#### 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) 00088246 51 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Juan Ramon NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Alvarez 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. David NAME NICKNAME LAST **SUFFIX** Gorena **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) 381-5606 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff Х appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 332 Hidalgo

**GO TO PAGE 2** 

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 51

13 C / OH NAME	Alvarez, Juan Ramor	(The Honorable)		<b>14</b> Filer ID 00088246	(Ethics Comn	nission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures m	ccepted or political expenditu nay have been made without t uired to report this information	the candidate's or offic	eholder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRI				
	SPECIFIC					
		COMMITTEE CAMPA	AIGN TREASURER NAME			
		COMMITTEE CAMPA	AIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			ITRIBUTIONS(OTHER THAN ONTRIBUTIONS MADE ELEC		\$	0.00
		ICAL CONTRIBUTI	ONS OR GUARANTEES OF LOANS	5)	\$	155,950.00
EXPENDITURE TOTALS	`	IZED POLITICAL EXP		5)	\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITUR	RES		\$	43,076.86
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE LA	AST DAY OF THE	\$	7,761.54
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		tru	wear, or affirm, under penalty le and correct and includes al lder Title 15, Election Code.			
			The Honoral	ble Juan Ramon Alv	arez	
		_		Candidate or Officeho		
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		_ day
of	, 20, to co	ertify which, witness m	y hand and seal of office.			
Signature of offic	er administering oath	Drinted name of	officer administering oath	Title of office	r administerir	ng oath
Signature or offic	on administering batti	i mileu name Ul	omoci aunimistering valit	Tide Of Office	i aariiiiistelli	ig Oddi

# **SUBTOTALS - JC/OH**

# FORM JC/OH **COVER SHEET PG 3**

					3 0f 51
_	LER NAN varez, J	ME Juan Ramon (The Honorable)	<b>19</b> Filer ID 00088246	(Ethics (	Commission Filers)
		E SUBTOTALS SCHEDULE		SU	BTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	155,950.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	40,848.27
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,228.59
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	· 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	1,340.00

	MONET	ARY POLITICAL	CONTRIBUTION	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1		ges Schedule A(J)1 27 Rpt: 4/51	l:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Alvarez, Jua	n Ramon (The Honorable)				000882	46	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount	of Contribution (\$)	
	03/27/2025	A-FAST BAIL BONDS						\$1,000.00
		6 Contributor address; City;	State; Zip Code					
		EDINBURG, TX 78542						
8	Contributor's	Principal Occupation		9 Contributor's Job Title				
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) (if	f any)					
_	Date	Full name of contributor	out-of-state PAC (ID#:	1	Т	Amount	of Contribution (\$)	
	04/22/2025	A-LIGHTENING BAIL B	—	J		Amount	or Contribution (ψ)	\$1,500.00
	0 1/22/2020	Contributor address; City;						+=,000.00
	Contributor's	EDINBURG, TX 78541 Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	spou	se (if any)		
	If contributor i	s a child, law firm of parent(s) (if	f any)					
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount	of Contribution (\$)	
	04/08/2025	A-QUICK BAIL BONDS	<b>_</b>				, ,	\$1,000.00
		Contributor address; City;	State; Zip Code					
		EDINBURG, TX 78540						
	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	f any)					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this t	form.	1 '	pages Schedule A(J)1: 2/27 Rpt: 5/51
2	FILER NAME				3 Filer II	C (Ethics Commission Filers)
	Alvarez, Jua	n Ramon (The Honorable)			00088	3246
4	Date	Date 5 Full name of contributor out-of-state PAC (ID#:)			<b>7</b> Amou	nt of Contribution (\$)
	03/22/2025	25 ALBERTO BARBOSA				\$1,500.00
		<b>6</b> Contributor address; City;	State; Zip Code			
		EDINBURG, TX 78539				
8	Contributor's	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if an	у)
12	If contributor i	s a child, law firm of parent(s) (i	f any)			
_	Date	Full name of contributor	D out of state DAC (ID#)		Т Атош	nt of Contribution (\$)
	04/01/2025	ALEX RANGEL	out-of-state PAC (ID#:	)	Amou	\$500.00 \$500.00
	04/01/2025	Contributor address; City;	Ctata: Zin Cada			Ψ500.00
	Contributor's	MCALLEN, TX 78504 Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if an	у)
	If contributor i	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amou	nt of Contribution (\$)
	04/22/2025	ARTEMIO DE LA FUEN	_			\$2,000.00
		Contributor address; City;	State; Zip Code			
			. ,			
		MCALLEN, TX 78501				
	Contributor's	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if an	у)
	If contributor i	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL C	ONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 3/27 Rpt: 6/51
2	FILER NAME Alvarez, Jua	n Ramon (The Honorable)			3	Filer ID (Ethics Commission Filers) 00088246
4	Date 04/23/2025	Full name of contributor     BALLESTEEROS GONZA     Contributor address; City; Sta			7	Amount of Contribution (\$) \$2,500.00
L		MCALLEN, TX 78501		I		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	O 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 ar	ny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Т	Amount of Contribution (\$)
	04/21/2025	BARRERA, SANCHEZ & A  Contributor address; City; Sta  MCALLEN, TX 78504	ASSOCIATES, PC			\$1,500.00
	Cantuila utaula I			Constributorio Joh Titlo		
	Contributors	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 ar	ny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)
	04/21/2025	CANDELARIO TREVINO				\$5,000.00
		Contributor address; City; Sta			•	
	Contributor's F	I 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 ar	ny)			

	MONET	ARY POLITICAL (	CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 4/27 Rpt: 7/51
2	FILER NAME Alvarez, Jua	n Ramon (The Honorable)			3	Filer ID (Ethics Commission Filers) 00088246
4	Date 04/17/2025	<ul><li>5 Full name of contributor CARLOS E ORTEGON P</li><li>6 Contributor address; City; S</li></ul>		)	7	Amount of Contribution (\$) \$2,500.00
		MISSION, TX 78574				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Π	Amount of Contribution (\$)
	04/21/2025	CHRIS BRASURE  Contributor address; City; Si	<u> </u>			\$5,000.00
		McAllen, TX 78504				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's e	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 a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)
	04/24/2025	CRISELDA RINCON FLC	—			\$1,500.00
		Contributor address; City; S	tate; Zip Code		•	
		PHARR, TX 78577				
	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 a	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		S	CHEDULE A	A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Sch: 5/27 F	Schedule A(J)1 Rpt: 8/51	:
2	FILER NAME				3	Filer ID (E	thics Commission	on Filers)
	Alvarez, Jua	n Ramon (The Honorable)				00088246		
4	Date	te 5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of C	ontribution (\$)	
	04/21/2025	DANIEL PEREZ						\$1,500.00
		6 Contributor address; City;	State; Zip Code					
		EDINBURG, TX 78539						
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pous	e (if any)		
12	If contributor i	s a child, law firm of parent(s) (i	f any)					
_	Date	Full name of contributor	out-of-state PAC (ID#:	1	1	Amount of C	ontribution (\$)	
	04/21/2025	DUBERNEY LAW FIRM	<del></del>			Amount of C	οπιποατίστη (ψ)	\$1,000.00
	0 1/22/2020	Contributor address; City;						+=,000.00
	Contributor's I	EDINBURG, TX 78539 Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	nous	e (if any)		
					роцо	o ( ay)		
	If contributor i	s a child, law firm of parent(s) (i	f any)					
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of C	ontribution (\$)	
	04/24/2025	EDINBURG FITNESS (	ROUP LLC					\$200.00
		Contributor address; City;	State; Zip Code					
		MCALLEN, TX 78504						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pous	e (if any)		
	If contributor i	s a child, law firm of parent(s) (i	f any)					

