX 78539
	PURPOSE OF EXPENDITURE	(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. Check if Austin, TX, officeholder living expense contract labor - moving Services
	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: 15/16 Rpt: 18/33	Guerra, Roberto D. (The Honorable) 00035579								
4	Date	5 Payee name								
	05/16/2025	TDCJ								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$259.80	P.O. Box 4013								
		Huntsville, TX 77342								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		end of session gifts for staff								
Ļ	0 1: 0 1: 0									
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	01/16/2025	Uribe, Mary (Ms.)								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$850.00	3513 Gull Ave								
		McAllen, TX 78501								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense contract labor for campaign services - TEC report								
		Solitate tassi isi salimpangi. selimbas i 20 ispert								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI									
	Date	Payee name								
	04/05/2025	Uribe, Mary (Ms.)								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,500.00	3513 Gull Ave								
	Ψ1,000.00									
		McAllen, TX 78501								
	DUDDOCE									
	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 for campaign services - quarterly								
		bookkeeping								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI	<u> </u>								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comr		Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense mmittee Legal Services Salaries/Wages/Contract Labor			ense ense	Travel in District Travel Out of District				
	Credit Card Payment			The Instructi	on Guide explains	how to com	plete this form.				
1	Total pages Schedule F1: Sch: 16/16 Rpt: 19/33	2			ne Honorable)			3	Filer ID 00035579	(Ethics Commission Filer	s)
4	Date	5	Payee name								
	05/09/2025		Uribe, Mar								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Cod	е				
l	\$850.00		3513 Gull A	Ave							
l											
			McAllen, T			1.					
8	PURPOSE OF	(a)			ted at the top of this sch	edule) (b) Description				
l	EXPENDITURE		Salaries/W	ages/Contra	act Labor					nplete Schedule T.	
l									, officeholder livin	services - TEC repor	.
l							Contract las)OI 10	n campaign	services - TEC repor	·
_											
9	Complete ONLY if direct expenditure to benefit C/O	н ⁽	Candidate/Of	ficeholder nar	ne C	Office soug	ht		Office h	eld	
l											
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UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 20/33 Guerra, Roberto D. (The Honorable) 00035579 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/01/2025 Uribe, Mary (Ms.) Amount (\$) Payee address; City; State; Zip Code \$1,500.00 3513 Gull Ave McAllen, TX 78501 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense contract labor for campaign services - quarterly bookeeping for April thru June Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)		
	Sch: 1/10 Rpt: 21/33	Guerra, Roberto D.	(The Honorable)			00035579				
4	CREDIT CARD	Name of final	ncial institution		5 TOTAL OF UNITEMIZED		a 2.020 4			
	ISSUER	Lone Star N	lational Bank		IDITURES SED TO A CREDIT	\$	3,026.4	+4		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid				
		\$155.86	05/07/2025							
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
		Twin Liquors		1000 E 4	1st Street					
		I WIII LIQUOIS		Suite 810						
				Austin, T						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip						
	Food/Beverage Expense				drinks					
	x Political									
L	Non-Political	(8)				officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid				
		\$69.51	01/24/2025	03/03/20	125					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
		Slack	500 How	ard Street						
		Sidek								
L	DUDDOS 05	(a) Cataman			ncisco, TX 94105					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description communication tool						
		Office Overhead/Rent	tal Expense	Communication tool						
	X Political Non-Political				_					
L		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense			
۵	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeriolder	name Onice	e Sougrit		Office field				
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid				
	FATMENT			04/03/20		raid				
		\$55.97	02/24/2025							
\vdash	PAYEE	(a) Payee name	<u>I</u>	(b) Payee	address;	City,	State,	Zip Code		
				500 How	ard Street					
		Slack								
