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) 00067765 44 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Nicole Henning NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Garza CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Jose R. NAME NICKNAME LAST **SUFFIX Bobby** Elizalde **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** (210) 545-4666 **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** Day Month Year Primary Runoff Other 11/05/2024 χ General Special

GO TO PAGE 2

11 OFFICE

OFFICE HELD (if any)

District Judge Place San Antonio District 37 Bexar

12 OFFICE SOUGHT (if known)

District Judge Place San Antonio District 37th

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 44

13 C / OH NAME	Garza, Nicole Hennir	g (The Honorable)		14 Filer ID 00067765	(Ethics Com	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepte These expenditures may have d officeholders are required to	ve been made without t	he candidate's or of	ficeholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
	_	COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN	TREASURER NAME			
		COMMITTEE CAMPAIGN	TREASURER ADDRES	SS		
1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR CHARANTEES OF LOANS)						0.00
						55,675.00
EXPENDITURE	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) (PENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES					0.00
TOTALS					\$	0.00
	4. TOTAL POLIT	\$	16,779.32			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAIN	TAINED AS OF THE LA	AST DAY OF THE	\$	104,016.50
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTS TING PERIOD	STANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		true and	or affirm, under penalty correct and includes al tle 15, Election Code.			
			The Honorab	ole Nicole Henning	ı Garza	
				Candidate or Officel		
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE				
Sworn to and subso	ribed before me, by the s	aid		, this the		day
		ertify which, witness my hand				
Signature of office	er administering oath	Printed name of officer	administering oath	Title of offi	cer administer	ing oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

	3 of 44							
	Nicole Henning (The Honorable)	19 Filer ID 00067765	(Ethics Commi	ssion Filers)				
	JLE SUBTOTALS F SCHEDULE		SUBTOTA	AL AMOUNT				
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	55,675.00				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$					
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$					
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	16,779.32				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$					
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$					
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$					
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 1/15 Rpt: 4/44
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Garza, Nicol	e Henning (The Honorable)				00067765
4	Date 03/17/2025	5 Full name of contributor Bandoske & Butler, LLC6 Contributor address; City;)	7	Amount of Contribution (\$) \$500.00
		San Antonio, TX 78255				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u> </u>	
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/27/2025	Brett Reynolds & Associ Contributor address; City;	ates			\$300.00
		San Antonio, TX 78209				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/27/2025	Campolo, Paul (Mr.)				\$1,500.00
		Contributor address; City; San Antonio, TX 78205				
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Maloney & C	Campolo				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 2/15 Rpt: 5/44
2	FILER NAME Garza, Nicol	le Henning (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067765
4	Date 02/27/2025	Full name of contributor Davis Law Firm Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78216				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	03/03/2025	Donna, Baggs (Ms.) Contributor address; City; San Antonio, TX 78216	State; Zip Code			\$1,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Director of F			Director of Finance		
_		employer/law firm		Law firm of contributor's sp	חחוו	se (if any)
		liver, Montpas		Law iiiii oi oonandaci o o	Jouc	o (ii aiiy)
		s a child, law firm of parent(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/17/2025	Duarte, Demetreo (Mr.) Contributor address; City; San Antonio, TX 78255	State; Zip Code			\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Demetreo D	uarte				
	If contributor is	s a child, law firm of parent(s) (if	fany)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/15 Rpt: 6/44
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Garza, Nicol	e Henning (The Honorable)				00067765
4	Date 03/17/2025	5 Full name of contributor Espey & Associates6 Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$500.00
		San Antonio, TX 78216				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	03/17/2025	Espinoza & Brock Contributor address; City;	<u> </u>			\$1,000.00
		San Antonio, TX 78216				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/27/2025	Garza & Associates	_			\$1,000.00
		Contributor address; City; San Antonio, TX 78212	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	I.		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 4/15 Rpt: 7/44
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Garza, Nicol	e Henning (The Honorable)			L	00067765
4	Date 03/03/2025	5 Full name of contributorGeorge Salinas Injury La6 Contributor address; City;)	7	Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78201				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's			11 Law firm of contributor's sp	oou	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	03/17/2025	Guerra LLP Contributor address; City;	<u> </u>			\$5,000.00
		San Antonio, TX 78212				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/13/2025	Herrera Law Firm	_		l	\$2,500.00
		Contributor address; City; San Antonio, TX 78207	State; Zip Code		•	
	Contributorio			Contributorio Joh Titlo	<u> </u>	
	Contributors	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 5/15 Rpt: 8/44	
2	FILER NAME Garza, Nicol	e Henning (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067765	
4	Date 04/29/2025			7 Amount of Contribution (\$) \$1,000	.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	.0 Contributor's employer/law firm 11 Law firm of contributor's sp			spouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if a	ny)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/27/2025 Hill Law Firm Contributor address; City; State; Zip Code		Amount of Contribution (\$)	.00		
	Contributor's I	San Antonio, TX 78216 Principal Occupation		Contributor's Job Title		
	Contributor's e	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if a	ny)			
	Date 02/27/2025	Full name of contributor Jefferson Cano Contributor address; City; St San Antonio, TX 78205	out-of-state PAC (ID#:_ ate; Zip Code)	Amount of Contribution (\$)	00
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Contributor's e	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if a	ny)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 6/15 Rpt: 9/44
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Garza, Nicol	e Henning (The Honorable)				00067765
4	Date 03/17/2025	5 Full name of contributor Jennifer Neal Law6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$250.00
		San Antonio, TX 78217				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	_	
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/27/2025	Joshua , Caldwell (Mr.) Contributor address; City;	<u> </u>			\$250.00
		San Antonio, TX 78209				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Davis & San					
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/27/2025	Kriebel Law Firm	_			\$250.00
			State; Zip Code		•	
_	Contributor's F	Principal Occupation		Contributor's Job Title	1	
		····o.pai o coapailo.				
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIBU	JTIC	DNS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to complete	this f	iorm.	1	Total pages Schedule A(J): Sch: 7/15 Rpt: 10/44	1:
2	FILER NAME Garza, Nicol	le Henning (The Honorable)			3	Filer ID (Ethics Commission 00067765	ion Filers)
4	Date 03/14/2025	Full name of contributor	Law Office of Bart Brzozowski		7	Amount of Contribution (\$)	\$500.00
		San Antonio, TX 78216					
8	Contributor's F	Contributor's Principal Occupation 9 Contributor's Job Title					
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-state PAC	.C (ID#:)		Amount of Contribution (\$)	
	03/17/2025 Law Office of Diane Martinez Contributor address; City; State; Zip Code					\$250.00	
San antonio, TX 78210							
Contributor's Principal Occupation Contributor's Job Title			Contributor's Job Title				
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-state PAC	.C (ID#:_)	Ī	Amount of Contribution (\$)	
	02/27/2025	Law Office of Lisa Vance					\$250.00
		Contributor address; City; State; Zip Code San Antonio, TX 78217			•		
	Contributor's F	Principal Occupation		Contributor's Job Title	•		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)		1			