	MONET	ARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete thi	is form.	1 Total pages Schedule A(J)1: Sch: 6/27 Rpt: 9/51
2	FILER NAME Alvarez, Jua	n Ramon (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088246
4	Date 04/25/2025	5 Full name of contributor  out-of-state PAC (I EL DORADO EVENT VENUE LLC  6 Contributor address; City; State; Zip Code	D#:)	7 Amount of Contribution (\$) \$1,500.00
8	Contributor's I	WESLACO, TX 78596 Principal Occupation	9 Contributor's Job Title	
10	Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12	! If contributor is	s a child, law firm of parent(s) (if any)		
	Date 05/14/2025	/14/2025 ESPINOZA FAMILY ACCOUNT  Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$3,000.00
	Contributor's I	MERCEDES, TX 78570 Principal Occupation	Contributor's Job Title	
	Contributor's 6	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date 04/24/2025	Full name of contributor out-of-state PAC (I Emmanuel Espinoza Law Group, PLLC Contributor address; City; State; Zip Code  McAllen, TX 78504	D#:)	Amount of Contribution (\$) \$1,000.00
	Contributor's I	I Principal Occupation	Contributor's Job Title	
	Contributor's e	employer/law firm	Law firm of contributor's s	pouse (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 Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 7/27 Rpt: 10/51
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Alvarez, Juar	n Ramon (The Honorable)		00088246
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
04/02/2025	G LOPEZ LAW GROUP, PLLC		\$2,500.00
	6 Contributor address; City; State; Zip Code		
	EDINBURG, TX 78539	_	
8 Contributor's P	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's s	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Data I	Full name of contributor  out-of-state PAC (ID#:		Amount of Contribution (\$)
Date 04/21/2025	Full name of contributor out-of-state PAC (ID#:	)	\$1,500.00
04/21/2025	Contributor address; City; State; Zip Code		\$1,500.00
Contributor's P	MCALLEN, TX 78504 Principal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's s	pouse (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 (\$)
04/22/2025	JAIME ALEMAN DBA LAW OFFICE OF JAIME		\$500.00
	Contributor address; City; State; Zip Code		
	EDINBURG, TX 78539		
Contributor's P	Principal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's s	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	1	

	MONET	ARY POLITICAL (	CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 8/27 Rpt: 11/51
2	FILER NAME Alvarez, Jua	n Ramon (The Honorable)			3 Filer ID (Ethics Commission Filers) 00088246
4	Date 04/01/2025	5 Full name of contributor JAIME MORALES 6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code	)	7 Amount of Contribution (\$) \$1,000.00
_	O - retuille reterrite I	MCALLEN, TX 78504		lo consiliurada lab Tilla	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	ny)	<u> </u>	
	Date 04/24/2025	Full name of contributor JESUS CONTRERAS Contributor address; City; St	out-of-state PAC (ID#:_		Amount of Contribution (\$) \$1,500.00
	Contributorio	EDINBURG, TX 78539		Contributor's Job Title	
	Continbutors	Principal Occupation		Contributor's Job Title	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	nny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	04/25/2025	JODY R MASK, PLLC  Contributor address; City; St  MCALLEN, TX 78501	ate; Zip Code		\$2,500.00 
	Contributor's I	Principal Occupation		Contributor's Job Title	,
	Contributor's 6	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 9/27 Rpt: 12/51
2	FILER NAME Alvarez. Jua	n Ramon (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088246
4	Date 06/23/2025	5 Full name of contributor out-of-state PAC (ID JONES, GALLIGAN, KEY & LOZANO, LLP 6 Contributor address; City; State; Zip Code	)	7 Amount of Contribution (\$) \$1,500.00
L	0	WESLACO, TX 78596	le o di di di salami	
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	spouse (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	D#: )	Amount of Contribution (\$)
	04/10/2025	JOSE GUADALUPE GARZA  Contributor address; City; State; Zip Code		\$1,500.00
		MCALLEN, TX 78501		
	Contributor's I	Principal Occupation	Contributor's Job Title	•
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (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	D#:)	Amount of Contribution (\$)
	04/24/2025	JOSE L BRAVO DBA LAW OFFICE OF JOSI		\$1,500.00
		Contributor address; City; State; Zip Code  MCALLEN, TX 78502		
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	spouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	,	

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULE /	A(J)1
	The Instru	ction Guide explains how to complete this	form.	1	es Schedule A(J)1: 27 Rpt: 13/51	:
2	FILER NAME	n Ramon (The Honorable)		3 Filer ID 0008824	(Ethics Commission	n Filers)
4	Date 04/24/2025	Full name of contributor	#:)		of Contribution (\$)	\$1,000.00
		PHARR, TX 78577				
8	Contributor's I	Principal Occupation	9 Contributor's Job Title			
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)		
12	2 If contributor is	s a child, law firm of parent(s) (if any)				
F	Date	Full name of contributor  out-of-state PAC (ID:	#: )	Amount o	of Contribution (\$)	
	04/10/2025	LAW OFFICE OF AGUSTIN HERNANDEZ  Contributor address; City; State; Zip Code			· ·	\$1,500.00
		EDINBURG, TX 78539	1			
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's 6	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	Full name of contributor out-of-state PAC (ID:	#:)	Amount o	of Contribution (\$)	
	03/14/2025	LAW OFFICE OF CARLOS R GALVAN				\$1,000.00
		Contributor address; City; State; Zip Code  EDINBURG, TX 78539				
	Contributor's I	Principal Occupation	Contributor's Job Title			
	Contributor 3 i	тіпора Оссираціон	Contributor's 300 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)				

	MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 11/27 Rpt: 14/51
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Alvarez, Jua	n Ramon (The Honorable)		00088246
4	1 Date 5 Full name of contributor  ut-of-state PAC (ID#:)		7 Amount of Contribution (\$)	
	04/23/2025	LAW OFFICE OF CHARLES RAADT, PLLC  6 Contributor address; City; State; Zip Code		\$500.00
		MCALLEN, TX 78504		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	±· )	Amount of Contribution (\$)
	04/24/2025	LAW OFFICE OF DAMIAN C. OROZCO	·	\$500.00
		Contributor address; City; State; Zip Code		
		PHARR, TX 78577		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	<i>‡</i> : )	Amount of Contribution (\$)
	04/17/2025	LAW OFFICE OF DENNIS RAMIREZ		\$5,000.00
		Contributor address; City; State; Zip Code		
		DONNA, TX 78537		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBU	TIONS .		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A(J)1: Sch: 12/27 Rpt: 15/51
2	FILER NAME	n Ramon (The Honorable)		3	Filer ID (Ethics Commission Filers) 00088246
4	Date 04/22/2025	te 5 Full name of contributor out-of-state PAC (ID#:) 7		Amount of Contribution (\$) \$5,000.00	
		WESLACO, TX 78599			
8	Contributor's F	Principal Occupation	9 Contributor'	s Job Title	
10	Contributor's 6	employer/law firm	11 Law firm of	contributor's spou	use (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if any)			
	Date 04/23/2025	Full name of contributor out-of-state PAC ( LAW OFFICE OF GREGORIO TREVINO  Contributor address; City; State; Zip Code	ID#:		Amount of Contribution (\$) \$500.00
	Contributor's F	PHARR, TX 78577 Principal Occupation	Contributor'	s Job Title	
	Contributor's 6	employer/law firm	Law firm of	contributor's spou	use (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 (\$)
	05/20/2025	LAW OFFICE OF MARCO A DE LUNA  Contributor address; City; State; Zip Code			\$2,500.00
	Contributor's F	MCALLEN, TX 78504 Principal Occupation	Contributor'	s Job Title	
	Contributor's 6	employer/law firm	Law firm of	contributor's spou	use (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 how to complete this t	orm.	1 Total pages Schedule A(J)1: Sch: 13/27 Rpt: 16/51
2	FILER NAME Alvarez. Jua	ın Ramon (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088246
4	Date 04/18/2025	5 Full name of contributor out-of-state PAC (ID#:) 7		7 Amount of Contribution (\$) \$1,500.00
_	0	EDINBURG, TX 78539	Le Constitute de Joh Tille	
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of Contribution (\$)
	04/22/2025	LAW OFFICE OF MICHAEL R. DE LEON, PLLe  Contributor address; City; State; Zip Code  EDINBURG, TX 78539		\$2,500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Contributors	rillicipal Occupation	Contributor 3 300 Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	03/14/2025	LAW OFFICE OF MONICA M GALVAN		\$1,000.00
		Contributor address; City; State; Zip Code  EDINBURG, TX 78539		
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 14/27 Rpt: 17/51
2	FILER NAME Alvarez, Jua	ın Ramon (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088246
4	Date 04/23/2025			7 Amount of Contribution (\$) \$2,500.00
0	Contributor's	MCALLEN, TX 78504 Principal Occupation	9 Contributor's Job Title	
0	Continuators	Ринсіраі Оссираціон	5 Continuator's Job Title	
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	pouse (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 (\$)
	04/03/2025	LAW OFFICE OF RAUL A GUAJARDO PLLC  Contributor address; City; State; Zip Code  EDINBURG, TX 78539		. \$2,500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Continuators	Ринсіраї Оссираціон	Continuators Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	pouse (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 (\$)
	04/01/2025	LAW OFFICE OF ROBERT M. CAPELLO JR,  Contributor address; City; State; Zip Code  EDINBURG, TX 78539	PC	. \$1,000.00
	Contributor's I	I Principal Occupation	Contributor's Job Title	
	Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (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 how to complete this	1	Total pages Schedule A(J)1: Sch: 15/27 Rpt: 18/51	
2	FILER NAME Alvarez. Jua	n Ramon (The Honorable)		3	Filer ID (Ethics Commission Filers) 00088246
4	Date 04/24/2025			7	Amount of Contribution (\$) \$500.00
		EDINBURG, TX 78539			
8	Contributor's I	Principal Occupation	9 Contributor's Job Title		
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	pous	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor  uut-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	06/07/2025	LAW OFFICE OF SAVANNAH GONZALEZ  Contributor address; City; State; Zip Code			\$1,500.00
		EDINBURG, TX 78539			
	Contributor's I	Principal Occupation	Contributor's Job Title		
	Contributor's	employer/law firm	Law firm of contributor's sp	pous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	1		
	Date	Full name of contributor  ut-of-state PAC (ID#:	:)		Amount of Contribution (\$)
	04/22/2025	LAW OFFICES OF MARIO DAVILA, PLLC			\$2,500.00
		Contributor address; City; State; Zip Code  MCALLEN, TX 78502		••	
	0		O antilla standa dala Tida		
	Contributor's I	Principal Occupation	Contributor's Job Title		
	Contributor's	employer/law firm	Law firm of contributor's sp	pous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	I		

