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) 00081759 20 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Adolfo E. NAME Date Received **ELECTRONICALLY FILED** 07/09/2025 NICKNAME LAST **SUFFIX** Cordova Jr. CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE Date Hand-delivered or Date Postmarked **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** Manuel M. NAME NICKNAME LAST **SUFFIX** Manny Vela **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) 603-3743 **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 Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special

Willacy

11 OFFICE

OFFICE HELD (if any)

District Judge (Multi-county) District 197 Cameron &

12 OFFICE SOUGHT (if known)

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 20

13 C / OH NAME	Cordova Jr., Adolfo E	14 Filer ID (I	Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THANES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	6)	\$ 0.00
EXPENDITURE	3)	\$ 0.00		
TOTALS		0.00		
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 7,734.70
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 47,579.64
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		The Honora	ble Adolfo E. Cordova	a Jr.
		Signature of	Candidate or Officehold	der
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE		
Sworn to and subsc	cribed before me, by the s	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 officer	administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				3 of 20
18 FII	ER NAM	ΛΕ .	19 Filer ID	(Ethics Commission Filers)
Co	ordova 3	Jr., Adolfo E. (The Honorable)	00081759	
		E SUBTOTALS		SUBTOTAL AMOUNT
N/	ME OF	SCHEDULE		30513
1.	Х	\$ 0.		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.		\$		
5.	Х	\$ 1,223.		
6.		\$		
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 3,142.
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 3,368.
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit 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 Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	T. 1 0 1 1 54	
1	Total pages Schedule F1: Sch: 1/2 Rpt: 4/20	2 FILER NAME Cordova Jr., Adolfo E. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081759
4	Date	5 Payee name
	02/13/2025	Boy's & Girls Club of San Benito
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$260.00	410 N. Stookey Rd.
		San Benito , TX 78586
Ļ	DUDDOCE	1
8	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
		Donation for items for fundraiser fame.
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit of or	'
	Date	Payee name
	02/14/2025	Caballero, Veronica
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	546 W. Hidalgo Ave.
	7.5.55	
		Decreased tills TV 70500
		Raymondville, TX 78580
	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
		Reimbursement to Veronica for Denise's Probation retirement party meat expense.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantare to benefit Great	
	Date	Payee name
	04/30/2025	Cameron County Bar Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 3866
		Brownsville, TX 78523
	PURPOSE	I
	OF	
	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 for Cameron County Bar Gala
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Gu		Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER I	NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 2/2 Rpt: 5/20		/a Jr., Adolfo E. (The	Honorable)				00081759	,
4	Date	5 Payee	name						
	01/28/2025	Girls S	couts of South Texas	; 					
6	Amount (\$)	7 Payee	address; City;	State; Zip Co	ode				
	\$100.00	202 E.	Madison Ave.						
		Harling	gen, TX 77550						
8	PURPOSE OF		ry (See Categories listed at th		(b)	Description			
	EXPENDITURE		outions/Donations Ma					de of Texas. Com officeholder living	
		Candid	late/Officeholder/Poli	icai Committee		Donation	, 1,	, officerolaer living	expense
						Donation			
9	Complete ONLY if direct		e/Officeholder name	Office sou	l ught			Office he	eld
	expenditure to benefit C/O	1							
	Date	Payee i	name						
	02/28/2025	_	Chick Cookies						
	Amount (\$)		address; City;	State; Zip Co	nde				
	\$288.00	,	est Hicks Street	J, _,p J.					
	Ψ200.00	Unit 15							
		San Be	enito , TX 78586						
	PURPOSE OF		ry (See Categories listed at th	e top of this schedule)	(b)	Description			
	EXPENDITURE	Event	Expense					de of Texas. Com officeholder living	
						ш			Denise's Probation
						Retirement pa			Definise 3 1 Tobation
_	Complete ONLY if direct	Candidat	e/Officeholder name	Office sou	ıaht			Office he	ald.
	expenditure to benefit C/OI		e/Oniceriolaer Hame	Office 300	agrit			Office fic	iu.