	MONET	ARY POLITICAL CO	NTRIBUTIC	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to o	complete this fo	orm.	1	Total pages Schedule A(J)1: Sch: 8/15 Rpt: 11/44
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Garza, Nicol	le Henning (The Honorable)				00067765
4	Date 03/17/2025	 5 Full name of contributor	out-of-state PAC (ID#:_ Zip Code)	7	Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78205				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's s			ous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	03/10/2025	Law Office of Paul Taylor Contributor address; City; State; Z			•	\$250.00
		San Antonio, TX 78216				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor 0	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	02/26/2025	Law office of Jane Deyeso				\$1,500.00
		Contributor address; City; State; z San Antonio, TX 78247	Zip Code		•	
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 9/15 Rpt: 12/44
2	FILER NAME	e Henning (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067765
4	Date 02/17/2025	Full name of contributor Law office of Janice Mal Contributor address; City;	-		7	Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78212				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	02/26/2025	Lubel Voyles Contributor address; City;	<u> </u>		•	\$1,500.00
		Houston, TX 77057				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/26/2025	Margaret, Brown Contributor address; City; San Antonio, TX 78205	State; Zip Code			\$2,500.00
_	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	-ппсіраї Оссираціон		Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Lindow Stev	ens Schultz Moynihan & Bro	own			
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 10/15 Rpt: 13/44
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Garza, Nicol	e Henning (The Honorable)				00067765
4	Date 02/27/2025	5 Full name of contributor Meritz Reddy6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$750.00
		San Antonio, TX 78209				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	<u> </u>	
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	e (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/28/2025	Michael Ireland & Assoc Contributor address; City;	iates			\$500.00
		San Antonio, TX 78230				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/27/2025	Mission Injury Law	_			\$2,500.00
		Contributor address; City; San Antonio, TX 78212	State; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1				
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 11/15 Rpt: 14/44				
2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Garza, Nicol	e Henning (The Honorable)				00067765				
4	4 Date 02/25/2025 5 Full name of contributor out-of-state PAC (ID#:) Moore, Eunice (Ms.) 6 Contributor address; City; State; Zip Code				7	Amount of Contribution (\$) \$1,000.00				
		San Antonio, TX 78201								
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u> </u>					
	Attorney			Attorney						
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)				
		nas Injury lawyers								
12	If contributor is	s a child, law firm of parent(s) (if	any)							
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)				
	03/17/2025 OG Alvarez & Associates Contributor address; City; State; Zip Code					\$5,000.00				
		San Antonio, TX 78260								
	Contributor's I	Principal Occupation		Contributor's Job Title						
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)				
	If contributor is	s a child, law firm of parent(s) (if	any)	1						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)				
	03/17/2025	Ortiz & Batis				\$500.00				
Contributor address; City; State; Zip Code San Antonio, TX 78216										
	Contributor's I	Principal Occupation		Contributor's Job Title						
Contributor's employer/law firm			Law firm of contributor's sp	oous	se (if any)					
	If contributor is	s a child, law firm of parent(s) (if	any)							