				San Fran	ncisco, TX 94105					
	PURPOSE OF	(a) Category	of this cohod: 1-1	(b) Descri						
Ī	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			communication tool						
	X Political		I							
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
е	xpenditure to benefit C/OH									
l										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Carididate	e/Officeriolaer/Folitica		ruction Guide explains how	•	TILK (elitel a categor	r not listed at	bove)		
1 Total page:	Schedule F4:	2 FILER NAME	·	·	3 Filer ID (Ethic	s Commis	sion Filers)		
	Rpt: 22/33	Guerra, Roberto D.	(The Honorable)		00035579		,		
4 CREDIT CA	•	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,026.4	14		
6 PAYMENT		(a) Amount Charged \$55.97	(b) Date of Charge 03/24/2025	(c) Date(s) Credit Card Issuer 05/03/2025	r Paid				
7 PAYEE		(a) Payee name Slack		(b) Payee address; 500 Howard Street	City,	State,	Zip Code		
8 PURPOSE EXPENDIT	URE	(a) Category (See Categories listed at the top Office Overhead/Rent	San Francisco, TX 94105 (b) Description communication tool						
Non-F	Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense			
9 Complete (ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to	benefit C/OH								
PAYMENT		(a) Amount Charged \$55.97	(b) Date of Charge 05/24/2025	(c) Date(s) Credit Card Issuer Paid					
PAYEE		(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
		Slack		500 Howard Street					
				San Francisco, TX 94105 (b) Description					
PURPOSE EXPENDIT	URE	(a) Category (See Categories listed at the top Office Overhead/Reni							
Non-F	Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense			
	ONLY if direct benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT		(a) Amount Charged \$21.15	(b) Date of Charge 02/04/2025	(c) Date(s) Credit Card Issuel 03/03/2025	r Paid				
PAYEE		(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
		Hill Country Springs	S	10019 S I-35 Frontage Rd	i				
		() 0 :		Austin, TX 78747					
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		•	(b) Description drinking water service					
ı =	Political	(a) Chook if traval as to id-	of Toyon, Complete Cahadula T	Cheat if Austin TV	officeholder living				
		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	Office held	ense			
•	ONLY if direct benefit C/OH	Candidate/Officeriolder	name Office	o sougrit	Office Held				
Ī									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)				
Sch: 3/10 Rpt: 23/33	Guerra, Roberto D.	(The Honorable)			00035579						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES \$ 3,026.44 CHARGED TO A CREDIT CARD								
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid						
	\$82.65	05/02/2025	06/03/20	25							
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code				
	Hill Country Springs	S	10019 S	d							
			Austin, T								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip								
X Political	Food/Beverage Expe	drinking water service									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living ex	pense					
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held						
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid						
	\$155.86	05/21/2025									
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code				
	Toda Carrana		1000 E 4	1st Street							
	Twin Liquors		Suite 810								
			Austin, TX 78751								
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description								
l <u> </u>	Food/Beverage Expe		food and drinks								
X Political											
Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	pense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	fice sought Office held								
expenditure to benefit C/OH		L (1) D (1) (1)	1() 5 (()	0 1:0 11	D : 1						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid						
	\$108.00	05/29/2025									
PAYEE	(a) Payee name	l .	(b) Payee	address;	City,	State,	Zip Code				
			1000 E 4	1st Street							
	Twin Liquors		Suite 810)							
			Austin, T	X 78751							
PURPOSE OF	(a) Category		(b) Descrip								
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial		gift for sta	aff							
X Political	2.107 Waldo/Wollional										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living ex	pense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held						
expenditure to benefit C/OH											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

		The Insti	ruction Guide explains how	to complete	this form.	(,	,		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)		