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 (Ethi	cs Commis	sion Filers)
	Sch: 1/4 Rpt: 6/20	Cordova Jr., Adolfo	E. (The Honorable)			00081759		
4	CREDIT CARD ISSUER		ncial institution ase	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	Paid		
		\$440.39	05/30/2025					
7	PAYEE	(a) Payee name (b) Payee address; Bone Fish Grill (7801 West Irlo Brown)		st Irlo Bronson H	City, State, Zip Code son Hwy.			
Ļ		(a) Oatawa			ee , FL 34747			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description CLE -Youth Offender staff dinner				
	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	e sought		Office held		
e:	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$350.00	(b) Date of Charge 06/02/2025	(c) Date(s)	Credit Card Issuei	Paid		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Texas Center for the Judiciary			n Antonio, Suite 8	800		
L		(a) Oatawa		Austin, T				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Dues for the Judiciary				
	Non-Political	(a) D at 171 1 1 1 1	(T. 0 11 01 11 T			6 1 11 E:		
┝		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Garialdate/Officeriolaer	Tianic	_				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	Paid		
		\$75.00	01/25/2025					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Texas Center for th	e Judiciary	1210 Sar	n Antonio, Suite 8	300		
L				Austin, T				
	PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Descrip	otion the Judiciary			
	X Political	Fees			-			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	<u> </u>	Office held		
e	xpenditure 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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 2/4 Rpt: 7/20	Cordova Jr., Adolfo	E. (The Honorable)		00081759			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$59.74	01/16/2025					
7 PAYEE	(a) Payee name (b) Payee address; 1152 E. Ringgold Str			City, Sta	ate, Zip Code		
			Brownsville , TX 78520				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
Food/Beverage Expense			Breakfast Tacos for the Ju	ıry			
X Political							
				officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH	(a) A	(h) Data at Obania	(-) D-+-(-) O	. D.:Id			
PAYMENT	(a) Amount Charged \$456.00	(b) Date of Charge 04/30/2025	(c) Date(s) Credit Card Issuer	rPaid			
PAYEE	(a) Payee name		(b) Payee address;	City, Sta	ate, Zip Code		
	The Westin Irving Convention			d.			
			Irving , TX 75039				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description CLE Hotel Expense				
X Political	Continuing Legal Edu	cation					
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	e sought	Office held			
expenditure to benefit C/OH		-					
PAYMENT	(a) Amount Charged \$94.12	(b) Date of Charge 05/27/2025	(c) Date(s) Credit Card Issuer	r Paid			
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City, Sta	ate, Zip Code		
	DI	1	2001 S. 23rd Street				
	Bloomers Flower S	nop					
			Harlingen, TX 78550				
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description				
X Political	Gift/Awards/Memorial	•	Funeral Flowers				
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	·	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 Insti	ruction Guide explains how	to complete th	nis form.	(g-	.,	,	
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	3 Filer ID (Ethics Commission Filers)		
Sch: 3/4 Rpt: 8/20		E. (The Honorable)			00081759			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$263.00	05/09/2025						
7 PAYEE	(a) Payee name State Bar of Texas		(b) Payee a	ddress; orado Street	City,	State,	Zip Code	
			Austin, T					
8 PURPOSE OF	(a) Category	of this cohodula)	(b) Descript	ion				
EXPENDITURE (See Categories listed at the top of this schedule) Fees			CLE fees					
X Political								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin,				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	r Paid			
	\$151.55	05/21/2025						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
	Blackbird Floral		2124 E. 6th Street #103					
			Austin , T	X 78702				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE X Political	(See Categories listed at the top Gift/Awards/Memorial		Congratul	ations flower				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	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								
PAYMENT	(a) Amount Charged \$666.87	(b) Date of Charge 05/30/2025	(c) Date(s)	Credit Card Issuel	r Paid			
PAYEE	(a) Payee name	l	(b) Payee a	ddress;	City,	State,	Zip Code	
			6000 Wes	t Osceola Parkv	way			
	Gaylord Palms Res	sort						
			Kissimme	e, FL 34746				
PURPOSE OF	(a) Category	(b) Descript						
EXPENDITURE	(See Categories listed at the top	of this schedule)	CLE Hotel	l Expense				
X Political								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	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 t	his form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	3 Filer ID (Ethics Commission Filers)		
	Sch: 4/4 Rpt: 9/20	Cordova Jr., Adolfo	E. (The Honorable)			00081759			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid			
		\$397.80	06/04/2025						
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
		Budget Rent a Car		1 Jeff Fu	•				
Ļ		(-) O-t		Orlando,					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip					
	X Political	Continuing Legal Edu	cation	ricital Co	ar rees				
	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 Office	e sought		Office held			
е	xpenditure to benefit C/OH		T	T					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid			
		\$144.78	06/05/2025						
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
		TLF Palmer House	Florist	1327 N. F	Raynor Ave.				
				Joliet, IL	60435				
	PURPOSE OF	(a) Category		(b) Descrip					
	EXPENDITURE X Political	(See Categories listed at the top Gift/Awards/Memorial		Get well flowers for Staff (Xenia's) Father					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chock if Austin TV	, officeholder living ex	nonco		
┝	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Check ii Addilli, 17	Office held	perise		
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid			
		\$43.53	06/11/2025						
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
		Chaplada Durgara		1355 Palı	m Blvd.				
		Spanky's Burgers							
L					lle, TX 78520				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip					
		Food/Beverage Expe		Attorney	iuricri				
	X Political								
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	pense		
_	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
۳	Aponulture to benefit C/OH								