	MONET	ARY POLITICAL CONTE	RIBUTIO	DNS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to com	plete this f	form.	1	tal pages Schedule A(J)1 h: 16/27 Rpt: 19/51	:
2	FILER NAME				3 Fil	er ID (Ethics Commission	on Filers)
	Alvarez, Jua	n Ramon (The Honorable)			oc	088246	
4	1 Date 5 Full name of contributor out-of-state PAC (ID#:)  LAW OFFICES OF RICHARD GARZA  6 Contributor address; City; State; Zip Code		<b>7</b> An	nount of Contribution (\$)	\$1,500.00		
_	Caratrila vita via	EDINBURG, TX 78539		In Contributorio Joh Title			
8	Contributors	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	oouse (i	f any)	
12	! If contributor i	s a child, law firm of parent(s) (if any)		L			
	Date	Full name of contributor out-of-s	state PAC (ID#:_	)	An	nount of Contribution (\$)	
	05/14/2025	LEGAL SUPPORT SERVICES		,		<b>(·</b> ,	\$1,000.00
		Contributor address; City; State; Zip Co	ode				
		DONNA, TX 78537					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (i	f any)	
	If contributor i	s a child, law firm of parent(s) (if any)		•			
	Date	Full name of contributor out-of-s	state PAC (ID#:_	)	An	nount of Contribution (\$)	
	04/08/2025	Law Office of Diana Fuentes Aguila					\$500.00
		Contributor address; City; State; Zip Co					
		Weslaco, TX 78596					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (i	f any)	
	If contributor i	s a child, law firm of parent(s) (if any)		I			

	MONET	ARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A(J)1: Sch: 17/27 Rpt: 20/51
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Alvarez, Jua	n Ramon (The Honorable)		00088246
4	Date 05/02/2025  5 Full name of contributor out-of-state PAC (ID#:) Law Office of Jorge Luis Ortegon  6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$1,000.00	
		Ediburg, TX 78539		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
10	Contributor's	employer/law firm	11 Law firm of contributor's	spouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	(ID#· )	Amount of Contribution (\$)
	04/21/2025	Law Office of Michael E. Flanagan	(10#)	\$1,000.00
		Contributor address; City; State; Zip Code		
		McAllen, TX 78501		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  out-of-state PAC (	(ID#:)	Amount of Contribution (\$)
	04/22/2025	Law Office of Roberto Salazar		\$1,500.00
		Contributor address; City; State; Zip Code		
	Cambrilla stanla	McAllen, TX 78504	Contributorio Joh Title	
	Contributors	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)	<b>-</b>	

	MONET	ARY POLITICAL	CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 18/27 Rpt: 21/51
2	FILER NAME Alvarez, Jua	n Ramon (The Honorable)			3	Filer ID (Ethics Commission Filers) 00088246
4	Date 04/07/2025			7	Amount of Contribution (\$) \$1,500.00	
		WESLACO, TX 78596		T		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	ous	e (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 (\$)
	04/21/2025	NORMAN CORDOVA JF Contributor address; City; S EDINBURG, TX 78542	R, LLC DBA SOUTH TE			\$2,000.00
_	Cantuila utaula I			Contributorio Joh Titlo		
	Contributors	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	e (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 (\$)
	05/20/2025	O RENE FLORES PC	_			\$2,500.00
		Contributor address; City; S  EDINBURG, TX 78539	State; Zip Code		•	
-	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor 3 i	тиора оссираноп		CONTRIBUTOR S COS TITLE		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	I		

	MONET	ARY POLITICAL CONTRIB	UTIC	)NS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to complete	this f	orm.	1	Total pages Schedule A(J) Sch: 19/27 Rpt: 22/51	1:
2	FILER NAME Alvarez, Jua	an Ramon (The Honorable)			3	Filer ID (Ethics Commiss 00088246	ion Filers)
4	Date 04/24/2025	5 Full name of contributor  out-of-state PA OCTAVIO CASTANEDA  6 Contributor address; City; State; Zip Code	AC (ID#:_		7	Amount of Contribution (\$)	\$2,500.00
Ļ	- Andrewson I	MCALLEN, TX 78502		To Company to Tale			
		Principal Occupation		9 Contributor's Job Title			
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)	
12	! If contributor is	is a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-state PA	AC (ID#:_	)	Π	Amount of Contribution (\$)	
	04/24/2025	OMAR OCHOA LAW FIRM, PC  Contributor address; City; State; Zip Code  MCALLEN, TX 78501					\$2,500.00
<u> </u>	C tulle standard	l .		To the state of the state			
		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 uut-of-state PA	AC (ID#:_			Amount of Contribution (\$)	
	04/24/2025	PALACIOS GARZA & THOMPSON, PC					\$1,000.00
		Contributor address; City; State; Zip Code EDINBURG, TX 78539					
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	is a child, law firm of parent(s) (if any)		L			

	MONET	ARY POLITICAL CO	NTRIBUTIC	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A(J)1: Sch: 20/27 Rpt: 23/51
2	FILER NAME	n Ramon (The Honorable)			3	Filer ID (Ethics Commission Filers) 00088246
4	Date 05/14/2025	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$) \$2,500.00	
		MCALLEN, TX 78504				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	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#:_	)	Π	Amount of Contribution (\$)
	04/21/2025	RAMON WORTHINGTON N  Contributor address; City; State	ICOLAS & CANTU			\$1,500.00
		EDINBURG, TX 78539				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	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)				
	Date	Full name of contributor	out-of-state PAC (ID#:_			Amount of Contribution (\$)
	04/23/2025	RENE CASTELLANOS	•			\$2,500.00
		Contributor address; City; State  EDINBURG, TX 78539	; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
				ATTORNEY		
	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)	ſ			