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1			
	The Instru	ction Guide explains how to	1	ges Schedule A(J)1 2/15 Rpt: 15/44	:				
2	FILER NAME Garza, Nicol	e Henning (The Honorable)		3 Filer ID 000677	(Ethics Commission 65	on Filers)			
4	Date 02/26/2025	Reynaldo Diaz Accident Injury	Reynaldo Diaz Accident Injury Attorney PC 6 Contributor address; City; State; Zip Code				\$1,000.00		
8	Contributor's I	Principal Occupation 9 Contributor's Job Title							
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if any)				
12	! If contributor is	s a child, law firm of parent(s) (if any)							
	Date Full name of contributor out-of-state PAC (ID#:_03/17/2025 Roger Media, Inc Contributor address; City; State; Zip Code				Amount	of Contribution (\$)	\$150.00		
	Contributor's I	San Antonio, TX 78229 Principal Occupation		Contributor's Job Title					
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)				
	If contributor is	s a child, law firm of parent(s) (if any)							
	Date O3/17/2025 Full name of contributor out-of-state PAC (ID#:_ Roger Merchant solutions Contributor address; City; State; Zip Code San Antonio, TX 78229)	Amount	of Contribution (\$)	\$150.00		
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>				
Contributor's employer/law firm			Law firm of contributor's sp	ouse (if any)					
	If contributor is	s a child, law firm of parent(s) (if any)							

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1				
	The Instru	ction Guide explains ho	w to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 13/15 Rpt: 16/44				
2	FILER NAME	e Henning (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067765				
4	Date 03/17/2025	5 Full name of contributor out-of-state PAC (ID#:			7	Amount of Contribution (\$) \$250.00				
		San Antonio, TX 78205								
8	Contributor's I	Principal Occupation		9 Contributor's Job Title						
10 Contributor's employer/law firm 11 Law firm of contributor's s						se (if any)				
12	If contributor is	s a child, law firm of parent(s) (if	any)							
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)				
	03/17/2025 Rosenthal, Powerstein, Sandaloski, Agather, LLP Contributor address; City; State; Zip Code					\$2,500.00				
	0	San Antonio, TX 78212		1 0 11 1 1 70						
	Contributor's I	Principal Occupation		Contributor's Job Title						
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)				
	If contributor is	s a child, law firm of parent(s) (if	any)	l						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)				
	02/27/2025	Sloan PLLC Contributor address; City;	State; Zip Code			\$1,000.00				
	0	San Antonio, TX 78213		Occasionate de Tale Title						
	Contributor's I	Principal Occupation		Contributor's Job Title						
Contributor's employer/law firm				Law firm of contributor's sp	oous	se (if any)				
	If contributor is	s a child, law firm of parent(s) (if	any)	<u>I</u>						

	MONET	ARY POLITICAL		SCHEDULE A(J)1				
	The Instru	ction Guide explains ho	1	Total pages Sche Sch: 14/15 Rpt:	, ,	l:		
2	FILER NAME			3	Filer ID (Ethics	Commissi	on Filers)	
	Garza, Nico	le Henning (The Honorable)			00067765			
4 Date 03/03/2025		5 Full name of contributor Soulsby Law 6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contrik	oution (\$)	\$500.00
		San Antonio, TX 78212						
8	8 Contributor's Principal Occupation 9 Contributor's							
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pou	se (if any)		
12	! If contributor i	s a child, law firm of parent(s) (i	if any)					
F	Date	Full name of contributor	out-of-state PAC (ID#:	1	T	Amount of Contrib	oution (\$)	
	03/05/2025	The Aguirre Law Firm	United State 1 AC (ID#.			Amount of Contrib	σαιίστι (Φ)	\$1,000.00
		Contributor address; City;	State; Zip Code					, ,
		San Antonio, TX 78212		·				
	Contributor's	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)		
	If contributor i	s a child, law firm of parent(s) (i	if any)					
-	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contrib	oution (\$)	
	03/17/2025	Tim Maloney						\$2,500.00
		Contributor address; City;	State; Zip Code					
		San Antonio, TX 78205						
	Contributor's	Principal Occupation		Contributor's Job Title				
Contributor's employer/law firm				Law firm of contributor's s	pous	se (if any)		
	If contributor i	s a child, law firm of parent(s) (i	if any)					