	Sch: 4/10 Rpt: 24/33	Guerra, Roberto D.	(The Honorable)			00035579				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	3,026.4	14		
6	PAYMENT	(a) Amount Charged \$55.97	(b) Date of Charge 04/24/2025	(c) Date(s) 06/03/20) Credit Card Issue 25	er Paid				
7	PAYEE	(a) Payee name Slack			address; ard Street ncisco, TX 94105	City,	State,	Zip Code		
8	PURPOSE OF	(a) Category		(b) Descrip		,				
	EXPENDITURE X Political	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	sought		Office held				
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$55.97	(b) Date of Charge 06/24/2025	(c) Date(s)) Credit Card Issue	er Paid				
PAYEE		(a) Payee name		(b) Payee	address:	City,	State,	Zip Code		
	Slack			500 Howard Street						
				San Fran	ncisco, TX 94105	5				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	sought		Office held				
	PAYMENT	(a) Amount Charged \$8.66	(b) Date of Charge 01/02/2025	(c) Date(s) 02/03/20) Credit Card Issue 25	er Paid				
	PAYEE	(a) Payee name Hill Country Springs		(b) Payee 10019 S Austin, T	I-35 Frontage R	City, d	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip drinking	otion water service					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	sought		Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)		
Sch: 5/10 Rpt: 25/33	Guerra, Roberto D.	(The Honorable)			00035579				
4 CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED	4	3,026.4	1.4		
ISSUER	see pi	revious		DITURES ED TO A CREDIT	\$	3,020.2	+4		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid				
	\$108.64	03/04/2025	04/03/202	25					
7 PAYEE	(a) Payee name		(b) Payee a	State,	Zip Code				
	Hill Country Springs	5	10019 S I	-35 Frontage Rd	l				
	Austin, T								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip						
X Political	(See Categories listed at the top of this schedule) Food/Beverage Expense drinking water service								
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX				officeholder living expe	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 05/03/202	Credit Card Issuer	Paid				
	\$49.65	04/02/2025	05/03/202	25					
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code		
	Hill Country Springs	Hill Country Springs			l				
	Tim Country Opinings	,	Austin, T	K 78747					
PURPOSE OF	(a) Category		(b) Descrip						
EXPENDITURE	(See Categories listed at the top		drinking water service						
X Political	Food/Beverage Expe	iise							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	name Office	fice sought Office held						
expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Data(c)	Credit Card Issuer	. Daid				
PATWENT		` '	(c) Date(s)	Credit Card Issuer	raiu				
	\$58.65	06/03/2025							
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code		
			10019 S I	-35 Frontage Rd	I				
	Hill Country Springs	5							
			Austin, TX 78747						
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description						
EXPENDITURE	Food/Beverage Exper		drinking w	vater service					
X Political									
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	[Check if Austin, TX,	officeholder living expe	ense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)						
Sch: 6/10 Rpt: 26/33	Guerra, Roberto D.			00035579						
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$ 3,026.44		14			
6 PAYMENT	(a) Amount Charged \$274.49	(b) Date of Charge 03/25/2025	(c) Date(s) 0 05/03/2029	Credit Card Issuer 5	Paid					
7 PAYEE	(a) Payee name Kome Suishi Kitche	en	(b) Payee ac 5301 Airpo	ort Blvd.	City,	State,	Zip Code			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descripti meal - staf	on						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
PAYMENT	(a) Amount Charged \$256.51	(b) Date of Charge 04/24/2025	(c) Date(s) 0 06/03/2029	Credit Card Issuer 5	Paid					
PAYEE	(a) Payee name Kome Suishi Kitche	en	(b) Payee ac 5301 Airpo Austin, TX	ort Blvd.	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descripti meal - staf							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	X, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
PAYMENT	(a) Amount Charged \$42.48	(b) Date of Charge 04/02/2025	(c) Date(s) 0 05/03/2029	Credit Card Issuer 5	Paid					
PAYEE	(a) Payee name Quality Seafood Ma	arket	(b) Payee ac 5621 Airpo Austin, TX	ort Drive	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	*	(b) Descripti meal - staf							
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.				