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Polling Ex Printing Ex		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide exp	olains how to co	mplete this form.	
1	Total pages Schedule G:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 1/11 Rpt: 10/20	Cordova Jr., Adolfo E. (The Hono	rable)		00081759
4	Date	5 Payee name			
	06/23/2025	Boot Co. Grill			
6	Amount (\$)	7 Payee address; City;	State; Zip Co	de	
	\$107.03	205 E. Hidalgo Ave.	, ,		
	Reimbursement from	Ü			
	X political contributions intended	Raymondville , TX 78580			
8				(b) Description	Check if travel outside of Texas. Complete Schedule T.
O	PURPOSE OF	(a) Category (See Categories listed at the top of	tnis schedule)	(b) Description	Check if Austin, TX, officeholder living expense
	EXPENDITURE	Food/Beverage Expense		Attorney lunch	
				Autorney lanen	
9	Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held
ľ	expenditure to benefit	sandade, omochoider name		Omee sought	Office Held
	C/OH				
	Date	Payee name			
	04/06/2025	Chez Zee America Bistro			
	Amount (\$)	Payee address; City;	State; Zip Co	de	
	\$123.63	5406 Balcones Drive			
	Reimbursement from				
	X political contributions intended	Austin, TX 78731			
	PURPOSE	Category (See Categories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF	Food/Beverage Expense	,		Check if Austin, TX, officeholder living expense
	EXPENDITURE	9 1		Speaking event lu	ınch expense
		Candidate/Officeholder name		Office sought	Office held
	expenditure to benefit C/OH				
	Date	Payee name			
	06/21/2025	Costco			
	Amount (\$)		State; Zip Co	de	
	\$18.39	1501 W. Kelly Ave.			
	Reimbursement from political contributions				
	intended	Pharr , TX 78577			
	PURPOSE OF	Category (See Categories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense			Check if Austin, TX, officeholder living expense
				Brownie mixes for	r Jury
	Operation Children	Describidada (Office 1 1 1 1		O#:	0.5
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name		Office sought	Office held
	C/OH				