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J)1: Sch: 15/15 Rpt: 18/44 2 FILER NAME Garza, Nicole Henning (The Honorable) 4 Date 03/17/2025 5 Full name of contributor out-of-state PAC (IDH:) 7 Amount of Contribution (\$) 03/17/2025 8 Committurer address: City; State: Zp Code 5 Contributor's employed Occupation Court Reporter 10 Contributor's employed Occupation Court Reporter 11 Law firm of contributor's spouse (if any) Date 03/17/2025 Full name of contributor out-of-state PAC (IDH:) Amount of Contribution (\$) 03/17/2025 Full name of contributor out-of-state PAC (IDH:) Amount of Contribution (\$) 03/17/2025 Full name of contributor out-of-state PAC (IDH:) Amount of Contribution (\$) 03/17/2025 Contributor address: City; State: Zip Code Contributor's Principal Occupation Contributor's Principal Occupation Contributor's Principal Occupation Contributor's Principal Occupation Contributor's employerflaw firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any)		MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A(J)1			
Garza, Nicole Henning (The Honorable) 4 Date 03/17/2025 5 Full name of contributor out-of-state PAC (ID#		The Instru	ction Guide explains how to complete this	s form.	, ,		
4 Date 03/17/2025 5 Full name of contributor out-of-state PAC (ID#:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)		
San Antonio, TX 78255 San Antonio, TX 78201 San		Garza, Nico	le Henning (The Honorable)		00067765		
San Antonio, TX 78255 8 Contributor's Principal Occupation Court Reporter 10 Contributor's employer/law firm Texas court 11 Law firm of contributor's spouse (if any) Date 03/17/2025 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Contributor's Principal Occupation Contributor's Spouse (if any) Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)	4	Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of Contribution (\$)		
San Antonio, TX 78255 8 Contributor's Principal Occupation Court Reporter 10 Contributor's employer/law firm Texas court 11 Law firm of contributor's spouse (if any) Date 03/17/2025 Full name of contributor Wayne Wright Lawyers Contributor address; City; State; Zip Code San Antonio, TX 78201 Contributor's employer/law firm Contributor's principal Occupation Contributor's principal Occupation Contributor's employer/law firm Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)		03/17/2025	Tonya, Thompson		\$75.00		
8 Contributor's Principal Occupation Court Reporter 10 Contributor's employer/law firm Texas court 11 Law firm of contributor's spouse (if any) Date 03/17/2025 Wayne Wright Lawyers Contributor address; City; State; Zip Code Contributor's Principal Occupation Contributor's employer/law firm Law firm of contributor's spouse (if any) Amount of Contribution (\$) \$2,500.00 Contributor's Principal Occupation Contributor's spouse (if any)			6 Contributor address; City; State; Zip Code				
Court Reporter 10 Contributor's employer/law firm Texas court 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date 03/17/2025 Wayne Wright Lawyers Contributor address; City; State; Zip Code San Antonio, TX 78201 Contributor's Principal Occupation Contributor's employer/law firm Contributor's employer/law firm Contributor's spouse (if any)							
10 Contributor's employer/law firm Texas court 12 If contributor is a child, law firm of parent(s) (if any) Date 03/17/2025 Wayne Wright Lawyers Contributor address; City; State; Zip Code Contributor's Principal Occupation Contributor's employer/law firm Contributor's employer/law firm Law firm of contributor's spouse (if any) Amount of Contribution (\$) \$2,500.00 Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)	8						
Texas court 12 If contributor is a child, law firm of parent(s) (if any) Date							
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	10			11 Law firm of contributor's s	pouse (if any)		
Date Full name of contributor out-of-state PAC (ID#:							
03/17/2025 Wayne Wright Lawyers \$2,500.00 Contributor address; City; State; Zip Code San Antonio, TX 78201 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)	12	If contributor i	is a child, law firm of parent(s) (if any)				
Contributor address; City; State; Zip Code San Antonio, TX 78201 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)		Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of Contribution (\$)		
San Antonio, TX 78201 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)		03/17/2025	Wayne Wright Lawyers	\$2,500.00			
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)			Contributor address; City; State; Zip Code		"		
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)							
Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any)							
Contributor's employer/law firm Law firm of contributor's spouse (if any)			San Antonio, TX 78201				
Contributor's employer/law firm Law firm of contributor's spouse (if any)		Contributor's	I Principal Occupation	Contributor's Job Title			
		Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)		
If contributor is a child, law firm of parent(s) (if any)							
		If contributor i	is a child, law firm of parent(s) (if any)				
			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total pages Cabadula F1:	· · · · · · · · · · · · · · · · · · ·	_
1	Total pages Schedule F1: Sch: 1/26 Rpt: 19/44	2 FILER NAME Garza, Nicole Henning (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067765	
4	Date	5 Payee name	_
	04/04/2025	Acenar	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$323.58	146 E. Houston	
		San Antonio, TX 78205	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Presiding court finale celebration.	
		Presiding Court infale celebration.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	expenditure to benefit C/OI		
H	Date		_
		Payee name	
	05/23/2025	Amazon	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$122.69	325 9th Avenue	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Courtroom supplies Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		courtroom supplies.	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
H	Date	Payee name	=
	02/25/2025	Amazon	
			_
	Amount (\$) \$71.24	Payee address; City; State; Zip Code 325 9th Avenue	