1	Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)				
	Sch: 7/10 Rpt: 27/33	Guerra, Roberto D.	(The Honorable)			00035579			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$ 3,026.		14	
6	PAYMENT	(a) Amount Charged \$502.51	(b) Date of Charge 06/02/2025	(c) Date(s)	Credit Card Issue	r Paid			
7	PAYEE	(a) Payee name Eddie V's		(b) Payee 301 E 5th Austin, T	n Street	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Descrip					
L	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$1,030.00	(b) Date of Charge 03/11/2025	(c) Date(s) 05/03/20	Credit Card Issue 25	r Paid			
	PAYEE	(a) Payee name Legislative Study G	roup	(b) Payee P.O. Box Austin, T.	12943	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descrip	otion				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	K, officeholder living expense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 02/18/2025	(c) Date(s) 04/03/20	Credit Card Issue 25	r Paid			
	PAYEE	(a) Payee name	1	(b) Payee 1100 Cor Austin, T	ngress Ave	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	,	(b) Descrip members	otion Ship dues				
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
1									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	s form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
Sch: 8/10 Rpt: 28/33	Guerra, Roberto D.	(The Honorable)			00035579			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES \$ 3,02 CHARGED TO A CREDIT CARD			3,026.4	5.44	
6 PAYMENT	(a) Amount Charged \$750.00	(b) Date of Charge 01/31/2025	(c) Date(s) C 03/03/2025	credit Card Issuer 5	r Paid			
7 PAYEE	(a) Payee name Mexican American	Legislative	(b) Payee ac 202 W. 13t Austin, TX	h Street	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			
PAYMENT	(a) Amount Charged \$318.36	(b) Date of Charge 05/02/2025	(c) Date(s) C 06/03/2025	credit Card Issuer	r Paid			
PAYEE	(a) Payee name		(b) Payee ac 1205 N Lar Austin, TX	mar	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description meal - staff meeting			on				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	_	Office held			
PAYMENT	(a) Amount Charged \$386.82	(b) Date of Charge 05/21/2025	(c) Date(s) C	credit Card Issuer	r Paid			
PAYEE	(a) Payee name		(b) Payee ac 1205 N Lar Austin, TX	mar	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	,	(b) Description meal - staff					
Non-Political Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	e sought	Check if Austin, TX,	officeholder living exp	ense		
	-							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
	Sch: 9/10 Rpt: 29/33	Guerra, Roberto D. (The Honorable)			00035579					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,026.4	14			
6	PAYMENT	(a) Amount Charged \$11.67	(b) Date of Charge 04/02/2025	(c) Date(s) Credit Card Issue 05/03/2025	r Paid					
7	PAYEE	(a) Payee name Quality Seafood Ma	arket	(b) Payee address; 5621 Airport Drive	City,	State,	Zip Code			
Ļ		(-) O-t		Austin, TX 78751						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description meal - staff meeting						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$204.24	(b) Date of Charge 04/02/2025	(c) Date(s) Credit Card Issue 05/03/2025	r Paid					
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
		Quality Seafood Ma	arket	5621 Airport Drive						
				Austin, TX 78751						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description meal - staff meeting						
	Non-Political	<u> </u>		<u> </u>						
⊢	Ш	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	office held	ense				
е	Complete ONLY if direct xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$481.01	(b) Date of Charge 06/27/2025	(c) Date(s) Credit Card Issue	r Paid					
	PAYEE	(a) Payee name Bass Pro Shops		(b) Payee address; 101 Bass Pro Drive Harlingen, TX 78552	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	*	(b) Description officeholder committee gi	ft					
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living exp	ense				
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 10/10 Rpt: 30/33	Guerra, Roberto D.	(The Honorable)		00035579			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,026.4	14	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$255.43	05/23/2025					
7 PAYEE	(a) Payee name Gusto Italian Kitche	en	(b) Payee address; 4800 Burnet Rd Ste A-100	City,	State,	Zip Code	
			Austin, TX 78756				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this colored (Is)	(b) Description				
EXPENDITURE	Food/Beverage Expe		meal - staff meeting				
X Political							
Non-Political	(1)	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$352.25	05/19/2025					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Mi Tradicion		801 E William Cannon Dr Suite 125 Austin, TX 78745				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description thank you gift for support s	staff			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Office held			
expenditure to benefit C/OH			· ·				