MONET	ARY POLITICAL CONT	RIBUTIONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to con	nplete this form.	1 Total pages Schedule A(J)1: Sch: 21/27 Rpt: 24/51
2 FILER NAME	D (71 11 11)		3 Filer ID (Ethics Commission Filers)
Alvarez, Jua	n Ramon (The Honorable)		00088246
4 Date 04/17/2025	5 Full name of contributor ☐ out-of REYES, ROBERTA LEE (Mrs.)	-state PAC (ID#:)	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip C	code	
	WESLACO, TX 78599		
8 Contributor's F	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)	I	
Date	Full name of contributor	-state PAC (ID#:)	Amount of Contribution (\$)
04/22/2025	RICARDO PEREZ	State 1 No (ID#)	\$1,500.00
	Contributor address; City; State; Zip C	Code	
	MCALLEN, TX 78501		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	pouse (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 (\$)
04/22/2025	RICKY ROD LAW GROUP		\$2,500.00
	Contributor address; City; State; Zip C	Code	
	EDINBURG, TX 78539		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	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)	I	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A(J)1: Sch: 22/27 Rpt: 25/51
2	FILER NAME Alvarez, Jua	ME uan Ramon (The Honorable)		3	Filer ID (Ethics Commission Filers) 00088246	
4	Date 04/22/2025	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$) \$1,500.00	
		BROWNSVILLE, TX 785	20			
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	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)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)
	04/08/2025	RUY MIRELES LAW FIR Contributor address; City; S MISSION, TX 78572	M PLLC			\$2,500.00
	Cantuila utaula I			Contributorio Job Titlo		
	Contributors	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)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	04/16/2025	SAENZ, JORGE (Dr.)  Contributor address; City; S	State; Zip Code			\$5,000.00
		WESLACO, TX 78596				
	Contributor's F	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)	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A(J)1			
	The Instru	ction Guide explains how to complete th	1 Total pages Schedule A(J)1: Sch: 23/27 Rpt: 26/51			
2	FILER NAME			3 Filer ID (Ethics Commission Filers)		
	Alvarez, Jua	n Ramon (The Honorable)		00088246		
4	Date	5 Full name of contributor out-of-state PAC (	ID#:)	7 Amount of Contribution (\$)		
	04/16/2025	SAENZ, KARLA (Mrs.)		\$5,000.00		
		6 Contributor address; City; State; Zip Code				
		WESLACO, TX 78596				
8	Contributor's I	Principal Occupation	9 Contributor's Job Title			
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)		
12	! If contributor i	s a child, law firm of parent(s) (if any)				
-	Date	Full name of contributor	ID#· )	Amount of Contribution (\$)		
	03/24/2025	THE LAW OFFICE OF CARLOS A GARCIA		\$2,500.00		
	0012-112025	Contributor address; City; State; Zip Code				
	Contributorlo	MISSION, TX 78572	Contails starte Jak Title			
	Contributor's I	Principal Occupation	Contributor's Job Title			
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)		
	If contributor i	s a child, law firm of parent(s) (if any)				
F	Date	Full name of contributor	ID#·	Amount of Contribution (\$)		
	04/09/2025	THE LAW OFFICE OF HECTOR HERNAND		\$5,000.00		
	0 110012020	Contributor address; City; State; Zip Code				
		Contributor address, City, State, 21p Code				
		EDINBURG, TX 78539				
	Contributor's I	Principal Occupation	Contributor's Job Title			
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)		
	If contributor i	s a child, law firm of parent(s) (if any)	1			

	MONET	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1		
	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 24/27 Rpt: 27/51		
2	FILER NAME Alvarez, Jua	an Ramon (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088246		
4	Date 04/22/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: THE LAW OFFICE OF RENE A FLORES, PLLC</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$3,000.00		
_	Caratribustania I	MISSION, TX 78572	Constitute vio 16b Title			
ď	CONTRIBUTOR S F	Principal Occupation	9 Contributor's Job Title			
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	spouse (if any)		
12	12 If contributor is a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	)	Amount of Contribution (\$)		
	04/23/2025 THE LOPEZ LAW GROUP, PLLC  Contributor address; City; State; Zip Code			\$3,000.00		
$\vdash$	Contributoric	WESLACO, TX 78596	Contributor's Job Title			
		Principal Occupation				
	Contributor's 6	employer/law firm	Law firm of contributor's sp	spouse (if any)		
	If contributor is	is a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)		
	04/23/2025	THE SANCHEZ LAW FIRM PLLC		\$250.00		
		Contributor address; City; State; Zip Code  MCALLEN, TX 78504				
	Contributor's F	Principal Occupation	Contributor's Job Title			
Contributor's employer/law firm			Law firm of contributor's sp	spouse (if any)		
	If contributor is	is a child, law firm of parent(s) (if any)				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1			
	The Instruction Guide explains how to complete this form.					Total pages Schedule A Sch: 25/27 Rpt: 28/5			
2	FILER NAME				3	Filer ID (Ethics Comm	ission Filers)		
	Alvarez, Jua	n Ramon (The Honorable)				00088246			
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	(\$)			
	04/24/2025	TIJERINA LAW FIRM, F	PC				\$1,500.00		
		<b>6</b> Contributor address; City;	State; Zip Code						
		EDINBURG, TX 78539							
8	Contributor's	Principal Occupation		9 Contributor's Job Title					
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pous	se (if any)			
12	If contributor i	s a child, law firm of parent(s) (i	f any)						
		, , , ,	,						
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution	(\$)		
	04/21/2025	TIMOTHY DAVIS					\$1,500.00		
		Contributor address; City;	State: Zip Code						
		Contributor address, Sky,	otato, zip oodo						
		MOALLEN TV 70004							
		MCALLEN, TX 78504		I					
	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	f any)	1					
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution	(\$)		
	04/20/2025	TRACI L EVANS DBA 1	THE LAW OFFICE OF T	RACI L. EVANS			\$1,000.00		
		Contributor address; City;	State; Zip Code		"				
		EDINBURG, TX 78539							
	Contributor's	I 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	f any)	•					

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1			
	The Instru	ction Guide explains how to complet	1	Total pages Schedule A(J)1: Sch: 26/27 Rpt: 29/51					
2	FILER NAME	n Ramon (The Honorable)			3	Filer ID (Ethics Commission Filers) 00088246			
4	Date		PAC (ID#:	,	7	Amount of Contribution (\$)			
	04/10/2025					\$5,000.00			
		McAllen, TX 78504							
8	Contributor's F	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	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 (\$)			
04/18/2025 VERONICA ONTIVEROS  Contributor address; City; State; Zip Code					\$2,500.00				
		MCALLEN, TX 78504		T					
	Contributor's F	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)							
	Date	Full name of contributor out-of-state	PAC (ID#:_	)		Amount of Contribution (\$)			
	04/21/2025	VILLALOBOS & VILLALOBOS PC				\$1,500.00			
		Contributor address; City; State; Zip Code  MCALLEN, TX 78504							
-	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>				
	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)		I					

	MONET	TARY POLITICAL CONTRIBU	SCHEDULE A(J)1			
	The Instru	ction Guide explains how to complete t	1 Total pages Schedule A(J)1: Sch: 27/27 Rpt: 30/51			
2	FILER NAME Alvarez, Jua	an Ramon (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088246			
4	Date 04/17/2025	5 Full name of contributor  out-of-state PAC YOUNGS & ROSILLO LAW FIRM, PLLC 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$1,500.00			
		EDINBURG, TX 78539				
8	Contributor's F	Principal Occupation	9 Contributor's Job Title			
10	Contributor's 6	employer/law firm	11 Law firm of contributor's	spouse (if any)		
12	. If contributor is	is a child, law firm of parent(s) (if any)				
	Date 04/07/2025	Full name of contributor out-of-state PAC ZAMARRON DIVISIONS LLC Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$) \$1,500.00		
		MISSION, TX 78574				
Contributor's Principal Occupation Contributor's Job Title						
	Contributor's 6	employer/law firm	Law firm of contributor's	spouse (if any)		
	If contributor is	is a child, law firm of parent(s) (if any)				

### SCHEDULE F1

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

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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	al Committee Legal Services SalariesM  The Instruction Guide explains how to co		c/Contract Labor OTHER (enter a category not listed above) ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/9 Rpt: 31/51	Alvarez, Juan Ramon (The Honorable)		00088246
4	Date	5 Payee name		
	01/03/2025	AGUILAR, JERSON		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$500.00			
		тх		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense BACK DROP SET UP FOR SWEARING IN
				BACK BROT SET OF TOR SWEAKING IN
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		9	C
	Date	Payee name		
	04/10/2025	ALVAREZ & CANALES, PLLC		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$2,500.00	112 S 12TH AVE		
		EDINBURG, TX 78539		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				REIMBURSEMENT FOR PAYMENT TO OLIVE
				MARKETING
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI		•	
	Date	Payee name		
	05/13/2025	ALVAREZ & CANALES, PLLC		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$10,000.00	112 S 12TH AVE		
		EDINBURG, TX 78539		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  LOAN PAYMENT
				LOTAVI ATIVILIVI
-	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		J	<del></del>

