#### 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) 00061857 12 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Lyda A. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Ness-Garcia CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; CITY; 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** The Honorable Lyda A. NAME NICKNAME LAST **SUFFIX** Ness-Garcia **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** (915) 920-1849 **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 OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge Place El Paso District 383rd El Paso District Judge District 383

**GO TO PAGE 2** 

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM JC/OH COVER SHEET PG 2

2 of 12

13 C / OH NAME	Ness-Garcia, Lyda A	. (The Honorable)	)	<b>14</b> Filer ID 00061857	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditure	ns accepted or political expendit s may have been made without required to report this informatio	the candidate's or of	ficeholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ME			
	GENERAL					
		COMMITTEE ADI	DRESS			
	SPECIFIC					
		COMMITTEE CAN	MPAIGN TREASURER NAME			
		COMMITTEE CAI	MPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED POLITICAL C	CONTRIBUTIONS(OTHER THA	 N PLEDGES, LOAN:	5. T	
TOTALS			R CONTRIBUTIONS MADE ELE		\$	1,900.65
		ICAL CONTRIBU PLEDGES, LOANS	<b>JTIONS</b> S, OR GUARANTEES OF LOAN	IS)	\$	3,801.30
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL E	EXPENDITURES		\$	0.00
	4. TOTAL POLIT	ICAL EXPENDIT	URES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		ALL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
			I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.	ty of perjury, that the all information require	accompanying ed to be reporte	report is ed by me
			The Honora	able Lyda A. Ness-	Garcia	
			Signature o	f Candidate or Office	holder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
			s my hand and seal of office.			
Signature of offi	cer administering oath	Printed name	e of officer administering oath	Title of off	icer administeri	ing oath

### **SUBTOTALS - JC/OH**

### FORM JC/OH COVER SHEET PG 3

3 of 12

				3 01 12
18 FILER N	AME	19 Filer ID	(Ethics Comr	nission Filers)
	arcia, Lyda A. (The Honorable)	00061857		
	JLE SUBTOTALS OF SCHEDULE		SUBTO	TAL AMOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	3,801.30
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	0.00
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$	0.00
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	<b>i</b>	\$	0.00
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$	0.00
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
11. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$	426.17
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
			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: 1/2 Rpt: 4/12
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Ness-Garcia	, Lyda A. (The Honorable)			┖	00061857
4	Date 01/03/2025	<ul><li>5 Full name of contributor Erica, Rios</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$485.05
		El Paso, TX 79901				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
_						
12	i Contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	01/03/2025	Hall Law				\$970.10
		Contributor address; City; S	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Continuator 3 i	melpai Occupation		Contributor 3 300 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 (\$)
	01/29/2025	Longoria, Delia Virginia				\$150.00
		Contributor address; City; S	State; Zip Code		•	
	Contributor's F	Principal Occupation		Contributor's Job Title	_	
	Attorney			Attorney at law		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Virginia Long	goria				
	If contributor is	s 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.	1 Total pages Schedule A(J)1: Sch: 2/2 Rpt: 5/12
2	FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
4	Date 01/02/2025  5 Full name of contributor out-of-state PAC (ID#:  Williams, John  6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$295.50
	El Paso, TX 79901	
8	Contributor's Principal Occupation 9 Contrib	outor's Job Title
	Attorney Attorn	ey
10	O Contributor's employer/law firm  John Williams	m of contributor's spouse (if any)

PLEDG	ED CONTRIBUTIONS (JUDICI	AL)		SCHED	ULE B(J)
The II	nstruction Guide explains how to comple	ete this form.	1 Total pages Sc Sch: 1/1 Rpt:		
2 FILER NAME Ness-Garcia	Lyda A. (The Honorable)		<b>3</b> Filer ID (	Ethics Commission	on Filers)
4 TOTAL OF	UNITEMIZED PLEDGES			\$	0.00
5 Date	6 Full name of pledgor out-of-state PAC (ID#:  7 Pledgor Address; City; State; Zip		8 Amount of pledge (\$)	9 In-kind I (If ap	description plicable)
			Check if travel of	outside of Texas.	Complete Schedule T.
10 Pledgor's princ	cipal occupation	11 Pledgor's job title			
12 Pledgor's emp	loyer/law firm	13 Law firm of pledgor	's spouse (if any)		
<b>14</b> If pledgor is a	child, law firm of parent(s) (if any)				

	LOANS (J	UDICIAL)				SCHE	DULE E	(J)
	The Instruction	on Guide explains how to complete this	form.	1		iges Schedul 1 Rpt: 7/12	e E(J):	
2	FILER NAME Ness-Garcia, Ly	da A. (The Honorable)		1	Filer ID	(Ethics Cor 357	nmission Fi	ilers)
4	TOTAL OF UN	IITEMIZED LOANS				\$		0.00
5	Date of loan	7 Name of lender out-of-state Pa	AC (ID#:		)	9 Loan An	nount (\$)	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code			10 Interest		
						<b>11</b> Maturity	Date	
12	2 Lender's Principal	Occupation	13 Lender's Job Title					
14	1 Lender's Employer	r/Law Firm	15 Law Firm of lender's spous	se (if	any)			
16	If lender is child, la	aw firm of parent(s) (if any)	1					
17	7 Description of Coll	ateral	18 Check if personal funds we	ere c	leposited		account structions)	
19	GUARANTOR INFORMATION	20 Name of guarantor	•			22 Amount	Guaranteed	d (\$)
23	not applicable  not applicable	21 Guarantor address; City; State; pal Occupation	Zip Code  24 Guarantor's Job Title					
25	<b>5</b> Guarantor's Emplo	over/I aw Firm	26 Law Firm of guarantor's sp	ากแร	e (if anv)	1		
			20 Law Film Of guarantor 5 Sp					
27	' If guarantor is child	d, law firm of parent(s) (if any)						