	\$71.24	325 9th Avenue	
		Coordio WA 00100	
		Seattle, WA 98109	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Courthouse supplies Courthouse supplies	
	EXPENDITURE	Courthouse supplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	H	
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/26 Rpt: 20/44	Garza, Nicole Henning (The Honorable) 00067765
4	Date	5 Payee name
	02/21/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$37.41	325 9th Avenue
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Courthouse supplies Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Courthouse supplies.
		Courtifouse supplies.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Date	Payee name
	02/18/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$164.98	325 9th Avenue
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Supplies for court Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Supplies for court.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	02/11/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.45	325 9th Avenue
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event supplies.
		Everit supplies.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
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	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 3/26 Rpt: 21/44	Garza, Nicole Henning (The Honorable) 00067765						
4	Date	5 Payee name						
	02/05/2025	Amazon						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$77.93	325 9th Avenue						
		Seattle, WA 98109						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Court supplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Court supplies.						
		Count supplies.						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
	Date	Payee name						
	01/07/2025	Amazon						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$30.16	325 9th Avenue						
		Seattle, WA 98109						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Spplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Courthouse supplies						
		озальново овершо						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OF							
	Date	Payee name						
	01/21/2025	Bexar County Women's Bar						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$75.00	P.O. Box 460172						
		San Antonio, TX 78246						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By						
		Candidate/Officeholder/Political Committee						
		membership fees.						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 4/26 Rpt: 22/44	Garza, Nicole Henning (The Honorable) 00067765						
4	Date	5 Payee name						
	06/09/2025	Candy's Old Fashion Burgers						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$78.62	115 Plaza de Armas #107						
		San Antonio, TX 78205						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Campaign lunch.						
		Sampaig. Harron						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
	Date	Payee name						
	03/24/2025	Candy's Old Fashion Burgers						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$156.71	115 Plaza de Armas #107						
		San Antonio, TX 78205						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Food/Beverage Expense						
	EXI ENDITORE	Crown I unab						
		Group lunch.						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
	Date	Payee name						
	03/31/2025	Chick-fil-a						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$112.65	106 E. Houston						
	,							
		San Antonio, TX 78205						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	food at campaign meeting Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		food at campaign meeting.						
	0 1: 0::::::::							
	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 Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Legal Ser		·		/ages	s/Contract Labor			Out of Dis R (enter a	strict category not listed at	oove)
L					u action Gui	ue expiains	HOW IO CO	mpie	ete this form.	_		_		
1	Total pages Schedule F1:	2								3	Filer I		(Ethics Commiss	sion Filers)
_	Sch: 5/26 Rpt: 23/44	_	Garza, Nico	le Hen	ning (The	Honorable	e)				0006	7765		
4	Date	5	Payee name											
	03/31/2025		Chick-fil-a											
6	Amount (\$)	7	Payee addre	ss;	City;	State	; Zip Co	de						
	\$112.65		106 E. Hou	ston										
			San Antonio	o, TX 7	8205									
8	PURPOSE	(a)	Category (S	ee Catego	ries listed at the	e ton of this sol	nedule)	(b)	Description					
	OF	l` <i>′</i>	Meeting me		nes iistea at tiit	c top of this sci	icuaicj	` ,	_ `	outsi	ide of Te	xas. Com	plete Schedule T.	
	EXPENDITURE			-					Check if Austin	, TX	, officeho	lder living	j expense	
									Meeting mea	l				
9	Complete ONLY if direct		Candidate/Offi	ceholde	r name	(Office sou	ght			С	office he	eld	
	expenditure to benefit C/OI	Н												
H	Date		Payee name											
	03/21/2025		Chick-fil-a											
L		⊢		001	Cit.	Ctat-	. 7in 0-	de						
	Amount (\$)		Payee addre		City;	Siate	; Zip Co	ue						
	\$132.90		106 E. Hou	ston										
			San Antonio	o, TX 7	8205									
	PURPOSE	(a)	Category (S	ee Categoi	ries listed at the	e top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Food/Bever						<u></u>				plete Schedule T.	
	TVI FIADLIONE								Check if Austin		, officeho	lder living	j expense	
									Group lunch.					
	Complete ONLY if direct		Candidate/Offi	ceholde	r name		Office sou	ght			C	office he	eld	
L	expenditure to benefit C/OI													
Т	Date	Γ	Payee name											
	03/10/2025		Chick-fil-a											
-	Amount (\$)	\vdash	Payee addre	SS.	City;	State	; Zip Co	de						
	\$111.64		106 E. Hou	•	٠.٠٠,	Sidile	,p co	40						
	φ111.04		100 E. HOU	Stori										
			San Antonio	o, TX 7	8205									
	PURPOSE	(a)	Category (S	ee Categoi	ries listed at the	e top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Food/Bever	age Ex	pense				_				plete Schedule T.	
	-								Check if Austin			ider living	j expense	
									Presiding lun	CHE	2 011.			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholde	r name	(Office sou	ght			О	office he	eld	
	CAPETIGITUTE TO DETICITE C/OI	' '												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense 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