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
┝	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 2/9 Rpt: 32/51	Alvarez, Juan Ramon (The Honorable)	00088246
4	Date	5 Payee name	•
	01/03/2025	AUDELO, JOSE (Mr.)	
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code	
		TX	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
l		BA	R TENDER
l			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Г	Date	Payee name	
	04/24/2025	AUDELO, JOSE (Mr.)	
L		• •	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$400.00		
		TX	
┝	BUBBOOF		
	PURPOSE OF		scription
l	EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
l		I — I —	Check if Austin, TX, officeholder living expense
		l BA	R TENDER FOR SKEET SHOOT
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Г	Date	Payee name	
	01/03/2025	BRAND BOOSTERS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$460.06	301 N MCCOLL RD, STE G	
l			
		MCALLEN, TX 78501	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
l		l	GN PRINTING FOR SWEARING IN
l			
L			
ĺ	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
l	expenditure to benefit C/OI	н	
H			
l			
L			

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 3/9 Rpt: 33/51	Alvarez, Juan Ramon (The Honorable) 00088246
4	Date	5 Payee name
	03/24/2025	BRAND BOOSTERS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,400.00	301 N MCCOLL RD, STE G
		MCALLEN, TX 78501
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  SIGNS FOR SKEET SHOOT
		SIGNOT ON SICELY SHOOT
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/03/2025	CANTU EVENTS DECOR
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,407.25	121 US-83 BUSS
		MCALLEN, TX 78503
	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
		DECOR FOR SWEARING IN
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/22/2025	CANTU, LETICIA (Ms.)
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$1,300.00	
		тх
T	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		CATERING/FOOR FOR SWEARING IN
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
I		

### 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	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	nse Printir Salari	·	se s/Contract Labor	Tra	vel in District vel Out of Dis HER (enter a	trict category not listed above)	
1	Total pages Schedule F1:						l	er ID	(Ethics Commission Filers)	
L	Sch: 4/9 Rpt: 34/51	Alvarez, Ju	ıan Ramon (The Hor	norable)			00	088246		
4	Date	5 Payee name	)							
L	04/24/2025	FLORES, I	MIKE (Mr.)							
6	Amount (\$) \$700.00	7 Payee addre	ess; City;	State; Zip	Code					
8	PURPOSE				(h)	Description				_
•	OF EXPENDITURE	Event Expe	See Categories listed at the topense	o of this schedule)		Check if Austin	, TX, offic	eholder living	plete Schedule T. expense KERS FOR SKEET	
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office	sought			Office he	eld	
	Date	Payee name	)						<u> </u>	
	01/03/2025	GARCIA, I	SRAEL (Mr.)							
	Amount (\$) \$700.00	Payee addre	ess; City;	State; Zip	Code				<del></del>	
		TX								
	PURPOSE OF EXPENDITURE	(a) Category (s Event Expe	See Categories listed at the top	o of this schedule)	(b)	Description Check if travel Check if Austin MUSIC/DJ F	ı, TX, offic	eholder living		
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office s	sought			Office he	eld	
	Date	Payee name	2							
L	03/07/2025	GONZALE	Z, LIZETTE							
	Amount (\$) \$474.97	Payee addre 403 LAUR		State; Zip	Code					
		ALAMO, T	X 78516							
	PURPOSE OF EXPENDITURE		See Categories listed at the top syment/Reimburseme		(b)	Description  Check if travel  Check if Austin  FOOD/DRINI	, TX, offic		plete Schedule T. expense	
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office s	sought			Office he	eld	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising 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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 5/9 Rpt: 35/51	Alvarez, Juan Ramon (The Honorable) 00088246
4	Date	5 Payee name
	05/01/2025	GONZALEZ, LIZETTE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	403 LAURA DR
		ALAMO, TX 78516
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  REIMBURSEMENT FOR EVENT SUPPLIES
		KEIWIBOKSEWENT FOR EVENT SOFFEIES
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	04/25/2025	HERNANDEZ, MARICELA
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	
		TX
	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
		MASTER OF CEREMONIES
		in to take the second of the s
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	05/12/2025	HINOJOSA, IRIS (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	
		тх
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITORE	Candidate/Officeholder/Political Committee
l		CANCER PATIENT
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor 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: 6/9 Rpt: 36/51 Alvarez, Juan Ramon (The Honorable) 00088246 4 Date Payee name 02/28/2025 MI RANCHITO SPORTING CLAYS 6 Amount (\$) Payee address; City; State; Zip Code \$500.00 35003 COUNTY RD 4848 LINN, TX 78563 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. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense VENUE RENTAL Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/24/2025 MI RANCHITO SPORTING CLAYS Amount (\$) Payee address; State; Zip Code City; \$3,700.00 35003 COUNTY RD 4848 LINN, TX 78563 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense VENUE RENTAL Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/31/2025 OLIVE BRANCH MEDIA DBA OLIVE MARKETING FIRM Amount (\$) Payee address: City: State: Zip Code \$2,500.00 1100 E JASMINE AVE, STE 205 MCALLEN, TX 78501 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense CONTENT DEVELOPMENT Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

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

Advertising Expense Accounting/Banking

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	l Committee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense i		oense ages/Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	l					1	Filer ID	(Ethics Commission Filers)
L	Sch: 7/9 Rpt: 37/51	Alva	rez, Juan Ramon (The F	lonorable)				00088246	
4	Date	<b>5</b> Paye	e name						
	05/06/2025	OLIV	'E BRANCH MEDIA DB	A OLIVE MA	ARKETI	NG FIRM			
6	Amount (\$)	<b>7</b> Paye	e address; City;	State;	Zip Coo	le			
	\$2,500.00	1100	E JASMINE AVE, STE	205					
		MCA	LLEN, TX 78501						
8	PURPOSE	(a) Cate	GORY (See Categories listed at the	e top of this sched	lule)	(b) Description			
	OF EXPENDITURE	1	ertising Expense			<b>=</b>		le of Texas. Comp	
	EXI ENDITORE					ш		officeholder living	
						CONTENT D	ı⊏VE	ELUPMENT	
9	Complete ONLY if direct	Candi	late/Officeholder name	<u> </u>	fice sour	ıht		Office he	ald
9	Complete ONLY if direct expenditure to benefit C/O		late/Officeholder name		fice soug	)iit		Onice ne	iiu
	Date	Paye	e name						
	06/04/2025	OLIV	'E BRANCH MEDIA DB	A OLIVE MA	ARKETI	NG FIRM			
	Amount (\$)	Paye	e address; City;	State;	Zip Coc	le			
	\$3,995.00	1100	E JASMINE AVE, STE	205					
		MCA	LLEN, TX 78501						
	PURPOSE	(a) Cate	GORY (See Categories listed at the	e top of this sched	lule)	(b) Description			
	OF EXPENDITURE		ertising Expense			<u> </u>		le of Texas. Comp	
						ш		officeholder living	
						CONTENT D	,⊏VE	_LUF IVIEIV I	
H	Complete ONLY if direct	Candid	late/Officeholder name	Off	fice soug	ıht		Office he	eld
	expenditure to benefit C/O		actor of moonload frame	Oli	30uy	,		Jinoc He	··•
_	Date	Dovo	o namo						
	Date 03/10/2025	1 ′	e name /E BRANCH MEDIA DB.		ΔΡΚΕΤΙ	NG FIRM			
	Amount (\$) \$2,500.00	1	e address; City;	•	Zip Coo	ie			
	Φ∠,5∪∪.00	1 1100	E JASMINE AVE, STE	203					
		MCA	LLEN, TX 78501						
	PURPOSE	(a) Cate	Gory (See Categories listed at the	top of this sched	lule)	(b) Description			
	OF EXPENDITURE	Adve	ertising Expense					le of Texas. Comp	
						CONTENT D		officeholder living	
						CONTENT	, ∟ v [		
	Complete ONLY if direct	Candid	late/Officeholder name	∩ff	fice soug	ıht		Office he	eld
	expenditure to benefit C/O		actor of moonload frame	Oli	30ug	,		Jinoc He	··•

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/9 Rpt: 38/51	Alvarez, Juan Ramon (The Honorable) 00088246
4	Date	5 Payee name
	05/12/2025	RICK'S ICE CO.
6	Amount (\$) \$225.00	7 Payee address; City; State; Zip Code 401 W. CLARK ST. PHARR, TX 78577
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ICE FOR SKEET SHOOT
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2025	ROCHA, IRMA (Ms.)
	Amount (\$) \$210.00	Payee address; City; State; Zip Code  TX
	DUDDOCE	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  PASTRIES FOR SWEARING IN
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	ROCHA, JESSICA
	Amount (\$) \$825.99	Payee address; City; State; Zip Code
		тх
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Loan Repayment/Reimbursement  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  REIMBURSEMENT FOR PURCHASE OF ALCOHOL FOR SWEARING IN
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

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

			The instruction Guide expla	ilis flow to	COIII	piete this form.				
L	Total pages Schedule F1:	2	FILER NAME			3	3	Filer ID	(Ethics Commission File	ers)
	Sch: 9/9 Rpt: 39/51		Alvarez, Juan Ramon (The Honorab	ole)				00088246		
ļ	Date	5	Payee name							
	01/06/2025		RODRIGUEZ, THIRUMAGAL (Ms.)							
j	Amount (\$) \$1,200.00	7	Payee address; City; Sta 3016 INDIAN CREEK AVE	ate; Zip	Code	е				
			Mcallen, TX 78504							
3	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Loan Repayment/Reimbursement	s schedule)	(k	Check if travel out Check if Austin, T.	гх, <b>/IE</b>	officeholder living	•	
)	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office s	sough	nt		Office he	eld	

\$300.00		
	WESLACO, TX 78596	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Loan Repayment/Reimbursement	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  REIMBURSEMENT FOR TENTS FOR SKEET SHOOT

Complete ONLY if direct expenditure to benefit C/OH

Date

04/24/2025

Amount (\$)

Candidate/Officeholder name

VALDEZ, ANNETTE (Ms.)