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Travel in Distri Travel Out of I	
	Credit Cara r dyment			The Instruction Guide explains	how to co	omplete this form.			
1	Total pages Schedule G:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 2/11 Rpt: 11/20		Cordova Jr.	., Adolfo E. (The Honorable)			00081759)
4	Date	5	Payee name				<u> </u>		
	01/05/2025		Dollar Tree						
<u>ــــــــــــــــــــــــــــــــــــ</u>	Amount (\$)	7	Payee addre	ss; City; State	; Zip Co	nde			
ľ	\$37.81	ľ	2109 W. Lir		, Zip Ct	oue			
			2109 W. LII	ICOITI AVE.					
	Reimbursement from political contributions			TV 70550					
	intended		Harlingen ,	TX 78550					
8	PURPOSE	(a)	Category (S	ee Categories listed at the top of this sch	iedule)	(b) Description	=		tside of Texas. Complete Schedule T.
	OF EXPENDITURE			ns/Donations Made By	•	L	_		X, officeholder living expense
			Candidate/	Officeholder/Political Comm	ııttee	San Benito Boys	& (Girls Club	give away items
L									
9		Car	ndidate/Office	holder name		Office sought			Office held
	expenditure to benefit C/OH								
\models									
	Date		Payee name						
L	01/07/2025		Episcopal D	Day School					
	Amount (\$)		Payee addre	ss; City; State	; Zip Co	ode			
	\$300.00		34 N. Coria	Street					
	Reimbursement from								
	x political contributions intended		Brownsville	, TX 78520					
H	PURPOSE	H	Category (s	ee Categories listed at the top of this sch	edule)	Description	Cr	neck if travel ou	tside of Texas. Complete Schedule T.
	OF		Contribution	ns/Donations Made By			Cr	neck if Austin, T	X, officeholder living expense
	EXPENDITURE		Candidate/	Officeholder/Political Comm	nittee	School Donation	/ fur	nd raiser	
Г	Complete ONLY if direct	Car	ndidate/Office	holder name		Office sought			Office held
	expenditure to benefit C/OH								
L	C/OTT								
	Date		Payee name						
	03/02/2025		Galvez Gril	l					
Г	Amount (\$)		Payee addre	ss; City; State	; Zip Co	ode			
	\$137.83		2024 Seaw	all Blvd					
	Reimbursement from								
	X political contributions intended		Galveston,	TX 77550					
\vdash	PURPOSE	\vdash		ee Categories listed at the top of this sch	iedule)	Description	Ch	neck if travel ou	tside of Texas. Complete Schedule T.
	OF			rage Expense			=		X, officeholder living expense
	EXPENDITURE		. 000,2010.	algo <u>-</u> nponos		CLE appetizers	for :	staff	
\vdash	Complete ONLY if direct	<u>I</u> Car	ndidate/Office	holder name		Office sought			Office held
	expenditure to benefit	المح				co cougnit			
L	C/OH								

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking 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/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain		xpense Nages/Contract Labor		District ut of District (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAM	E			3 Filer ID	(Ethics Commission Filers)
	Sch: 3/11 Rpt: 12/20	Cordova Jr	., Adolfo E. (The Honorab	le)		00081	759
4	Date	5 Payee name	<u>,</u>				
	05/27/2025	Gaylord Pa	alms Resort Old Hickory S	teakhouse	e		
6	Amount (\$)	7 Payee addre	ess; City; Sta	te; Zip Co	ode		
	\$158.30	6000 West	Osceola Parkway				
	Reimbursement from political contributions intended	Kissimmee	e, FL 34746				
8	PURPOSE	(a) Category (s	See Categories listed at the top of this s	schedule)	(b) Description	Check if trav	vel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beve	rage Expense			Check if Aus	stin, TX, officeholder living expense
					CLE- dinner		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	cholder name		Office sought		Office held
	Date	Payee name					
	03/04/2025	Grand Galv	/ez				
	Amount (\$)	Payee addre	ess; City; Sta	te; Zip Co	ode		
	\$123.38	2024 Seaw	<i>ı</i> all Blvd.				
	Reimbursement from						
	x political contributions intended	Galveston	, TX 77550				
	PURPOSE	Category (s	See Categories listed at the top of this s	schedule)	Description	Check if trav	vel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beve	rage Expense			Check if Aus	stin, TX, officeholder living expense
					CLE staff lunch		
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	eholder name		Office sought		Office held
	C/OH						
	Date	Payee name					
	03/03/2025	1 1	San Luis Resort				
	Amount (\$)	Payee addre	ess; City; Sta	te; Zip Co	ode		
	\$105.98	5222 Seaw	all Blvd.				
	Reimbursement from						
	X political contributions intended	Galveston,	TX 77550				
	PURPOSE	Category (s	See Categories listed at the top of this s	schedule)	Description	Check if trav	vel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beve	rage Expense			Check if Aus	stin, TX, officeholder living expense
	LXI ENDITORE				CLE lunch with s	staff	
		Candidate/Office	eholder name		Office sought		Office held
	expenditure to benefit C/OH						