	The Instruction Guide explains how to	complete thi	15 101111.
Total pages Schedule I: Sch: 1/5 Rpt: 8/12	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)		3 Filer ID (Ethics Commission Filers 00061857
Date 02/03/2025	5 Payee name Albertsons		
Amount (\$) 67.21	7 Payee Address; City; State; Zip 3100 N. Mesa El Paso, TX 79902		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description food office	(See instructions regarding type of information required.)
Date 01/03/2025	Payee name Allsups Gas		
Amount (\$) 42.15	Payee Address; City; State; Zip 501 N. Copia  El Paso, TX 79903		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Travel In District	<b>(b)</b> Description Gas	(See instructions regarding type of information required.
Date 04/14/2025	Payee name Bank Of America		
Amount (\$) 12.00	Payee Address; City; State; Zip 330 N. Mesa El Paso, TX 79901		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	<b>(b)</b> Description fee	(See instructions regarding type of information required.)
Date 05/13/2025	Payee name Bank Of America		
Amount (\$) 12.00	Payee Address; City; State; Zip 330 N. Mesa El Paso, TX 79901		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description  Montly bank	(See instructions regarding type of information required.)

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 2/5 Rpt: 9/12	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061857
Date 03/13/2025	5 Payee name Bank Of America	
Amount (\$) 12.00	7 Payee Address; City; State; Zip 330 N. Mesa El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.)  Bank fees
Date 02/11/2025	Payee name Bank Of America	
Amount (\$) 12.00	Payee Address; City; State; Zip 330 N. Mesa El Paso, TX 79901	
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required monthly bank fee
Date 01/14/2025	Payee name Bank Of America	
Amount (\$) 12.00	Payee Address; City; State; Zip 330 N. Mesa El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.)  Monthly bank fee
Date 06/11/2025	Payee name Bank Of America	
Amount (\$) 12.00	Payee Address; City; State; Zip 330 N. Mesa El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required banking fee

The Instruction Guide explains how to complete this form.				
Total pages Schedule I: Sch: 3/5 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)	3 Filer ID (Ethics Commission Filers 00061857		
Date 01/23/2025	5 Payee name Etsy			
Amount (\$) 17.65	7 Payee Address; City; State; Zip 117 Adams St  Brooklyn, NY 11201			
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.  Staff		
Date 01/31/2025	Payee name Glias Coffee			
Amount (\$) 24.06	Payee Address; City; State; Zip 4841 Alberta Ave El Paso, TX 79901			
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.  Staff food		
Date 04/28/2025	Payee name Insomnia Cookies			
Amount (\$) 33.40	Payee Address; City; State; Zip 2500 N. Mesa El Paso, TX 79902			
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. cookies for work		
Date 01/21/2025	Payee name Luby's			
Amount (\$) 19.46	Payee Address; City; State; Zip 500 E San Antonio  El Paso, TX 79901			
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required.  Food for staff		

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 4/5 Rpt:	<ul><li>2 FILER NAME Ness-Garcia, Lyda A. (The Honorable)</li><li>5 Payee name</li></ul>	3 Filer ID (Ethics Commission Filers 00061857
01/06/2025	Lyft	
Amount (\$) 15.27	7 Payee Address; City; State; Zip 185 Berry St Suite 400 San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Travel In District	(b) Description (See instructions regarding type of information required.  Travel
Date	Payee name	
01/06/2025	Marathon	
Amount (\$) 41.61	Payee Address; City; State; Zip 2133 Central Ave  El Paso, TX 79905	
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required Auto gas/wash
Date	Payee name	
02/28/2025	Salt & Honey	
Amount (\$) 13.80	Payee Address; City; State; Zip 1125 Texas	
PURPOSE OF EXPENDITURE	El Paso, TX 79901  (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required baked goods office
Date 02/03/2025	Payee name Taco Bell	
Amount (\$) 20.39	Payee Address; City; State; Zip 2103 Mesa	
PURPOSE OF EXPENDITURE	El Paso, TX 79902  (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. lunch office

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule I: Sch: 5/5 Rpt:	2 FILER NAME Ness-Garcia, Lyda A. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00061857			
4	Date 01/07/2025	5 Payee name The Cleaners			
6	Amount (\$) 16.05	7 Payee Address; City; State; Zip 2922 N. Mesa El Paso, TX 79902			
8	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Drycleaner  (b) Description (See instructions regarding type of information required.)  Dryclean judicial robe			
	Date 01/30/2025	Payee name Valero			
	Amount (\$) 43.12	Payee Address; City; State; Zip 3000 N. Mesa  El Paso, TX 79902			
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel In District  (b) Description (See instructions regarding type of information required.) Travel for staff			