City;

Payee name

Payee address;

Office sought

State; Zip Code

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 Constributions/ Donations Made Candidate/Officeholder/Polit Credit Card Payment		<i>1</i> -	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/\	Expense Wages/Contract Labor	T T	ravel in Disti ravel Out of	
	•		The Instruction Guide explains	how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NAME				3 F	iler ID	(Ethics Commission Filers)
	Sch: 1/6 Rpt: 40/51	Alvarez, Jua	n Ramon (The Honorable)			0	0088246	6
4	Date	5 Payee name						
	04/09/2025	BABAYAGA	APPAREL					
6	Amount (\$)	7 Payee address	ss; City; State;	Zip Co	ode			
	\$270.00	810 DIEGO	DR					
	Reimbursement from							
	political contributions intended	MERCEDES	S, TX 78570					
8	PURPOSE	(a) Category (Se	e Categories listed at the top of this sch	edule)	(b) Description	Chec	k if travel ou	utside of Texas. Complete Schedule T.
	OF EXPENDITURE	Event Exper	nse			Chec	ck if Austin, 1	TX, officeholder living expense
	EXPENDITURE	•			CAMPAIGN FLA	GS F	OR SKE	EET SHOOT
9	Complete ONLY if direct	L Candidate/Officeh	older name		Office sought			Office held
	expenditure to benefit C/OH							
	Date	Payee name						
	03/21/2025	DOLLAR GE	ENERAL STORE					
Amount (\$) Payee address; City; State; Zip Code								
\$14.49 302 W CANO ST								
	Reimbursement from							
	political contributions intended	EDINBURG	. TX 78539					
_	PURPOSE		e Categories listed at the top of this sch	adula)	Description	Chec	k if travel or	utside of Texas. Complete Schedule T.
	OF			edule)	Description			TX, officeholder living expense
	EXPENDITURE	F00u/bever	age Expense		SODAS	_		
					JODAS			
_	Complete ONLY if direct	Candidata/Officah	uoldar nama		Office sought			Office held
	expenditure to benefit	Candidate/Officer	loluer name		Office Sought			Office field
	C/OH							
	Date	Payee name						
	03/21/2025	DOLLAR GE	ENERAL					
_				7:n C	- d -			
	Amount (\$)	Payee addres		Zip Co	ode			
	\$9.47	302 E CANO	J					
	Reimbursement from political contributions							
	intended	EDINBURG	, TX 78539					
	PURPOSE	Category (Se	e Categories listed at the top of this sch	edule)	Description	=		utside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Bevera	age Expense		L	Chec	ck if Austin, 1	TX, officeholder living expense
	-				DRINKS			
L								
		Candidate/Officeh	older name		Office sought			Office held
	expenditure to benefit C/OH							
L								

## SCHEDULE G

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit Credit Card Payment		Food/Beverage Expense Po y - Gift/Awards/Memorials Expense Pri al Committee Legal Services Sa	ice Overhead/Rental Expense Iling Expense nting Expense laries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
L		The Instruction Guide explains how	to complete this form.						
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	Sch: 2/6 Rpt: 41/51	Alvarez, Juan Ramon (The Honorable)		00088246					
4	Date	5 Payee name		1					
	04/24/2025	HOBBY LOBBY							
6	Amount (\$)	7 Payee address; City; State; Zi	in Code						
	\$8.64		,p = 0000						
	Reimbursement from political contributions intended	WESLACO TV 79506							
		WESLACO, TX 78596	- I	_					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule	e) <b>(b)</b> Description	Check if Austin TX officeholder living expanse					
	EXPENDITURE	Advertising Expense	L	Check if Austin, TX, officeholder living expense					
			CARDS						
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held					
	C/OH								
H	Data	T _							
	Date	Payee name							
	04/24/2025	HOLIDAY WINE & LIQUOR							
	Amount (\$)								
\$63.86 307 W EXPRESSWAY 83									
	Reimbursement from								
	political contributions intended	WESLACO, TX 78533							
	PURPOSE	Category (See Categories listed at the top of this schedule	e) Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense					
	LAFENDITURE		DRINKS						
		Candidate/Officeholder name	Office sought	Office held					
	expenditure to benefit C/OH								
	Date	Payee name							
	03/03/2025	MARINES BAKERY							
	Amount (\$)	Payee address; City; State; Zi	p Code						
	\$32.05	201 S TEXAS BLVD							
	Reimbursement from								
	political contributions intended	WESLACO, TX 78596							
$\vdash$	PURPOSE	Category (See Categories listed at the top of this schedule	e) Description	Check if travel outside of Texas. Complete Schedule T.					
	OF	Food/Beverage Expense		Check if Austin, TX, officeholder living expense					
	EXPENDITURE	. Sourbeverage Expense	SWEET BREAD	_					
	Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held					
	expenditure to benefit	Sandado, Sinocholdo Hallio	Omoc Sought	Chief Heid					
L	C/OH								

## 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

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

Printing Expense Salaries/Wages/Contract Labor

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

	, , , , , , , , , , , , , , , , , , ,	The Instruction Guide explains how to co	mplete this form.
L	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 3/6 Rpt: 42/51	Alvarez, Juan Ramon (The Honorable)	00088246
ļ	Date	5 Payee name	
	03/04/2025	REYNAS BBQ & COCINA	
;	Amount (\$)	7 Payee address; City; State; Zip Co	de
	\$126.21	812 W I-2	
	Reimbursement from political contributions intended	WESLACO, TX 78596	
3	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
			Observation TV office to define the first and a community
	OF EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense
	-	Food/Beverage Expense	CATERING
	-	Food/Beverage Expense	
•	EXPENDITURE	Food/Beverage Expense  Candidate/Officeholder name	
<del>-</del>	Complete ONLY if direct expenditure to benefit		CATERING
<del>-</del>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	CATERING
• •	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Payee name	CATERING  Office sought  Office held
•	Complete ONLY if direct expenditure to benefit C/OH  Date 04/22/2025	Candidate/Officeholder name  Payee name  SAMS CLUB	CATERING  Office sought  Office held