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	verhead/Rental Expense Expense Expense /Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to c		
1	Total pages Schedule G:	2 FILER NAME	3	B Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 13/20	Cordova Jr., Adolfo E. (The Honorable)		00081759
4	Date	5 Payee name	'	
L	01/09/2025	HEB		
6	Amount (\$)	7 Payee address; City; State; Zip C	Code	
	\$16.47	2250 Boca Chica Blvd		
	Reimbursement from political contributions intended	Brownsville, TX 78520		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
			Glazed donuts for	the jury
_				200
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	01/13/2025	HEB		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$27.44	2250 Boca Chica Blvd		
	Reimbursement from political contributions intended	Brownsville, TX 78520		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
			snacks for Jury	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	02/25/2025	HEB		
	Amount (\$)	Payee address; City; State; Zip C	Code	
	\$23.38	2250 Boca Chica Blvd		
	Reimbursement from political contributions intended	Brownsville, TX 78520		
	PURPOSE	Category (See Categories listed at the top of this schedule)	I	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
			Coffee items for ju	гу
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Nages/Contract Labor		Transportation Equipment & Related Expense Travel Out of District OTHER (enter a category not listed above)			
	·		The Instruction Guide explains	how to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAMI				3	Filer ID (Ethics Commission Filers)			
	Sch: 5/11 Rpt: 14/20	Cordova Jr	., Adolfo E. (The Honorable	?)			00081759			
4	Date	5 Payee name								
	02/26/2025	HEB								
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	ode					
	\$12.67	2250 Boca	Chica Blvd							
	Reimbursement from									
	X political contributions intended	Brownsville	e, TX 78520							
8	PURPOSE OF	(a) Category (s	see Categories listed at the top of this sch	nedule)	(b) Description	_	neck if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Food/Beve	rage Expense				neck if Austin, TX, officeholder living expense			
					items for the jury	'				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought		Office held			
	Date	Payee name	<u> </u>							
	04/30/2025	HEB								
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	nde					
	\$14.50	2250 Boca Chica Blvd								
		2230 Βουα	Cilica biva							
	X Reimbursement from political contributions intended	Brownsville	e, TX 78520							
	PURPOSE	Category (s	see Categories listed at the top of this sch	nedule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Food/Beve	rage Expense			Ch	neck if Austin, TX, officeholder living expense			
	ZAI ZHBITORZ				Donuts for the jui	ry				
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit C/OH									
	Date	Payee name								
	01/07/2025	La Especia	l Bakery							
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode					
	\$19.95	350 W. Rol	pertson St							
	Reimbursement from									
	X political contributions intended	San Benito	, TX 78586							
	PURPOSE OF	1	see Categories listed at the top of this sch	nedule)	Description	_	neck if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Food/Beve	rage Expense		L	_	neck if Austin, TX, officeholder living expense			
					sweet bread for t	ine S	Jury			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought		Office held			