	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: 6/26 Rpt: 24/44	Garza, Nicole Henning (The Honorable) 00067765
4	Date	5 Payee name
	03/03/2025	Chili's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$277.36	12503 IH 10 W
		San Antonio, TX 78230
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Presiding luncheon
		residing function
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	06/30/2025	El Castillo
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.04	425 S. St. Mary's St.
	* .5.5	,
		San Antonio, TX 78205
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/26/2025	Esquire Tavern
	Amount (\$)	Payee address; City; State; Zip Code
	\$91.00	155 E. Commerce
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign lunch.
		Campaigh funch.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

nt Solicitation/Fundraising Expense
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 complete this form.	
1	Total pages Schedule F1: Sch: 7/26 Rpt: 25/44	2 FILER NAME Garza, Nicole Henning (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067765	
4	Date 02/28/2025	5 Payee name Flemings Fine Steakhouse	
6	Amount (\$) \$2,154.36	7 Payee address; City; State; Zip Code 255 E. Basse	
		San Antonio, TX 78209	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising event.	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 02/24/2025	Payee name Flemings Fine Steakhouse	
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 255 E. Basse San Antonio, TX 78209	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Deposit for upcoming event.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 01/28/2025	Payee name Fuel Express Travel	
	Amount (\$) \$39.47	Payee address; City; State; Zip Code 2816 State Hwy 132	
		Natalia, TX 78059	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for campaign related travel.	
	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 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		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Ļ	Sch: 8/26 Rpt: 26/44	Garza, Nicole Henning (The Honorable)	00067765
4	Date 03/17/2025	5 Payee name Gus' Fried Chicken	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$201.50	812 S. Alamo St.	
		San Antonio, TX 78205	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n
	OF EXPENDITURE	Food/Beverage Expense	travel outside of Texas. Complete Schedule T.
			Austin, TX, officeholder living expense g court luncheon.
		Testang	,
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
_	Date	Payee name	
	04/14/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$205.00	20935 US Hwy 281 N	
		San Antonio, TX 78258	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
			Ise supplies and food.
			••
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/12/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$81.00	20935 US Hwy 281 N	
		San Antonio, TX 78258	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n
	OF EXPENDITURE	Event Expense	travel outside of Texas. Complete Schedule T.
	EAPENDITUKE	Check if	Austin, TX, officeholder living expense
		Supplies	for event
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	9	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total marga Cabadala 54		`
1	Total pages Schedule F1:		,
L	Sch: 9/26 Rpt: 27/44	Garza, Nicole Henning (The Honorable) 00067765	
4	Date	5 Payee name	
	02/03/2025	Half Price Books	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$23.24	20821 US Hwy 281	
		San Antonio, TX 78258	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Training info for Amicus (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Training info for Amicus	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	PH	
H	Date	Payee name	
	02/21/2025	Ivonne , Avila (Miss)	
_			
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	6710 Babcock	
L		San Antonio, TX 78249	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Temp care for Amicus Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Temp care for Amicus	
_	Computate Chill V. V. II	Condidate/Officeholder norte	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
L	05/07/2025	Jimmy John's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$69.34	160 E. Houston	
		San Antonio, TX 78205	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	LAI LIIDITOILE	Check if Austin, TX, officeholder living expense	
		Campaign meeting.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefft C/OI	••	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense 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 complete this	form.		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 10/26 Rpt: 28/44	Garza, Nicole Henning (The Honorable)	00067765		
4	Date	5 Payee name	-		
	03/21/2025	Jimmy John's			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$127.88	160 E. Houston			
		San Antonio, TX 78205			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descr	ntion		
_	OF	· · · · · · · · · · · · · · · · · · ·	ck if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Che	ck if Austin, TX, officeholder living expense		
		Grou	Lunch		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	experience to borionic Gro				
	Date	Payee name			
	03/06/2025	Jimmy John's			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$96.18	160 E. Houston			
		San Antonio, TX 78205			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descr	ption		
	OF EXPENDITURE	Food/Beverage Expense	ck if travel outside of Texas. Complete Schedule T.		
			ck if Austin, TX, officeholder living expense for team.		
		F-000	ioi team.		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	Office field		
	Data				
	Date 02/20/2025	Payee name			
		Jimmy John's			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$85.23	160 E. Houston			
		San Antonio, TX 78205			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descr			
	EXPENDITURE	1 000/Develage Expense	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense		
			paign lunch.		
			•		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O				

SCHEDULE F1

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 11/26 Rpt: 29/44	Garza, Nicole Henning (The Honorable) 00067765
4	Date	5 Payee name
	04/14/2025	La Margarita
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$285.46	120 Produce Row
		San Antonio, TX 78207
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Concreting cominer propagation through SARA
		Co-pareting seminar preparation through SABA.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	03/27/2025	La Mexicana
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.66	130 Main Plaza
		San Antonio, TX 78205
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Strategy meeting.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/25/2025	La Mexicana
	Amount (\$)	Payee address; City; State; Zip Code
	\$105.77	130 Main Plaza
	,	
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign meeting.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientale to belieff C/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	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: 12/26 Rpt: 30/44	Garza, Nicole Henning (The Honorable)	00067765
4	Date	5 Payee name	·
	06/27/2025	Luby's Cafeteria	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$82.88	911 N. Main	
		San Antonio, TX 78212	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 1 000/ Develage Experise	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
		Campaign I	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	05/23/2025	Lyft	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$48.93	185 Berry	
		Suite 400	
		San Francisco, CA 94107	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District	rel outside of Texas. Complete Schedule T.
		I — I — I — I — I — I — I — I — I — I —	o and from event.
			Juliu II o III o voni.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	04/29/2025	Lyft	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.19	185 Berry	
		Suite 400	
		San Francisco, CA 94107	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District	rel outside of Texas. Complete Schedule T.
		Check if Aus Transport to	stin, TX, officeholder living expense
		Transport	o event.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense 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 complete this form.
1	Total pages Schedule F1:	
	Sch: 13/26 Rpt: 31/44	Garza, Nicole Henning (The Honorable) 00067765
4	Date	5 Payee name
_	01/28/2025	Mama's Cafe
6	Amount (\$) \$56.56	7 Payee address; City; State; Zip Code 242 Nacogdoches Rd.
	φ30.30	242 Nacoguoches Ru.
		San Antonio, TX 78217
8	PURPOSE	
Ü	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meeting.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	05/07/2025	Mi Taquito Arandas
	Amount (\$)	Payee address; City; State; Zip Code
	\$138.85	6580 FM-78
		San Antonio, TX 78244
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Juror food Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Juror food.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/Oi	1
	Date	Payee name
	02/25/2025	Mi Taquito Arandas
	Amount (\$) \$142.80	Payee address; City; State; Zip Code 6580 FM-78
	Ψ142.00	0300 T WI-70
		San Antonio, TX 78244
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Eve
Accounting/Banking Fee
Consulting Expense Foo
Contributions/ Donations Made By - Gift/

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a extraory pat listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Tatal as a constitute E4.	<u> </u>	_
1	Total pages Schedule F1:		
	Sch: 14/26 Rpt: 32/44	Garza, Nicole Henning (The Honorable) 00067765	
4	Date	5 Payee name	
	03/28/2025	Off Leash Training	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
ľ	\$3,500.00	2411 NE Loop 410	
	Ψ3,300.00	2411 NC 2000 410	
		San Antonio, TX 78217	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Canine training for courthouse dog Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Canine training for courthouse dog	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	
H	Date	Payes name	=
		Payee name	
	04/08/2025	Petco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.90	18138 San Pedro Ave.	
		San Antonio, TX 78259	
	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule) Supplies for therapy dog (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Supplies for therapy dog Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for therapy dog.	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	•	
			_
	Date	Payee name	
	02/18/2025	Petco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$58.26	18138 San Pedro Ave.	
		San Antonio, TX 78259	
			_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Supplies for Amicus Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for Amicus.	
		Supplies for Afflicus.	
_	0 1. 5		_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	onponantire to beliefft 6/01		
]

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

	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: 15/26 Rpt: 33/44	Garza, Nicole Henning (The Honorable) 00067765
4	Date	5 Payee name
	06/26/2025	Petsmart
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$355.00	21019 U.S. Hwy 281 S
		San Antonio, TX 78258
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Items for canine Amicus Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Items for canine Amicus
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/13/2025	Petsmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$151.33	21019 U.S. Hwy 281 S
		San Antonio, TX 78258
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Supplies for Amicus Check if travel outside of Texas. Complete Schedule T. Check if Austin TX off scheduler living suppress
		Check if Austin, TX, officeholder living expense Supplies for Amicus
		Supplies for Afficus
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	05/14/2025	Quik-Trip
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.51	1235 E. Belt Line Rd.,
		Desoto, TX 75115
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Gasoline expense.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

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: 16/26 Rpt: 34/44	Garza, Nicole Henning (The Honorable) 00067765
4	Date	5 Payee name
	04/01/2025	Rover
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$249.75	720 Olive Way
		Seattle, WA 98101
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Care for Amicus Check if travel outside of Texas. Complete Schedule T.
		Care for Amicus.
		Care for Armeds.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	D :	
	Date	Payee name
	04/24/2025	Rover
	Amount (\$)	Payee address; City; State; Zip Code
	\$249.75	720 Olive Way
		Seattle, WA 98101
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Temporary care for canine Check if travel outside of Texas. Complete Schedule T.
	ZA ZIIDII GRZ	Check if Austin, TX, officeholder living expense
		Temporary care for canine
	Operation ONLY if allowed	Open Highest (Office health and a second sec
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	03/17/2025	Rover
	Amount (\$)	Payee address; City; State; Zip Code
	\$249.75	720 Olive Way
		Seattle, WA 98101
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Temporary canine care. Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Temporary canine care.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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 Commit

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	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/26 Rpt: 35/44	Garza, Nicole Henning (The Honorable) 00067765
4	Date	5 Payee name
	02/27/2025	Rover
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$249.75	720 Olive Way
		Seattle, WA 98101
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Care for Amicus Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Temp care for Amicus
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/30/2025	Sam's Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$166.48	2530 Marshall RD
		San Antonio, TX 78259
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office supplies, juror snacks Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign and court supplies.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/06/2025	Sam's Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$288.12	2530 Marshall RD
		San Antonio, TX 78259
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Courthouse supplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Courthouse supplies.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 18/26 Rpt: 36/44	2 FILER NAME Garza, Nicole Henning (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067765
4	Date	5 Payee name
	04/03/2025	Sam's Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$223.58	2530 Marshall RD
		San Antonio, TX 78259
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Courthouse suppplies Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Courthouse supplies
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/24/2025	Sam's Club
_	Amount (\$)	Payee address; City; State; Zip Code
	` ,	
	\$147.00	2530 Marshall RD
		San Antonio, TX 78259
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Courthouse Supplies Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Courthouse supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	<u>'</u>	
	Date	Payee name
	03/12/2025	Sam's Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$214.99	2530 Marshall RD
	421 1100	2000 Maionai No
		San Antonio, TX 78259
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for presiding.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Н

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 Solicitation/Fundraising Expense 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 complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 19/26 Rpt: 37/44 00067765 Garza, Nicole Henning (The Honorable) 4 Date Payee name 02/19/2025 Sam's Club 6 Amount (\$) Payee address; City; State; Zip Code \$63.97 2530 Marshall RD San Antonio, TX 78259 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Supplies for court **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for court Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/14/2025 Shell Oil Amount (\$) Payee address; City; State; Zip Code \$35.21 150 N. Dairy Ashford Houston, TX 77079 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Gasoline for event transport. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/24/2025 St. Paul's Catholic Church Golf Tournament State; Zip Code Amount (\$) Payee address; City: \$300.00 13600 Briggs Ranch San Antonio, TX 78245 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Sponsorship of charity golf tournament. Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Solicitation/Fundraising Expense 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 complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 20/26 Rpt: 38/44	Garza, Nicole Henning (The Honorable)	00067765
4	Date	5 Payee name	·
	06/10/2025	Taco Palenque	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$79.11	20518 US-281	
		San Antonio, TX 78259	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
		Juror Food	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	PH .	
	Date	Payee name	
	02/24/2025	Taco Palenque	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$22.69	20518 US-281	
		San Antonio, TX 78259	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 1 000/Develage Expense	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
		Campaign I	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	PH	
	Date	Payee name	
	02/21/2025	Taco Palenque	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$87.17	20518 US-281	
		San Antonio, TX 78259	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		rel outside of Texas. Complete Schedule T.
		Juror lunch	• '
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	PH .	
1			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel in District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 21/26 Rpt: 39/44 00067765 Garza, Nicole Henning (The Honorable) 4 Date Payee name **Texas Bar Foundation** 01/28/2025 6 Amount (\$) Payee address; State; Zip Code \$272.50 515 Congress Ave., San Antonio, TX 78701 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee membership fees. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/05/2025 Texas Center for the Judiciary Amount (\$) Payee address; City; State; Zip Code \$350.00 1210 San Antonio Suite 800 Austin, TX 78701 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Conference expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/30/2025 Texas Center for the Judiciary Amount (\$) Payee address: City: State; Zip Code \$75.00 1210 San Antonio Suite 800 Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. CLE **EXPENDITURE** Check if Austin, TX, officeholder living expense CLE related expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 Commit

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: 22/26 Rpt: 40/44	Garza, Nicole Henning (The Honorable) 00067765			
4	Date	5 Payee name			
	05/14/2025	Texican Court			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$379.80	501 West Las Colinas			
		Dallas, TX 75039			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Lodging for conference. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Lodging for conference.			
		Lodging for common chico.			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·			
\vdash	Date	Payee name			
	05/13/2025	Texican Court			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$62.25	501 West Las Colinas			
		Dallas, TX 75039			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Dinner at conference.			
		Billief at conference.			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
-	Date	Payee name			
	04/01/2025	Payee name The Camp Outpost			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$430.00	18711 S. Alamo ST.			
		San Antonio, TX 78204			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Food for Judge's Meeting presiding month.			
		1 ood for dadge 5 Weeting presiding month.			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
-					

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

sement Solicitation/Fundraising Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
┝	T. 1				
1	Total pages Schedule F1: Sch: 23/26 Rpt: 41/44	2 FILER NAME Garza, Nicole Henning (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067765			
4	Date	5 Payee name			
	04/03/2025	The Gavel			
6	Amount (\$) \$114.24	7 Payee address; City; State; Zip Code 100 Villita Street			
		San Antonio, TX 78205			
Ļ					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Campaign meeting Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		Campaign lunch			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	03/21/2025	The Original Blanco Cafe			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$162.85	201 W. Commerce St.			
	\$102.85	201 W. Commerce St.			
		San Antonio, TX 78205			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	Food/Beverage Expense			
	EXPENDITURE Check if Austin, TX, officeholder living expense				
		Presiding court luncheon.			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
	Date	Payee name			
	05/15/2025	Thru Project			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$250.00	4502 Centerview Dr			
		Suite 225			
		San Antonio, TX 78228			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.			
		Candidate/Officeholder/Political Committee			
		Support for foster care children through org.			
L					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
┰	Total pages Cabadala E4				
1	Total pages Schedule F1: Sch: 24/26 Rpt: 42/44	2 FILER NAME Garza, Nicole Henning (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067765			
4	Date	5 Payee name			
	06/06/2025	Tony G's Soul Food			
6	Amount (\$) \$64.87	7 Payee address; City; State; Zip Code 915 Hackberry San Antonio, TX 78210			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign meeting.			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	03/06/2025	Tony G's Soul Food			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$186.80	915 Hackberry			
		San Antonio, TX 78210			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense Presiding luncheon.				
		residing function.			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	Date	Payee name			
	02/21/2025	Tony G's Soul Food			
-	Amount (\$)	Payee address; City; State; Zip Code			
	\$106.55	915 Hackberry			
	Φ100.55	313 Haukuchy			
		San Antonio, TX 78210			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense			
		Campaign luncheon.			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this	is form.		
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 25/26 Rpt: 43/44	Garza, Nicole Henning (The Honorable)		00067765	
4	Date	5 Payee name	<u> </u>		
	01/06/2025	Uber Eats			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$32.90	1725 3rd Street			
		San Francisco, CA 94158			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	cription		
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside		
	LAFLINDHORL		Check if Austin, TX, o		expense
		FOOD	d delivery for	meeting.	
_	Complete ONLY if direct	Candidate/Officeholder name Office cought		Office be	old.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought		Office he	eiu
_					
	Date	Payee name			
	02/13/2025	Vargas, Robert			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$125.00	633 S. St. Marys			
		San Antonio, TX 78205			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc			
	OF EXPENDITURE		Check if travel outside Check if Austin, TX, o		
			phics for cam		
		3.65	,p	pang. rana	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O				
	Date	Payee name			
	02/14/2025	Walgreens			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$197.93	20800 US-281			
	¥20.100				
		San Antonio, TX 78258			
	DUDDOCE				
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Descriptor curpolices	Cription Check if travel outside	e of Texas. Com	plete Schedule T.
	EXPENDITURE	Julio Supplies	Check if Austin, TX, o		
		Juro	or supplies		
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense al Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 26/26 Rpt: 44/44	Garza, Nicole Henning (The Honorable)	00067765
4	Date	5 Payee name	
	05/09/2025	William Sessions Inn of Court	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$290.00	225 Reinekers Lane	
		Suite 770	
		Alexandria, VA 22314	
Ļ	DUDD 0.05		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	Louteide of Tours Consolute Colonidate T
	EXPENDITURE	Organization ddes	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Organization	
		J. Sigamzadon	. 4466.
Ļ	Commission ONII V if direct	Candidate Office holder rows	Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	•		