Amount (\$)	Payee address; City; Sta	te; Zip Code	
\$906.94	621 N EXPRESSWAY 83		
Reimbursement from political contributions intended	HARLINGEN, TX 78550		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this: Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense FOR SKEET SHOOT
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held

expenditure to benefit C/OH

C/OH		
Date 04/22/2025	Payee name SAMS CLUB	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$73.91  Reimbursement from political contributions intended	621 N EXPRESSWAY 83 HARLINGEN, TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held

expenditure to benefit

C/OH

# SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica		mmittee L	and Awards/Memorials Legal Services The Instruction Gu	•		Wages/Contract Labor		OTHER (e		ry not listed above)	)
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID	(Ethics	Commission F	ilers)
	Sch: 4/6 Rpt: 43/51			n Ramon (The	Honorable)				000882	•		
4	Date	5	Payee name									
	03/03/2025		SAMS CLUE	3								
6	Amount (\$)	7	Payee address	-	State;	Zip Co	ode					
	\$67.81		621 N EXPR	ESSWAY 83								
	Reimbursement from political contributions intended		HARLINGEN	I, TX 78550								
8	PURPOSE	(a)	Category (See	e Categories listed at th	ne top of this sche	edule)	(b) Description	=			exas. Complete Sc	
	OF EXPENDITURE		Food/Bevera	ige Expense			l L	_	neck if Austi	n, TX, officeh	older living expense	e
							REFRESHMENT	ΓS				
9		<u>L</u> Car	ndidate/Officeh	older name			Office sought			Office I	held	
	expenditure to benefit C/OH											
	Date		Payee name									
	02/27/2025		SWEET & TA	ASTY LLC								
	Amount (\$)		Payee address	s; City;	State;	Zip Co	ode					
	\$93.36		900 E REDB	UD								
	Reimbursement from political contributions		MOALLEN	FV 70F01								
	intended	_	MCALLEN, 7				l 5 :: F	<del></del>				
	PURPOSE OF		,	Categories listed at the	ne top of this sche	edule)	Description [	=			exas. Complete Sc older living expense	
	EXPENDITURE		Food/Bevera	ige Expense			CATERING			, , ,	3	
							O/ ( Li ( ii)					
		Car	ndidate/Officeh	older name			Office sought			Office I	held	
	expenditure to benefit C/OH											
H	Date		Payee name									
	02/22/2025		SWEET & TA	ASTY LLC								
H	Amount (\$)	$\vdash$	Payee address	s; City;	State:	Zip Co	ode:					
	\$170.12		900 E REDB	-	outo,	_,, 00	<del></del>					
	Reimbursement from											
	political contributions intended		MCALLEN, 7	ΓX 78501								
	PURPOSE		Category (See	Categories listed at the	ne top of this sche	edule)	Description	=			exas. Complete Sc	
	OF EXPENDITURE		Food/Bevera	ige Expense			l L	CI	neck if Austi	n, TX, officeh	older living expense	e
							CATERING					
		Car	ndidate/Officeh	older name			Office sought			Office I	held	
	expenditure to benefit C/OH											

# SCHEDULE G

#### **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		Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide ex			Expense Wages/Contract Labor	Т	Travel Out of District OTHER (enter a category not liste	ed above)
1	Total pages Schedule G:	2	FILER NAME				3 F	Filer ID (Ethics Commis	ssion Filers)
	Sch: 5/6 Rpt: 44/51		Alvarez, Juan Ramon (The Hono	rable)				00088246	
4	Date	5	Payee name				•		
	03/03/2025		V & M Prints						
6	Amount (\$)	7	Payee address; City;	State:	Zip Co	ode			
	\$101.03	ı	401 South Iowa Ave.	•	•				
	Reimbursement from political contributions intended		Weslaco, TX 78596						
8	PURPOSE	(a)	Category (See Categories listed at the top of	this sch	edule)	(b) Description	Che	ck if travel outside of Texas. Con	nplete Schedule T.
	OF EXPENDITURE		Event Expense				Che	ck if Austin, TX, officeholder living	g expense
						PRINTING ON T	rshif	RTS	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Officeholder name			Office sought		Office held	
	Date		Payee name						
	03/06/2025		WALGREENS						
	Amount (\$)		Payee address; City;	State;	Zip Co	ode			
	\$3.98		1701 W BUSS 83						
	Reimbursement from								
	political contributions intended		WESLACO, TX 78596						
	PURPOSE		Category (See Categories listed at the top of	this sch	edule)	Description	=	ck if travel outside of Texas. Con	
	OF EXPENDITURE		Food/Beverage Expense			L	Che	ck if Austin, TX, officeholder living	g expense
						WATER			
	Complete ONLY if direct expenditure to benefit	Can	didate/Officeholder name			Office sought		Office held	
	C/OH								
	Date	_							
	Date	ı	Payee name						
	04/24/2025	├	WALMART SUPERCENTER						
	Amount (\$)	ı		State;	Zip Co	ode			
	\$45.96		1724 W UNIVERSITY DR						
	Reimbursement from political contributions intended		EDINBURG, TX 78539						
	PURPOSE		Category (See Categories listed at the top of	this sch	edule)	Description	Che	ck if travel outside of Texas. Con	nplete Schedule T.
	OF EXPENDITURE		Food/Beverage Expense				Che	ck if Austin, TX, officeholder living	g expense
	2/11/2/10/12					MIXERS FOR D	RINK	(S	
L		L							
	Complete ONLY if direct expenditure to benefit C/OH	Can	didate/Officeholder name			Office sought		Office held	

#### 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. Filer ID Total pages Schedule G: FILER NAME (Ethics Commission Filers) Sch: 6/6 Rpt: 45/51 Alvarez, Juan Ramon (The Honorable) 00088246 Date Payee name 04/24/2025 WALMART Amount (\$) Payee address; City; State; Zip Code \$11.13 1724 W UNIVERSITY DR Reimbursement from political contributions intended EDINBURG, TX 78539 **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** MIXERS FOR DRINKS Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/20/2025 ZAMORAS RESTAURANT Amount (\$) Payee address; City; State; Zip Code \$229.63 5524 N MCCOLL RD Reimbursement from political contributions MCALLEN, TX 78504 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 Food/Beverage Expense **EXPENDITURE CATERING** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: /6 Rpt: 46/51
2	FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Alvarez, Jua	n Ramon (The Honorable)		00088	246
4	Date	5 Name of person from whom amount is received			8 Amount (\$)
	04/24/2025	ALVARADO, AARON			\$20.00
	04/24/2023				Ψ20.00
		6 Address of person from whom amount is received; City; State; Zip Code			
		TV			
		TX			
		<u> </u>	eck if polition	al contr	ribution returned to filer
		RAFFLE TICKET			
	Date	Name of person from whom amount is received			Amount (\$)
	04/24/2025	CADENA, AMANDA			\$100.00
		Address of person from whom amount is received; City; State; Zip Code			
		Address of person from whom amount is received, Only, State, 21p Sode			
		TX			
			ook if politic	al aantr	ibution raturned to filer
			еск іт роііціс	cai contr	ribution returned to filer
		RAFFLE TICKET			
	Date	Name of person from whom amount is received			Amount (\$)
	04/24/2025	CANTU, CYNTHIA			\$100.00
		Address of person from whom amount is received; City; State; Zip Code			
		TX			
		Purpose for which amount is received	eck if politic	al contr	ribution returned to filer
		RAFFLE TICKET			
_					I
	Date	Name of person from whom amount is received			Amount (\$)
	04/24/2025	CANTU, CYNTHIA			\$200.00
		Address of person from whom amount is received; City; State; Zip Code			
		TX			
		Purpose for which amount is received	eck if polition	al contr	ribution returned to filer
		RAFFLE TICKET			
_	Date	Name of person from whom amount is received			Amount (\$)
	04/24/2025	CANTU, GERARDO			\$20.00
	0-1/2-1/2023				Ψ20.00
		Address of person from whom amount is received; City; State; Zip Code			
		TX			
		Purpose for which amount is received	eck if polition	al contr	ribution returned to filer
		RAFFLE TICKET			

	The Instru	cti	on Guide explains how to complete this form.	=			_	es Schedule K: Rpt: 47/51	
2	FILER NAME			:	3	Filer I	D	(Ethics Commission	on Filers)
l	Alvarez, Juan Ramon (The Honorable)						824	16	
4	Date 04/24/2025	ļ	Name of person from whom amount is received CARDENAS, EMILY Address of person from whom amount is received; City; State; Zip Code					Amount (\$)	\$40.00
			TX						
		7	Purpose for which amount is received Creater TICKET	neck if pol	itic	al con	tribu	ution returned to fil	er
Г	Date		Name of person from whom amount is received				T	Amount (\$)	
	04/24/2025		CLAUDIA						\$20.00
			Address of person from whom amount is received; City; State; Zip Code						
			TX						
		H		neck if nol	itic	al con	trihı	ution returned to fil	er
			RAFFLE TICKET	icck ii poi	itic	ai con	LIIDC	ation retained to in	Ci
F	Date	<u>                                       </u>	Name of person from whom amount is received				T	Amount (\$)	
	04/24/2025		CRUZ, AUDRA					Amount ( $\phi$ )	\$40.00
		ļ	Address of person from whom amount is received; City; State; Zip Code				1		
		L	TX						
			<del></del>	neck if pol	itic	al con	tribu	ution returned to fil	er
L			RAFFLE TICKET						
	Date		Name of person from whom amount is received					Amount (\$)	
	04/24/2025	ļ	GAAA, ERNIE						\$20.00
			Address of person from whom amount is received; City; State; Zip Code						
			тх						
		Н	Purpose for which amount is received	neck if pol	itic	al con	tribu	ution returned to fil	er
			RAFFLE TICKET						
F	Date		Name of person from whom amount is received					Amount (\$)	
	04/24/2025		GARCIA, JOEL						\$120.00
		ļ	Address of person from whom amount is received; City; State; Zip Code		••••		1		
			TV						
		L	TX	1 '6 '		-1			
			Purpose for which amount is received Characteristics Character	neck if pol	Itic	al con	tribu	ution returned to fil	er
lacksquare			IVALLE HONET						