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor				Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
l	Credit Card Payment		The Instruction Guide explains I	now to co						
1	Total pages Schedule G:	2	FILER NAME				3	Filer ID (Ethics Commission File	ers)	
	Sch: 6/11 Rpt: 15/20		Cordova Jr.	., Adolfo E. (The Honorable)				00081759		
4	Date	5	Payee name							
	01/10/2025		La Especial							
<u>-</u>	Amount (\$)	7	Payee addre	ss; City; State;	Zip Co	nde				
ľ	\$14.00	ľ	350 W. Rob	•	Zip Ot					
	Reimbursement from			551.551. St						
	political contributions intended		San Benito	, TX 78586						
8	PURPOSE	(a)	Category (S	ee Categories listed at the top of this sche	edule)	(b) Description	_	neck if travel outside of Texas. Complete Sche	edule T.	
l	OF EXPENDITURE		Food/Bever	rage Expense		L	_	neck if Austin, TX, officeholder living expense		
						sweet bread for t	the j	jury		
L										
9	Complete ONLY if direct expenditure to benefit C/OH	Ca	ndidate/Officel	holder name		Office sought		Office held		
H	Date		Payee name							
	01/14/2025		La Especial							
H	Amount (\$) Payee address; City; State; Zip Code									
	` '	\$14.00 350 W. Robertson St								
l			000 111100	Johnson Gr						
	X Reimbursement from political contributions intended		San Benito	, TX 78586						
l	PURPOSE		Category (S	ee Categories listed at the top of this sche	edule)	Description		neck if travel outside of Texas. Complete Sche	dule T.	
l	OF EXPENDITURE		Food/Bever	rage Expense		L	_	neck if Austin, TX, officeholder living expense		
l		sweet bread for				sweet bread for t	r the jury			
L										
	Complete ONLY if direct expenditure to benefit C/OH	Ca	ndidate/Office	holder name		Office sought		Office held		
Г	Date		Payee name							
l	02/26/2025		La Especial	l Bakery						
Г	Amount (\$)	Г	Payee addre	ss; City; State;	Zip Co	ode				
l	\$14.00		350 W. Rob	pertson St						
	Reimbursement from									
	X political contributions intended		San Benito	, TX 78586		_				
	PURPOSE OF			ee Categories listed at the top of this sch	edule)	Description	_	neck if travel outside of Texas. Complete Sche	edule T.	
l	EXPENDITURE FOOd/Beverage Expense				L	Check if Austin, TX, officeholder living expense				
						sweet bread for t	ine j	lury		
\vdash	Complete Chilly '' "	<u>_</u>	e di de t - 10 m	h a lalau in a na c		O#:		Carrie III		
	Complete ONLY if direct expenditure to benefit C/OH	Ca	ndidate/Officel	holder name		Office sought		Office held		
Г										

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		•		Office Over Polling Ex Printing Ex Salaries/V	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 7/11 Rpt: 16/20		Cordova Jr., Adolfo E. (The Honorable)				00081759		
4	Date 04/29/2025	5	Payee name La Especial Bakery							
6	Amount (\$) \$14.00	7	Payee address; City; 350 W. Robertson St	State;	Zip Co	de				
	X political contributions intended	San Benito , TX 78586								
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories liste Food/Beverage Expens		edule)	(b) Description sweet bread for t	Ch	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Car	didate/Officeholder name			Office sought		Office held		
	Date		Payee name							
	01/08/2025		La Guera Hamburgers							
	Amount (\$)		Payee address; City; State; Zip Code							
	\$64.78		3520 Calle Nortena							
	Reimbursement from political contributions intended		Brownsville, TX 78526							
	PURPOSE OF		Category (See Categories liste	•	edule)	Description	=	eck if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE		Food/Beverage Expens	e		Staff lunch	_ Cn	eck if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	didate/Officeholder name			Office sought		Office held		
	Date 01/08/2025		Payee name La Guera Hamburgers							
	Amount (\$) \$86.47		Payee address; City; 3520 Calle Nortena	State;	Zip Co	de				
	Reimbursement from political contributions intended		Brownsville, TX 78526							
	PURPOSE OF EXPENDITURE		Category (See Categories liste Food/Beverage Expens	•	edule)	Description	=	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OH	Car	didate/Officeholder name			Office sought		Office held		