PAYMENT	(a) Amount Charged \$138.99	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer 03/03/2025	Paid			
PAYEE	(a) Payee name Twin Liquors	ı	(b) Payee address; 1000 E 41st Street Suite 810 Austin, TX 78751	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Description food and drinks				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: ./3 Rpt: 31/33	
2	FILER NAME		3	Filer ID	(Ethics Commission	on Filers)
	Guerra, Rob	erto D. (The Honorable)		00035	5579	
4	Date 02/05/2025	 Name of person from whom amount is received Appleton, Lovette (Ms.) Address of person from whom amount is received; City; State; Zip Code 			8 Amount (\$)	\$3,700.00
		San Jose, CA 95126				
		7 Purpose for which amount is received	olitic	al conti	ribution returned to fil	er
	Date	Name of person from whom amount is received			Amount (\$)	
	05/25/2025	Cain, Briscoe (Rep.)				\$82.00
		Address of person from whom amount is received; City; State; Zip Code Deer Park, TX 77536				
		Purpose for which amount is received Check if p	olitic	al conti	ribution returned to fil	er
		Reimbursement for officerholder committee gift				
	Date	Name of person from whom amount is received			Amount (\$)	
	02/06/2025	Guerra, Bobby (Rep.)				\$3,584.65
		Address of person from whom amount is received; City; State; Zip Code				
		Mission, TX 78574				
			olitic	al conti	ribution returned to fil	er
		rent reimbursement - Austin rental during session				
	Date	Name of person from whom amount is received			Amount (\$)	
	03/03/2025	Guerra, Bobby (Rep.)				\$5,182.80
		Address of person from whom amount is received; City; State; Zip Code Mission, TX 78574				
					<u> </u>	
		Purpose for which amount is received Check if p rent reimbursement - Austin rental during session	olitic	al conti	ribution returned to fil	er
	Date	Name of person from whom amount is received			Amount (\$)	
	04/02/2025	Guerra, Bobby (Rep.)				\$5,715.53
		Address of person from whom amount is received; City; State; Zip Code				
		Mission, TX 78574				
		Purpose for which amount is received	olitic	al conti	ribution returned to fil	er

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 2/3 Rpt: 32/33	
2	FILER NAME		3	Filer II	O (Ethics Commission Filer	rs)
	Guerra, Rob	erto D. (The Honorable)		0003	5579	
4	Date 05/05/2025	 Name of person from whom amount is received Guerra, Bobby (Rep.) Address of person from whom amount is received; City; State; Zip Code 			8 Amount (\$) \$5,53	7.96
		Mission, TX 78574				
		7 Purpose for which amount is received	oolitio	cal con	tribution returned to filer	
	Date	Name of person from whom amount is received			Amount (\$)	
	06/04/2025	Guerra, Bobby (Rep.)			\$1,19	6.67
		Address of person from whom amount is received; City; State; Zip Code Mission, TX 78574	•••••			
		Purpose for which amount is received Check if r	olitic	cal con	tribution returned to filer	
		rent reimbursement - Austin rental during session				
	Dete	-			Λ == 0.1104 (Φ)	
	Date 06/23/2025	Name of person from whom amount is received			Amount (\$)	0.00
	00/23/2023	Kendrick, Christi (Ms.)			\$4,00	0.00
		Address of person from whom amount is received; City; State; Zip Code Leander, TX 78641				
			olitic	cal con	tribution returned to filer	
		deposit refund - Austin rental				
	Date	Name of person from whom amount is received			Amount (\$)	
	06/23/2025	Kendrick, Christi (Ms.)			\$30	0.00
		Address of person from whom amount is received; City; State; Zip Code	••••••			
		Leander, TX 78641				
			olitic	cal con	tribution returned to filer	
		pet deposit refund - Austin rental				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/24/2025	Kitzman, Stan (Rep.)			\$8	2.00
		Address of person from whom amount is received; City; State; Zip Code		•••••		
		Pattison, TX 77466				
			olitic	cal con	tribution returned to filer	
		Reimbursement for officerholder committee gift				
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INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 33/33 2 FILER NAME Filer ID (Ethics Commission Filers) Guerra, Roberto D. (The Honorable) 00035579 8 Amount (\$) Date 5 Name of person from whom amount is received 05/27/2025 Lopez, Janie (Rep.) \$82.00 6 Address of person from whom amount is received; City; State; Zip Code San Benito, TX 78586 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for officerholder committee gift Amount (\$) Date Name of person from whom amount is received 06/24/2025 McLaughlin Jr., Donald (Rep.) \$82.00 Address of person from whom amount is received; City; State; Zip Code Uvalde, TX 78802 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for officerholder committee gift Date Name of person from whom amount is received Amount (\$) 05/29/2025 Munoz Jr., Sergio (Rep.) \$82.00 Address of person from whom amount is received; City; State; Zip Code Mission, TX 78573 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for officerholder committee gift