

# COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC  
COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00055995	2 Total pages filed: 30
3 COMMITTEE NAME Cameron County Democratic Party Executive Committee (CEC)			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1411 N Stuart Place Rd Ste C Harlingen, TX 78552		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Denise G NICKNAME LAST SUFFIX Chavez		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7248 Mulberry St Brownsville, TX 78526		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7248 Mulberry St Brownsville, TX 78520		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 371-7378		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 01/01/2025 THROUGH Month Day Year 06/30/2025		
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Cameron County Democratic Party Executive Committee (CEC)		<b>13 Filer ID</b> (Ethics Commission Filers) 00055995
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 39,695.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 24,836.13
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 26,398.75
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 2,086.55

## 16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Denise G Chavez

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**SUBTOTALS - CEC****FORM CEC**  
**COVER SHEET PG 3**  
3 of 30

<b>17 COMMITTEE NAME</b> Cameron County Democratic Party Executive Committee (CEC)		<b>18 Filer ID</b> (Ethics Commission Filers) 00055995
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 39,695.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 24,836.13
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
10.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/7 Rpt: 4/30
<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alegria, Adina <b>6</b> Contributor address; City; State; Zip Code  Harlingen, TX 78552	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions) Texas Valley Educators Association
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barreda, Albert Contributor address; City; State; Zip Code  Brownsville, TX 78526	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavidez, Alan Contributor address; City; State; Zip Code  Brownsville, TX 78526	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Insurance Sales		Employer (See Instructions) Primerica
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camarillo, Edward Contributor address; City; State; Zip Code  Brownsville, TX 78520	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Sunshine Haven
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castilo, Monique Contributor address; City; State; Zip Code  Los Fresnos, TX 78566	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Grant Writer		Employer (See Instructions) Chicanos Por La Causa

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/7 Rpt: 5/30
<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortez, Claudia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brownsville, TX 78520	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Brownsville ISD
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortez, Marie <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78521	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahlstrom, Lassey <hr/> Contributor address; City; State; Zip Code  Harlingen, TX 78559	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esparza, Jennifer <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78521	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Harlingen CISD
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Donna <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78520	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Idea Public Schools

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/7 Rpt: 6/30
<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galvan, Cassandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  Rancho Viejo, TX 78575	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) Sculpt1
Date 01/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Sylvia <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78520	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Cameron County
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammes, Patrick <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78521	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Brownsville ISD
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hockema, Jared <hr/> Contributor address; City; State; Zip Code  Harlingen, TX 78552	Amount of Contribution (\$)  \$700.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Frontera Consultants RGV
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaMantia, Morgan (Ms.) <hr/> Contributor address; City; State; Zip Code  South Padre Island, TX 78597	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) L&F Distributors

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/7 Rpt: 7/30
<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Daniella <b>6</b> Contributor address; City; State; Zip Code  Brownsville, TX 78520	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions) Mitte Cultural District
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Rosemary Contributor address; City; State; Zip Code  Brownsville, TX 78520	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orozco, Marcela Contributor address; City; State; Zip Code  Brownsville, TX 78520	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Case Manager		Employer (See Instructions) South West Key
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Lizzie Contributor address; City; State; Zip Code  Harlingen, TX 78550	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Harlingen CISD
Date 02/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Lizzie Contributor address; City; State; Zip Code  Harlingen, TX 78550	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Harlingen CISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/7 Rpt: 8/30
<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 03/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Lizzie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Harlingen, TX 78550	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Harlingen CISD
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Lizzie <hr/> Contributor address; City; State; Zip Code  Harlingen, TX 78550	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Harlingen CISD
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Lizzie <hr/> Contributor address; City; State; Zip Code  Harlingen, TX 78550	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Harlingen CISD
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Lizzie <hr/> Contributor address; City; State; Zip Code  Harlingen, TX 78550	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Harlingen CISD
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Edward <hr/> Contributor address; City; State; Zip Code  Lyford, TX 78569	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cameron County



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/7 Rpt: 9/30
<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 06/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20003	<b>7</b> Amount of Contribution (\$)  \$25,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC Contributor address; City; State; Zip Code  Washington, DC 20003	Amount of Contribution (\$)  \$12,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tovar, Edgar Contributor address; City; State; Zip Code  Brownsville, TX 78520	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Device Sales		Employer (See Instructions) Abbott
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullos, Oscar Contributor address; City; State; Zip Code  Brownsville, TX 78526	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Jessica Contributor address; City; State; Zip Code  Harlingen, TX 78552	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) LVN		Employer (See Instructions) VA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/7 Rpt: 10/30
<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Daisy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brownsville, TX 78520	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) UNC Chapel Hill
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavaleta, Gaby <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78520	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