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense y - Gift/Awards/Memorials Expense		Polling Ex Printing E			Travel in District Travel Out of District OTHER (enter a category not listed above)				
	Credit Card Payment		The Instruction Guide explains	how to co	omplete this form.						
1	Total pages Schedule G: Sch: 8/11 Rpt: 17/20	2 FILER NAME	E ., Adolfo E. (The Honorable)	\		1	iler ID 0008175	(Ethics Commission F	ilers)		
_	<u> </u>		•)		<u> </u>	5006175				
4	Date 05/13/2025	5 Payee name La Pampa									
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode						
	\$183.72	3230 Pablo	Kisel								
	Reimbursement from	Suite F102		8526							
	X political contributions intended	Brownsville	, TX 78526								
8	PURPOSE OF	1	ee Categories listed at the top of this scho	edule)	(b) Description	=		utside of Texas. Complete So			
	EXPENDITURE	Food/Beve	rage Expense		Ctoff Digtheday ly	Check if Austin, TX, officeholder living expense			е		
					Staff Birthday lunch						
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	ndidate/Officeholder name Office sought Office held								
	C/OH										
	Date	Payee name									
	03/21/2025	Little Ceasa	ar's								
	Amount (\$)	Payee address; City; State; Zip Code									
	\$90.84	186 Hidalgo	0								
	Reimbursement from political contributions intended	Raymondvi	lle , TX 78580								
	PURPOSE	Category (S	ee Categories listed at the top of this scho	edule)	Description	Che	eck if travel or	utside of Texas. Complete So	chedule T.		
OF EXPENDITURE		Food/Beve	age Expense		[Che	eck if Austin,	TX, officeholder living expens	е		
					Pizza for jury						
	Complete ONLY if direct	I Candidate/Office	holder name		Office sought			Office held			
	expenditure to benefit C/OH										
	Data	B									
	Date 04/02/2025	Payee name Longhorn S									
	Amount (\$)	Payee addre		Zip Co	nde						
	\$120.28	106 Bass P		ZIP 00	Suc						
	Reimbursement from										
	X political contributions intended	Harlingen ,	TX 78552								
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description	_		utside of Texas. Complete So			
	OF EXPENDITURE	Food/Beve	rage Expense		L	Che	eck if Austin,	TX, officeholder living expens	e		
					Attorney lunch						
	Complete ONLY if direct expenditure to benefit	<u>I</u> Candidate/Office	holder name		Office sought			Office held			
	C/OH										

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Il Expense () I/Beverage Expense Awards/Memorials Expense Il Services • Instruction Guide explains I	Office Over Polling Ex Printing E Salaries/V	xpense Wages/Contract Labor	Solicitation/Fundratising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G:	2	FILER NAME				3 Filer ID (Ethics Commission Filers)			
-	Sch: 9/11 Rpt: 18/20			lolfo E. (The Honorable)			00081759			
┝	-	_								
4	Date 03/06/2025	9	Payee name	200						
			Mumphord's Pla							
6	Amount (\$)	7	Payee address;	•	Zip Co	ode				
	\$37.42		1202 E. Juan L	inn Street						
	Reimbursement from									
	X political contributions intended		Victoria , TX 77	901						
8	PURPOSE	(a)	Category (See Ca	tegories listed at the top of this sche	edule)	(b) Description	Check if travel outside of Texas. Complete Schedule T			
	OF	l` <i>`</i>	Food/Beverage		,	l`´	Check if Austin, TX, officeholder living expense			
	EXPENDITURE		. 000, 2010. a.g.			CLE -travel food	expense			
9	Complete ONLY if direct	L_ Cai	ndidate/Officehold	er name		Office sought	Office held			
ľ	expenditure to benefit	Ou.	raidate/ Omoonoid	or name		Omeo sought	Cinico Heid			
	C/OH									
Е	Date		Payee name							
	05/28/2025		Salt Grass Stea	akhouse						
┝	Amount (\$) Payee address; City; State; Zip Code									
	\$137.25 8850 Vineland Ave.									
			0030 Villeland	Ave.						
	X Reimbursement from political contributions intended		Orlando , FL 32	2821						
	PURPOSE		Category (See Ca	tegories listed at the top of this sche	edule)	Description	Check if travel outside of Texas. Complete Schedule T			
	OF EXPENDITURE		Continuing Leg	al Education		[Check if Austin, TX, officeholder living expense			
	ZA ZIIDII GRZ					CLE dinner				
Г	Complete ONLY if direct expenditure to benefit	Cai	ndidate/Officehold	er name		Office sought	Office held			
	C/OH									
F	Data									
	Date		Payee name							
L	03/05/2025		Saltwater Grill							
	Amount (\$)		Payee address;	-	Zip Co	ode				
	\$818.00		2017 Post Offic	e Street						
	Reimbursement from political contributions									
	X political contributions intended		Galveston, TX	77550						
Г	PURPOSE		Category (See Ca	tegories listed at the top of this sche	edule)	Description	Check if travel outside of Texas. Complete Schedule T			
	OF		Food/Beverage				Check if Austin, TX, officeholder living expense			
	EXPENDITURE		3	-		CLE- staff dinner	r			
\vdash	Complete ONLY if direct	Cai	ndidate/Officehold	er name		Office sought	Office held			
	expenditure to benefit									
$ldsymbol{f eta}$	C/OH									