<u> </u>									
	The Instru	cti	on Guide explains how to complete this form.		1			ages Schedule K: /6 Rpt: 48/51	
2	FILER NAME				3	Fi	ler ID	(Ethics Commission Fi	lers)
	Alvarez, Juan Ramon (The Honorable) 0008				0088	246			
4	Date	5	Name of person from whom amount is received					8 Amount (\$)	
	04/24/2025		GARCIA, MIKE						\$40.00
		6	Address of person from whom amount is received; City; State; Zip Code	 e					
			TX						
		7	Purpose for which amount is received	Check if p	oliti	ical	contr	ibution returned to filer	
			RAFFLE TICKET						
H	Date		Name of person from whom amount is received					Amount (\$)	
	04/24/2025		GARCIA, NORMA						\$40.00
	04/24/2020	ļ							p-10.00
			Address of person from whom amount is received; City; State; Zip Code	2					
			TX						
		H	Purpose for which amount is received	7 Chock if r	oliti	ical	contr	libution returned to filer	
			RAFFLE TICKET	_ CHECK II }	JUIILI	icai	COIIII	ibation retained to mer	
H		<u>                                     </u>							
	Date		Name of person from whom amount is received					Amount (\$)	
	04/24/2025	ļ	GARCIA, RAUL					\$	\$20.00
			Address of person from whom amount is received; City; State; Zip Code	Э					
			TX						
		⊢		7					
			Purpose for which amount is received  RAFFLE TICKET	Check if p	oliti	ıcal	contr	ibution returned to filer	
L		L							
	Date		Name of person from whom amount is received					Amount (\$)	
	04/24/2025	<u> </u>	GONZALEZ, BRENDA					\$2	100.00
			Address of person from whom amount is received; City; State; Zip Code	9					
		L	TX	_					
			Purpose for which amount is received	_ Check if p	oliti	ical	contr	ibution returned to filer	
L			RAFFLE TICKET						
	Date		Name of person from whom amount is received					Amount (\$)	
	04/24/2025		GONZALEZ, KATTY					5	\$20.00
		l	Address of person from whom amount is received; City; State; Zip Code						
		L	TX						
			Purpose for which amount is received	Check if p	ooliti	ical	contr	ibution returned to filer	
			RAFFLE TICKET						

_										
	The Instru	cti	on Guide explains how to complete this form.	[	1			es Schedule K: Rpt: 49/51		
2	FILER NAME			:	3	Filer I	D	(Ethics Commission	Filers)	
l	Alvarez, Jua	Alvarez, Juan Ramon (The Honorable) 0008					824	8246		
4	Date 04/24/2025	<u> </u>	Name of person from whom amount is received GONZALEZ, MARIA Address of person from whom amount is received; City; State; Zip Code				8	Amount (\$)	\$80.00	
			TX							
		7		neck if not	litic	al con	tribi	ution returned to filer		
		ľ	RAFFLE TICKETS	ieck ii poi	iiuic	ai con	uibu	dion returned to mer		
⊨	Data						_	Δ == α =		
	Date 04/24/2025		Name of person from whom amount is received GONZALEZ, ROXANNE					Amount (\$)	\$20.00	
	04/24/2023	ļ							φ20.00	
l			Address of person from whom amount is received; City; State; Zip Code							
l										
l			TX							
l		H		neck if nol	litic	al con	tribi	ution returned to filer		
l			RAFFLE TICKETS	icck ii poi	iiiic	ai con	uibc	ation retained to mer		
F	D-1-	<u> </u>					_	A		
l	Date 04/24/2025		Name of person from whom amount is received  JARAMILLO, JOSE					Amount (\$)	\$40.00	
l	04/24/2023	ļ							Φ40.00	
l			Address of person from whom amount is received; City; State; Zip Code							
l										
			TX							
		⊢		neck if nol	litic	al con	trihı	ution returned to filer		
			RAFFLE TICKET	icck ii poi	iiii	ai con	uibe	ation retained to mer		
F	Data	$\vdash$					T	Amount (\$)		
	Date 04/24/2025		Name of person from whom amount is received LOPEZ, ANDRES					Amount (\$)	\$60.00	
l	04/24/2023	ļ	·						φ00.00	
			Address of person from whom amount is received; City; State; Zip Code							
			TX							
l		⊢		neck if nol	litic	al con	l trihi	ution returned to filer		
			RAFFLE TICKET	iook ii poi		ar oon		ation rotalined to mer		
F	Date	$\vdash$	Name of person from whom amount is received				$\overline{}$	Amount (\$)		
l	04/24/2025		MARTINEZ, JAIME					Amount (\$)	\$20.00	
l	04/24/2023	ļ							Ψ20.00	
l			Address of person from whom amount is received; City; State; Zip Code							
			TX							
		$\vdash$		neck if not	litic	al con	l tribi	ution returned to filer		
			RAFFLE TICKET	.55K II PUI		.a. 0011	1100	and retained to mer		
$\vdash$		<u> </u>	-							

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: /6 Rpt: 50/51	
2	FILER NAME		3		(Ethics Commission	Filers)
_		n Ramon (The Honorable)	00088		i licio)	
4	Date	5 Name of person from whom amount is received	8 Amount (\$)			
4	04/24/2025	MARTINEZ, MICHAEL			<b>δ</b> Amount (φ)	\$20.00
	04/24/2023					Φ20.00
		6 Address of person from whom amount is received; City; State; Zip Code				
		TX				
			la a a la 16 de a a 1161		::	
		7 Purpose for which amount is received CRAFFLE TICKET	песк іт роііці	cai contr	ibution returned to filer	
		RAFFLE HORET				
	Date	Name of person from whom amount is received			Amount (\$)	
	04/24/2025	RINCON-FLORES, CRISELDA				\$40.00
		Address of person from whom amount is received; City; State; Zip Code				
		TX				
		<u> </u>	heck if polition	cal contr	ibution returned to filer	
		RAFFLE TICKET				
	Date	Name of person from whom amount is received			Amount (\$)	
	04/24/2025	RIVERA, EFREN			\$20.00	
		Address of person from whom amount is received; City; State; Zip Code				
		TX				
		Purpose for which amount is received	heck if polition	cal contr	ibution returned to filer	
		RAFFLE TICKET				
	Date	Name of person from whom amount is received			Amount (\$)	
	04/24/2025	SALINAS, REGINO			` ,	\$20.00
		Address of person from whom amount is received; City; State; Zip Code				
		тх				
		Purpose for which amount is received C	heck if polition	cal contr	ibution returned to filer	
		RAFFLE TICKET	·			
=	Date	Name of person from whom amount is received			Amount (\$)	
	04/24/2025	SAM			Αποαπ (Φ)	\$40.00
	0 112 112020					Ψ10.00
		Address of person from whom amount is received; City; State; Zip Code				
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		<u> </u>	heck if politic	cal contr	libution returned to filer	
		RAFFLE TICKET	neek ii poiltii	oui corili	isation retained to ille	

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 6/6 Rpt: 51/51 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Alvarez, Juan Ramon (The Honorable) 00088246 8 Amount (\$) Date 5 Name of person from whom amount is received 04/24/2025 TIJERINA, ROBERT \$40.00 6 Address of person from whom amount is received; City; State; Zip Code TX Purpose for which amount is received Check if political contribution returned to filer RAFFLE TICKETS Name of person from whom amount is received Amount (\$) Date 04/24/2025 TREVINO, JOSH \$20.00 Address of person from whom amount is received; City; State; Zip Code TX Purpose for which amount is received Check if political contribution returned to filer RAFFLE TICKET Date Name of person from whom amount is received Amount (\$) 04/24/2025 VACENCIO, SANDRA \$20.00 Address of person from whom amount is received; City; State; Zip Code $\mathsf{TX}$ Purpose for which amount is received Check if political contribution returned to filer RAFFLE TICKET