# 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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/20 Rpt: 11/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/19/2025	<b>5</b> Payee name Act Blue Tech Svcs	
<b>6</b> Amount (\$) \$88.91	<b>7</b> Payee address; City; State; Zip Code PO Box 962017  Boston, MA 02196	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/12/2025	Payee name Act Blue Tech Svcs	
Amount (\$) \$0.21	Payee address; City; State; Zip Code PO Box 962017  Boston, MA 02196	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2025	Payee name Act Blue Tech Svcs	
Amount (\$) \$0.40	Payee address; City; State; Zip Code PO Box 962017  Boston, MA 02196	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/20 Rpt: 12/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 03/10/2025	<b>5</b> Payee name Act Blue Tech Svcs	
<b>6</b> Amount (\$) \$0.40	<b>7</b> Payee address; City; State; Zip Code PO Box 962017  Boston, MA 02196	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Act Blue Tech Svcs		
Amount (\$) \$0.40	Payee address; City; State; Zip Code PO Box 962017  Boston, MA 02196	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Act Blue Tech Svcs		
Amount (\$) \$0.40	Payee address; City; State; Zip Code PO Box 962017  Boston, MA 02196	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/20 Rpt: 13/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 05/18/2025	<b>5</b> Payee name Act Blue Tech Svcs	
<b>6</b> Amount (\$) \$1.98	<b>7</b> Payee address; City; State; Zip Code PO Box 962017  Boston, MA 02196	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/10/2025	Candidate/Officeholder name Payee name Act Blue Tech Svcs	
Amount (\$) \$0.40	Payee address; City; State; Zip Code PO Box 962017  Boston, MA 02196	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/28/2025	Candidate/Officeholder name Payee name Carisma Graphics	
Amount (\$) \$217.91	Payee address; City; State; Zip Code 2100 Central Blvd  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Sign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/20 Rpt: 14/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 04/02/2025	<b>5</b> Payee name City of Brownsville	
<b>6</b> Amount (\$) \$130.00	<b>7</b> Payee address; City; State; Zip Code PO Box 911  Brownsville, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Building Inspection Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2025	Payee name Dollar General	
Amount (\$) \$3.50	Payee address; City; State; Zip Code 1304 Central Blvd  BROWNSVILLE, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/31/2025	Payee name Dollar General	
Amount (\$) \$10.20	Payee address; City; State; Zip Code 1304 Central Blvd  BROWNSVILLE, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/20 Rpt: 15/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/13/2025	<b>5</b> Payee name Fiesta Graphics	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 205 Paredes Line Rd  Brownsville, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Materials
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2025	Payee name GoDaddy.com	
Amount (\$) \$23.49	Payee address; City; State; Zip Code 7145 E 1st St  Scottsdale, AZ 85251	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web Hosting Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2025	Payee name HEB	
Amount (\$) \$39.59	Payee address; City; State; Zip Code 1628 Central Blvd  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/20 Rpt: 16/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/31/2025	<b>5</b> Payee name HEB	
<b>6</b> Amount (\$) \$11.81	<b>7</b> Payee address; City; State; Zip Code 1628 Central Blvd  Brownsville, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/01/2025	Payee name Intuit Inc.	
Amount (\$) \$1,266.36	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QuickBooks Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/06/2025	Payee name Intuit Inc.	
Amount (\$) \$853.36	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/20 Rpt: 17/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 06/05/2025	<b>5</b> Payee name Lone Star National Bank	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 3300 N Expwy  Brownsville, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name Lone Star National Bank		
Amount (\$) \$15.00	Payee address; City; State; Zip Code 3300 N Expwy  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/31/2025	Candidate/Officeholder name Office sought Office held	
Payee name Lone Star National Bank		
Amount (\$) \$15.00	Payee address; City; State; Zip Code 3300 N Expwy  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/20 Rpt: 18/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 06/09/2025	<b>5</b> Payee name MailChimp	
<b>6</b> Amount (\$) \$28.25	<b>7</b> Payee address; City; State; Zip Code 405 N Angier Ave NE  Atlanta, GA 30308	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-mails
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2025	Payee name MailChimp	
Amount (\$) \$14.12	Payee address; City; State; Zip Code 405 N Angier Ave NE  Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-Mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2025	Payee name NGP VAN	
Amount (\$) \$111.93	Payee address; City; State; Zip Code 655 15 St NW Ste 650 Washington, DC 20005	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/20 Rpt: 19/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 05/02/2025	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$111.93	<b>7</b> Payee address; City; State; Zip Code 655 15 St NW Ste 650 Washington, DC 20005	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/28/2025	Payee name NGP VAN	
Amount (\$) \$111.93	Payee address; City; State; Zip Code 655 15 St NW Ste 650 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2025	Payee name NGP VAN	
Amount (\$) \$111.93	Payee address; City; State; Zip Code 655 15 St NW Ste 650 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/20 Rpt: 20/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 02/06/2025	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$106.60	<b>7</b> Payee address; City; State; Zip Code 655 15 St NW Ste 650 Washington, DC 20005	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2025	Payee name NGP VAN	
Amount (\$) \$106.60	Payee address; City; State; Zip Code 655 15 St NW Ste 650 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Providencia Capital	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1801 S 2nd St  McAllen, TX 78520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/20 Rpt: 21/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 05/06/2025	<b>5</b> Payee name Providencia Capital	
<b>6</b> Amount (\$) \$1,200.00	<b>7</b> Payee address; City; State; Zip Code 1801 S 2nd St  McAllen, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2025	Payee name Providencia Capital	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1801 S 2nd St  McAllen, TX 78520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2025	Payee name Providencia Capital	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1801 S 2nd St  McAllen, TX 78520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/20 Rpt: 22/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 06/16/2025	<b>5</b> Payee name Public Utilities Board	
<b>6</b> Amount (\$) \$51.28	<b>7</b> Payee address; City; State; Zip Code 1425 Robinhood Dr  Brownsville, TX 78521	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Public Utilities Board		
Amount (\$) \$56.09	Payee address; City; State; Zip Code 1425 Robinhood Dr  Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/14/2025	Candidate/Officeholder name Office sought Office held	
Payee name Public Utilities Board		
Amount (\$) \$48.93	Payee address; City; State; Zip Code 1425 Robinhood Dr  Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/20 Rpt: 23/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 03/17/2025	<b>5</b> Payee name Public Utilities Board	
<b>6</b> Amount (\$) \$52.15	<b>7</b> Payee address; City; State; Zip Code 1425 Robinhood Dr  Brownsville, TX 78521	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/17/2025	Payee name Sam's Club	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 3570 Alton gloor blvd.  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/31/2025	Payee name Sam's Club	
Amount (\$) \$4.72	Payee address; City; State; Zip Code 3570 Alton gloor blvd.  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/20 Rpt: 24/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/17/2025	<b>5</b> Payee name Sam's Club	
<b>6</b> Amount (\$) \$139.36	<b>7</b> Payee address; City; State; Zip Code 3570 Alton glloor blvd.  Brownsville, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2025	Payee name Scale to Win	
Amount (\$) \$514.28	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana , CA 92703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Message Charges
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/06/2025	Payee name Scale to Win	
Amount (\$) \$111.93	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana , CA 92703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Messages
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/20 Rpt: 25/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 06/09/2025	<b>5</b> Payee name Southwest Airlines	
<b>6</b> Amount (\$) \$410.59	<b>7</b> Payee address; City; State; Zip Code 2702 Love Field  Dallas, TX 75235	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel to SDEC Meeting, Ben Whitman
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2025	Payee name Spectrum	
Amount (\$) \$80.41	Payee address; City; State; Zip Code 2309 W Lincoln Ave Ste B Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/12/2025	Payee name Spectrum	
Amount (\$) \$80.41	Payee address; City; State; Zip Code 2309 W Lincoln Ave Ste B Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/20 Rpt: 26/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 04/10/2025	<b>5</b> Payee name Spectrum	
<b>6</b> Amount (\$) \$80.41	<b>7</b> Payee address; City; State; Zip Code 2309 W Lincoln Ave Ste B Harlingen, TX 78552	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/10/2025	Payee name Spectrum	
Amount (\$) \$80.41	Payee address; City; State; Zip Code 2309 W Lincoln Ave Ste B Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2025	Payee name State Farm Insurance	
Amount (\$) \$70.50	Payee address; City; State; Zip Code P.O. Box 588002  North Metro, GA 30029	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/20 Rpt: 27/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 05/16/2025	<b>5</b> Payee name State Farm Insurance	
<b>6</b> Amount (\$) \$70.50	<b>7</b> Payee address; City; State; Zip Code P.O. Box 588002  North Metro, GA 30029	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name State Farm Insurance		
Amount (\$) \$70.50	Payee address; City; State; Zip Code P.O. Box 588002  North Metro, GA 30029	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/17/2025	Candidate/Officeholder name Office sought Office held	
Payee name State Farm Insurance		
Amount (\$) \$70.50	Payee address; City; State; Zip Code P.O. Box 588002  North Metro, GA 30029	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/20 Rpt: 28/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 06/30/2025	<b>5</b> Payee name Target	
<b>6</b> Amount (\$) \$8.29	<b>7</b> Payee address; City; State; Zip Code 301 Morrison  Brownsville, TX 78526	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2025	Payee name Textedly	
Amount (\$) \$278.76	Payee address; City; State; Zip Code 2536 E Workman Ave Corvina CA, TX 91791	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Messages
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/05/2025	Payee name Textedly	
Amount (\$) \$119.96	Payee address; City; State; Zip Code 2536 E Workman Ave Corvina CA, TX 91791	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Messages
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/20 Rpt: 29/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 01/03/2025	<b>5</b> Payee name Textedly	
<b>6</b> Amount (\$) \$339.54	<b>7</b> Payee address; City; State; Zip Code 2536 E Workman Ave Corvina CA, TX 91791	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Messages
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2025	Payee name Whitman, Benjamin	
Amount (\$) \$8,124.00	Payee address; City; State; Zip Code 16984 Crystal Ln Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2025	Payee name Whitman, Benjamin	
Amount (\$) \$1,875.00	Payee address; City; State; Zip Code 16984 Crystal Ln Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/20 Rpt: 30/30	<b>2</b> FILER NAME Cameron County Democratic Party Executive Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00055995
<b>4</b> Date 03/17/2025	<b>5</b> Payee name Whitman, Benjamin	
<b>6</b> Amount (\$) \$3,750.00	<b>7</b> Payee address; City; State; Zip Code 16984 Crystal Ln  Harlingen, TX 78552	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held