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services	Office (Polling Printing	Overhead/Rental Expense Expense J Expense s/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
Credit Card Payment		The Instruction Guide ex	plains how to	complete this form.							
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)					
	Sch: 10/11 Rpt: 19/20		Cordova Jr., Adolfo E. (The Hono	rable)		00081759					
4	Date	5	Payee name								
	02/20/2025		Sam's Club								
6	Amount (\$)	7	Payee address; City;	State; Zip	Code						
	\$198.01		3570 W. Alton Gloor Blvd.								
	Reimbursement from										
	political contributions intended		Brownsville , TX 78520								
8	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE		Contributions/Donations Made By			Check if Austin, TX, officeholder living expense					
			Candidate/Officeholder/Political C	Committee	Items for Boy's &	& Girls Cub of San Benito					
9	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought	Office held					
	Date	Π	Payee name								
	04/22/2025		Taquito Express								
		┞									
	Amount (\$) \$55.69										
			1900 N. Expressway								
	Reimbursement from political contributions intended		Brownsville , TX 78521								
	PURPOSE		Category (See Categories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE		Food/Beverage Expense		L	Check if Austin, TX, officeholder living expense					
					Tacos for the jury	у					
	Complete ONLY if direct expenditure to benefit	Cai	ndidate/Officeholder name		Office sought	Office held					
	C/OH										
		_									
	Date		Payee name								
	02/26/2025		The Pizzeria								
	Amount (\$)		Payee address; City;	State; Zip	Code						
	\$60.58		2355 N. Expressway								
	Reimbursement from										
	x political contributions intended		Brownsville, TX 78520								
Т	PURPOSE	\vdash	Category (See Categories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.					
	OF		Food/Beverage Expense			Check if Austin, TX, officeholder living expense					
	EXPENDITURE				Pizza for the jury	1					
		Cai	ndidate/Officeholder name		Office sought	Office held					
	expenditure to benefit				Ç						
	C/OH										

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(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) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/11 Rpt: 20/20 Cordova Jr., Adolfo E. (The Honorable) 00081759 Date Payee name 03/04/2025 Tx Tail Distillery Payee address; Amount (\$) City; State; Zip Code \$42.73 2416 Post Office Street Reimbursement from political contributions intended Х Galveston, TX 77550 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Beverages for staff Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/17/2025 Walmart Amount (\$) Payee address; City; State; Zip Code \$190.39 2721 Boca Chica Blvd. Reimbursement from political contributions Χ Brownsville, TX 78521 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee TV and DVD raffle items for San Benito Boys and Girls Club fund raiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH