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) 00089575 40 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Anastacia NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Ana Ochoa Nelson CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 6161 MAILING Amount Receipt # **ADDRESS** Change of Address San Antonio, TX 78209 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Fidel NAME NICKNAME LAST **SUFFIX** Tres Rodriguez Ш STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 231 W. Cypress **ADDRESS** (Residence or Business) San Antonio, TX 78212 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 610-8545 **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 Month Day Year Day Year **COVERED THROUGH** 04/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other

11 OFFICE

03/03/2026

OFFICE HELD (if any)

General

Special

12 OFFICE SOUGHT (if known)

Criminal District Court Judge District 226th

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 40

13 C / OH NAME	Ochoa Nelson, Anast	acia	14 Filer ID (00089575	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without it officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages COMMITTEE TYPE COMMITTEE NAME				
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION		ZED POLITICAL CONTRIBUTIONS(OTHER THAN		
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELE	CTRONICALLY)	\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN:	S)	\$ 32,015.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 9,078.23
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 25,329.44
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 1,000.00
17 AFFIDAVIT		l swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Anasta	acia Ochoa Nelson	
		Signature of	Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		·
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer	administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

					3 of 40
	ER NAM	(Ethics Comm	ssion Filers)		
	HEDUL ME OF	SUBTOT	AL AMOUNT		
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	30,715.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,300.00
3.	X	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	2,000.00
4.	X	SCHEDULE E(J): LOANS (JUDICIAL)		\$	1,000.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	6,864.68
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,213.55
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C	F C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	NS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	ETURNED	\$	
				-	

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 1/18 Rpt: 4/40
2	FILER NAME Ochoa Nelso	on, Anastacia			3	Filer ID (Ethics Commission Filers) 00089575
4	Date 05/15/2025	Full name of contributor BENAVIDES DAVIS, MAI Contributor address; City; S			7	Amount of Contribution (\$) \$1,000.00
		MESQUITE, TX 75181				
8	Contributor's RETIRED	Principal Occupation		9 Contributor's Job Title RETIRED		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
	RETIRED					
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#:)		Amount of Contribution (\$)
	06/28/2025	BENNETT, STEPHANIE Contributor address; City; S SAN ANTONIO, TX 7820			•	\$50.00
_	Contributor's I	Principal Occupation		Contributor's Job Title		
	UNEMPLOY			UNEMPLOYED		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (if a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/29/2025	BROOKS, WILLIAM Contributor address; City; S	tate; Zip Code			\$500.00
		SAN ANTONIO, TX 7820	5			
Н	Contributor's F	rincipal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
		s a child, law firm of parent(s) (if a	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 2/18 Rpt: 5/40
2	FILER NAME Ochoa Nelso	on, Anastacia			3	Filer ID (Ethics Commission Filers) 00089575
4	Date 06/29/2025	5 Full name of contributor BRYAN, GRANT6 Contributor address; City; \$	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$50.00
		HOUSTON, TX 77006				
8		Principal Occupation		9 Contributor's Job Title		
10	ATTORNEY			ATTORNEY	20110	o (if any)
10		employer/law firm 「FRANKLINK AND WRIGHT	Г	11 Law firm of contributor's sp	pous	e (II aliy)
12	If contributor is	s a child, law firm of parent(s) (if	any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/30/2025	CAMMACK III, THOMAS Contributor address; City; s	State; Zip Code			\$250.00
		SAN ANTONIO, TX 782	49	T		
	Contributor's I	Principal Occupation		Contributor's Job Title ATTORNEY		
_		employer/law firm		Law firm of contributor's sp	nnus	e (if any)
	HARPER LA			Law min or contributor 5 of	pouc	o (ii aiiy)
	If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/24/2025	CAMPOLO, ERIC	_			\$1,500.00
		Contributor address; City; S				
┢	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	ATTORNEY			ATTORNEY		
	Contributor's	employer/law firm		Law firm of contributor's sp	pous	e (if any)
		ES OF MALONEY AND CAN				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	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: 3/18 Rpt: 6/40
2	FILER NAME Ochoa Nelso	on, Anastacia			1	Filer ID (Ethics Commission Filers) 00089575
4			7	Amount of Contribution (\$) \$1,500.00		
		SAN ANTONIO, TX 782	04			
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	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date 05/20/2025	Full name of contributor DAVIS, M. BENAVIDES Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$2,000.00
		MESQUITE, TX 75181				
		Principal Occupation		Contributor's Job Title		
	RETIRED Contributor's 6 RETIRED	employer/law firm		RETIRED Law firm of contributor's sp	pous	e (if any)
		s a child, law firm of parent(s) (if	any)	1		
	Date 05/17/2025	Full name of contributor DUNN, ZACK Contributor address; City;	·			Amount of Contribution (\$) \$50.00
	Contributorio	SAN ANTONIO, TX 782	61	Contributorio Joh Titlo		
	ATTORNEY	Principal Occupation		Contributor's Job Title ATTORNEY		
	Contributor's	employer/law firm		Law firm of contributor's sp	pous	e (if any)
	BEXAR COL					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 4/18 Rpt: 7/40
2	FILER NAME Ochoa Nelso	on, Anastacia			3	Filer ID (Ethics Commission Filers) 00089575
4	Date 05/20/2025	Full name of contributor ELLINOR, DAN Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		AUSTIN, TX 78703				
8		Principal Occupation		9 Contributor's Job Title		
10	RETIRED	employer/law firm		RETIRED 11 Law firm of contributor's sp	20116	co (if any)
10	RETIRED	employemaw liim		11 Law IIIII of Contributor's Sp	Jous	se (ii diiy)
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 (\$)
	05/12/2025	Contributor address; City;				\$1,000.00
L	Contributor's I	SAN ANTONIO, TX 782 Principal Occupation		Contributor's Job Title		
	Contributor 3 i	- micipal Occupation		Continuator 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 (\$)
	06/27/2025	FOSSIER, MARY				\$100.00
		Contributor address; City; HOUSTON, TX 77009				
Н	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	ATTORNEY			ATTORNEY		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	HARRIS CO					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 5/18 Rpt: 8/40
2	FILER NAME Ochoa Nelso	FILER NAME Ochoa Nelson, Anastacia		3	Filer ID (Ethics Commission Filers) 00089575	
4			7	Amount of Contribution (\$) \$25.00		
		SAN ANTONIO, TX 782	40			
8		Principal Occupation		9 Contributor's Job Title		
	SUPERVISO			SUPERVISOR		
10	O Contributor's 6 BEXAR COL	employer/law firm JNTY		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#:)	Π	Amount of Contribution (\$)
	05/15/2025	HAGEE, AUSTIN Contributor address; City; 9 SAN ANTONIO, TX 7820				\$100.00
-	Contributor's F	Principal Occupation		Contributor's Job Title		
	ATTORNEY	inicipal Cocupation		ATTORNEY		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
L		GEE LAW FIRM PLLC	and			
	ii contributor ii	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/16/2025	HARRIS, DARYL				\$20.00
		Contributor address; City; \$ SAN ANTONIO, TX 782	State; Zip Code			
H	Contributor's F	rincipal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	BEXAR COL	JNTY				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	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: 6/18 Rpt: 9/40
2	FILER NAME	on. Anastacia			3	Filer ID (Ethics Commission Filers) 00089575
4	Ochoa Nelson, Anastacia Date 06/25/2025 5 Full name of contributor		7	Amount of Contribution (\$) \$50.00		
		SAN ANTONIO, TX 7823	LO			
8	Contributor's RETIRED	Principal Occupation		9 Contributor's Job Title RETIRED		
10		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)	I		
	Date 06/30/2025	Full name of contributor HINOJOSA, MARTINA Contributor address; City; S				Amount of Contribution (\$) \$100.00
	Cantuibustaula	SAN ANTOINO, TX 7820)9 	Contributorio Joh Titlo		
	ATTORNEY	Principal Occupation		Contributor's Job Title ATTORNEY		
	Contributor's 6	employer/law firm	any)	Law firm of contributor's sp	oous	se (if any)
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	T	Amount of Contribution (\$)
	05/20/2025	KRISTOFERSON, SANE Contributor address; City; S DENTON, TX 76205	DRA			\$500.00
		Principal Occupation		Contributor's Job Title	•	
	HOMEMAKE			HOMEMAKER		
	Contributor's 6	employer/law firm ER		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 7/18 Rpt: 10/40
2	FILER NAME Ochoa Nelso	on, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4	Date 05/15/2025	 Full name of contributor		7 Amount of Contribution (\$) \$1,500.00
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	<u> </u>
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)	I	
	Date Full name of contributor out-of-state PAC (ID#:) 05/15/2025 LAW OFFICE OF ALBERTO ACEVEDO III Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00	
	Contributor's I	SAN ANTONIO, TX 78207 Principal Occupation	Contributor's Job Title	
	Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date 05/15/2025	Full name of contributor out-of-state PAC (ID#: LAW OFFICE OF DAVID D. CHRISTIAN Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212)	Amount of Contribution (\$) \$1,000.00
	Contributor's I	Principal Occupation	Contributor's Job Title	<u> </u>
	Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL 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: 8/18 Rpt: 11/40
2	FILER NAME Ochoa Nelso	on, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4	Date 05/30/2025			7 Amount of Contribution (\$) \$1,000.00
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	I
10	Contributor's	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)	l	
	Date 05/12/2025	Full name of contributor out-of-state PAC (ID#:_LAW OFFICE OF JAMES V. TOCCI Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1,000.00
	Contributor's F	SAN ANTONIO, TX 78204 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)		
	Date 05/13/2025	Full name of contributor out-of-state PAC (ID#:_LAW OFFICE OF JOHN D. PEREZ Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249)	Amount of Contribution (\$) \$1,000.00
	Contributor's I	Principal Occupation	Contributor's Job Title	<u> </u>
	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)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A(J)1			
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 9/18 Rpt: 12/40		
2	FILER NAME Ochoa Nelso	on, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575		
4	Date 05/15/2025	 Full name of contributor		7 Amount of Contribution (\$) \$500.00		
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	<u> </u>		
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	ouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)	1			
	Date Full name of contributor out-of-state PAC (ID#:) 05/15/2025 LAW OFFICE OF SCOTT MCCRUM Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1,000.00			
	Contributor's I	SAN ANTONIO, TX 78216 Principal Occupation	Contributor's Job Title			
	Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)	1			
	Date 05/15/2025	Full name of contributor out-of-state PAC (ID#: LAW OFFICE OF SHAWN C. BROWN PC Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205		Amount of Contribution (\$) \$1,500.00		
	Contributor's I	I Principal Occupation	Contributor's Job Title	I		
	Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)	1			

	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: 10/18 Rpt: 13/40	
2	FILER NAME	on, Anastacia			3	Filer ID (Ethics Commission Filers) 00089575
4			7	Amount of Contribution (\$) \$1,500.00		
		SAN ANTONIO, TX 782	12			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	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#:)	T	Amount of Contribution (\$)
	05/15/2025	LEGARETTA LAW FIRM Contributor address; City;	Л State; Zip Code			\$250.00
		SAN ANTONIO, TX 782	17	T		
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/15/2025	LOPEZ, CRISTINA Contributor address; City; S SAN ANTONIO, TX 782				\$50.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	ADVOCATE	·		ADVOCATE		
	Contributor's	employer/law firm		Law firm of contributor's s	oous	e (if any)
	BEXAR COL	JNTY				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	v to complete this 1	orm.	1	Total pages Schedule A(J)1: Sch: 11/18 Rpt: 14/40
2	FILER NAME Ochoa Nelso	on, Anastacia			3	Filer ID (Ethics Commission Filers) 00089575
4	Date 05/12/2025 Full name of contributor		7	Amount of Contribution (\$) \$500.00		
		SAN ANTONIO, TX 7820	05	<u>, </u>		
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)			
	Date Full name of contributor out-of-state PAC (ID#:) MARIN, SAL Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$20.00		
		SAN ANTONIO, TX 7820)5			
		Principal Occupation		Contributor's Job Title		
	OFFICE MA			OFFICE MANAGER		on (if any)
	BEXAR COL	employer/law firm JNTY		Law firm of contributor's sp	Jou:	se (II dily)
		s a child, law firm of parent(s) (if	any)	<u> </u>		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/27/2025	MOORE, MARGARET Contributor address; City; S NEW ORLEANS, LA 700				\$100.00
H	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	VP OPERAT			VP OPERATIONS		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 12/18 Rpt: 15/40	
2	FILER NAME Ochoa Nelso	on, Anastacia			1	Filer ID (Ethics Commission Filers) 00089575	
4			7	Amount of Contribution (\$) \$100.0)0		
		CORPUS CHRISTI, TX	78404				
8		Principal Occupation		9 Contributor's Job Title			
10	ATTORNEY	employer/law firm		ATTORNEY 11 Law firm of contributor's sp		(if any)	
10		GAL GROUP		11 Law IIIII of Contributor's Sp	Jouse	e (ii ariy)	
12	If contributor is	s a child, law firm of parent(s) (if	f any)	<u>I</u>			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	=
	05/26/2025	NELSON, ELIZABETH Contributor address; City;				\$200.0	10
		CANYON LAKE, TX 781	133	T			
	Contributor's RETIRED	Principal Occupation		Contributor's Job Title RETIRED			
		employer/law firm		Law firm of contributor's sp	oouse	e (if any)	
		s a child, law firm of parent(s) (if	f any)	1			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	=
	06/20/2025	NIXON, ALI Contributor address; City;				\$500.0	10
	O a stalle at a size I	SAN ANTONIO, TX 782	60	Contributor's Job Title			_
	ATTORNEY	Principal Occupation		ATTORNEY			
H		employer/law firm		Law firm of contributor's sp	oouse	e (if any)	_
		/HCA HEALTHCARE					
	If contributor is	s a child, law firm of parent(s) (if	f any)	1			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 13/18 Rpt: 16/40
2	FILER NAME Ochoa Nelso	on, Anastacia			3	Filer ID (Ethics Commission Filers) 00089575
4	Date 5 Full name of contributor out-of-state PAC (ID#:) ORSATTI LEGAL GROUP 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,500.00		
		SAN ANTONIO, TX 782	49			
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date 05/15/2025	Full name of contributor PORTER, TREY Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$100.00
		SAN ANTONIO, TX 782	12			
	Contributor's I	Principal Occupation		Contributor's Job Title ATTORNEY		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (if	any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	05/12/2025	POWERS, BRIAN Contributor address; City; S SAN ANTONIO, TX 782	·			\$1,000.00
	Contributor's F	Principal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	SELF-EMPL 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	form.	1 Total pages Schedule A(J)1: Sch: 14/18 Rpt: 17/40
2	FILER NAME Ochoa Nelso	on, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4	Date 5 Full name of contributor out-of-state PAC (ID#:) QUIMBY, GRANT 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		7 Amount of Contribution (\$) \$25.00	
8		Principal Occupation	9 Contributor's Job Title	
	ATTORNEY		ATTORNEY	
10	GRAHAM LA	employer/law firm AW FIRM	11 Law firm of contributor's sp	oouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/15/2025 RAMOS AND DEL CUETO PLLC Contributor address; City; State; Zip Code			\$1,000.00
	Contributor's I	SAN ANTONIO, TX 78210 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 of Contribution (\$)
	05/15/2025	RAMOS, CHRISTOPHER Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228		\$1,500.00
		Principal Occupation	Contributor's Job Title	
	ATTORNEY		ATTORNEY	
	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)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this	form.	1	Total pages Schedule A(J)1: Sch: 15/18 Rpt: 18/40
2	FILER NAME	on Apactacia			3	Filer ID (Ethics Commission Filers)
4	Ochoa Nelso Date 05/15/2025	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	00089575 Amount of Contribution (\$) \$100.00	
		SAN ANTONIO, TX 7824				
8		Principal Occupation		9 Contributor's Job Title		
	ATTORNEY			ATTORNEY		
10	Contributor's 6 BEXAR COL	employer/law firm JNTY		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/28/2025	SCHNEIDER, CATHERII	NE			\$25.00
		Contributor address; City; S	tate; Zip Code			
		SAN ANTONIO, TX 7821	2			
		Principal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (if	any)			
	ii contributor i	s a clind, law littl of paretit(s) (ii	arry)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/15/2025	SMITH, PATRICK				\$100.00
		Contributor address; City; S	tate; Zip Code			
		SAN ANTONIO, TX 7821	.2			
		Principal Occupation		Contributor's Job Title		
	PSYCHOLO			PSYCHOLOGIST		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	VETERAN'S		onu)			
	ii contributor i	s a child, law firm of parent(s) (if	any)			
ı						

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 16/18 Rpt: 19/40
2	FILER NAME Ochoa Nelso	on, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4	Date 05/15/2025			7 Amount of Contribution (\$) \$50.00
8		Principal Occupation	9 Contributor's Job Title	
	RECEPTION		RECEPTION	
10	BEXAR COL	employer/law firm JNTY	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 out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	05/15/2025	THE LAW OFFICE OF EDWARD F. SHAUGHN Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	IESSY 	\$100.00
	Contributor's I	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)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	05/15/2025	THE LAW OFFICE OF ROBERT MAURER II		\$1,000.00
		Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
	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)	<u> </u>	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 17/18 Rpt: 20/40
2	FILER NAME Ochoa Nelso	on, Anastacia			3	Filer ID (Ethics Commission Filers) 00089575
4				7	Amount of Contribution (\$) \$1,000.00	
		SAN ANTONIO, TX 782	05	1		
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	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 (\$)
	05/15/2025 THE RAMOS AND TORRES LAW FIRM Contributor address; City; State; Zip Code				\$1,500.00	
	Cantuila staula I	SAN ANTONIO, TX 782	U4 	Contributorio Joh Titlo		
	Contributors	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	pous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2025	VEGA, CHRISTIAN	_			\$100.00
		Contributor address; City; S				
_	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	ATTORNEY			ATTORNEY		
	Contributor's	employer/law firm		Law firm of contributor's s	pous	se (if any)
	SELF					
	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: 18/18 Rpt: 21/40
2	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Ochoa Nelson, Anastacia	00089575
4	Date 5 Full name of contributor out-of-state PAC (ID#:	7 Amount of Contribution (\$)
	05/20/2025 VILLARREAL, MICHAEL J.	\$100.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	
8	Contributor's Principal Occupation 9 Cor	ntributor's Job Title
		TORNEY
10	0 Contributor's employer/law firm 11 Law	v firm of contributor's spouse (if any)
	BEXAR COUNTY	. , , , , , , , , , , , , , , , , , , ,

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 22/40
2 FILER NAME Ochoa Nels	on, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$	
5 Date 06/20/2025	 6 Full name of contributor)	8 Amount of contribution (\$) 9 In-kind contribution description \$50.00 FOOD AND BEVERAGE FOR NETWORKING EVENT
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	L Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)
12 Contributor's RETIRED	principal occupation (FOR JUDICIAL)	13 Contributor's job title RETIRED	(FOR JUDICIAL) (See instructions)
14 Contributor's RETIRED	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 05/15/2025	Full name of contributor out-of-state PAC (ID#: RODRIGUEZ, BRITTANIE Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$50.00 CAMPAING STICKERS
	SAN ANTONIO, TX 78209		Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's HOMEMAK	principal occupation (FOR JUDICIAL) ER	Contributor's job title HOMEMAKER	(FOR JUDICIAL) (See instructions)
	employer/law firm (FOR JUDICIAL)		r's spouse (if any) (FOR JUDICIAL)
HOMEMAK If contributor	ER is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	LAW OFFICES OF	FIDEL RODRIGUEZ JR.
	,		
Date 06/15/2025	Full name of contributor out-of-state PAC (ID#: VOLK & MCELROY Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$1,200.00 ADVERTISING SPACE
D :	SAN ANTONIO, TX 78230	5 / (505) (01	Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

The I	nstruction Guide explains how to comp	lete this form.	1 Total pages Sch Sch: 1/1 Rpt:	
2 FILER NAME	· · · · · ·		<u> </u>	Ethics Commission Filers)
	on, Anastacia		00089575	enies commission rilers)
4 TOTAL OF	UNITEMIZED PLEDGES		<u> </u>	\$ 0.00
5 Date	6 Full name of pledgor out-of-state PAC (ID	#:)	8 Amount of	9 In-kind description
	ACEVEDO, PAUL R.		pledge (\$)	(If applicable)
	7 Pledgor Address; City; State; Zi		\$500.00	o <u> </u>
05/15/2025				!
				!
	SAN ANTONIO, TX 78207		Check if travel o	utside of Texas. Complete Schedule T
10 Pledgor's prin	cipal occupation	11 Pledgor's job title	•	
ATTORNEY		ATTORNEY		
12 Pledgor's emp	oloyer/law firm	13 Law firm of pledgor's	s spouse (if any)	
LAW OFFIC	E OF PAUL ACEVEDO			
14 If pledgor is a	child, law firm of parent(s) (if any)			
Date	Full name of pledgor out-of-state PAC (ID	#:)	Amount of	In-kind description
	MARTINEZ, LOUIS D.		pledge (\$)	(If applicable)
	Pledgor Address; City; State; Zi	p Code	\$500.00	0
05/12/2025				
	SAN ANTONIO, TX 78205		Check if travel o	utside of Texas. Complete Schedule T
Pledgor's prin	cipal occupation	Pledgor's job title	•	
ATTORNEY		ATTORNEY		
	oloyer/law firm	Law firm of pledgor's	s spouse (if any)	
LOUIS D. M	ARTINEZ PC			
If pledgor is a	child, law firm of parent(s) (if any)			
Date	Full name of pledgor out-of-state PAC (ID	#:)	Amount of	In-kind description
	SHAW, LINDSEY		pledge (\$)	(If applicable)
	Pledgor Address; City; State; Zi	p Code	\$1,000.00	0
05/12/2025				
	SAN ANTONIO, TX 78205		Check if travel o	utside of Texas. Complete Schedule T
Pledgor's prin	cipal occupation	Pledgor's job title		
ATTORNEY		ATTORNEY		
	oloyer/law firm	Law firm of pledgor's	s spouse (if any)	
	E OF J. CHARLES BUNK			
	child, law firm of parent(s) (if any)			
If pledgor is a	critic, law intri or pareril(e) (if arry)			

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	n Guide explains how to complete this f	orm.	1	ges Schedule E(J): 1 Rpt: 24/40
2	FILER NAME Ochoa Nelson, A	Anastacia		3 Filer ID 000895	(Ethics Commission Filers)
4	TOTAL OF UN	ITEMIZED LOANS			\$
5	Date of loan 04/03/2025	7 Name of lender OCHOA NELSON, ANASTACIA	C (ID#:)	9 Loan Amount (\$) \$1,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	SAN ANTONIO, TX 78209			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
	ATTORNEY		ATTORNEY		
14	Lender's Employer BEXAR COUNT		15 Law Firm of lender's spous	se (if any)	
16	If lender is child, la	w firm of parent(s) (if any)			
17	Description of Coll X None	ateral	18 Check if personal funds we	ere deposited	I into political account (See Instructions)
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
	X not applicable	21 Guarantor address; City; State;	Zip Code		
23	Guarantor's Princi	pal Occupation	24 Guarantor's Job Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees

Event Expense 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	Committee Le	gal Services ne Instruction Guide explain		/ages/	Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission F	ilers)
	Sch: 1/6 Rpt: 25/40	Ochoa Nelsor	n, Anastacia					00089575	•	ŕ
4	Date	5 Payee name								
	06/22/2025	ACADEMY SI	PORTS AND OUTDOO	RS						
6	Amount (\$)	7 Payee address;	City; Stat	e; Zip Co	de					
	\$54.11	2727 NE LOC	P 410							
		SAN ANTONI	O, TX 78217							
8	PURPOSE	(a) Category (See	Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE	Office Overhe	ad/Rental Expense		Į			de of Texas. Comp		
					l	FOLDING TA		officeholder living		
						FOLDING TA	DL	L FOR EVE	INTO	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Office	holder name	Office sou	ght			Office he	eld	
	Date	Payee name								
	06/29/2025	ACADEMY SI	PORTS AND OUTDOO	RS						
	Amount (\$)	Payee address;	City; Stat	e; Zip Co	de					
	\$48.69	2727 NE LOC	P 410							
	,									
		SAN ANTONI	O, TX 78217							
	PURPOSE	(a) Category (See	Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE	Office Overhe	ad/Rental Expense		Į	=		de of Texas. Com		
					l			officeholder living	expense AIGN EVENTS	
						POP-OP TEN	11 6	-OR CAMPA	AIGIN EVENTS	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Office	nolder name	Office sou	gnt			Office he	ela	
	<u> </u>									
	Date	Payee name								
	06/30/2025	DONORBOX								
	Amount (\$)	Payee address;	City; Stat	e; Zip Co	de					
	\$141.25	1520 BELLE	VIEW BLVD							
		ALEXANDRIA	a, VA 22307							
	PURPOSE	(a) Category (See	Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE	Solicitation/Fu	ındraising Expense		ļ			de of Texas. Comp		
					l			officeholder living		
					'	ONLINE DON	MA I	ION PROC	ESSING FEES	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Office	holder name	Office sou	ght			Office he	eld	
	experience to belieff C/OI									

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/6 Rpt: 26/40	Ochoa Nelson, Anastacia 00089575
4	Date	5 Payee name
	04/23/2025	FROST
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.30	111 W. HOUSTON ST
		SAN ANTONIO, TX 78205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense BANK FEE FOR CHECK PRINTING
		BAINK FEE FOR CHECK PRINTING
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/15/2025	FROST
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.00	111 W. HOUSTON ST
	40.00	
		SAN ANTONIO, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense BANKING FEE
		DAINKING FEE
	Operation ONLY if allowed	One distributed Office health
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/25/2025	MONARCH TROPHY STUDIO
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.99	16227 SAN PEDRO
		SAN ANTONIO, TX 78232
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	ZA ZIIDII GRZ	Check if Austin, TX, officeholder living expense
		NAME TAG FOR EVENTS
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/Of	•

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	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: 3/6 Rpt: 27/40	Ochoa Nelson, Anastacia 00089575
4	Date	5 Payee name
	05/21/2025	NATIONAL PEN COMPANY
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$725.21	1 SHARPIE WAY
		SHELBYVILLE, TN 37160
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CAMPAIGN PENS
		CAMPAIGN FENS
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	D-4-	
	Date	Payee name
L	06/13/2025	PRESTIGE PRINTING
	Amount (\$)	Payee address; City; State; Zip Code
	\$758.83	8 BURWOOD LANE
		SAN ANTONIO, TX 78216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
		CAMPAICALLITEDATURE PRINTING
		CAMPAIGN LITERATURE PRINTING
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
⊨	5.	
	Date	Payee name
	05/13/2025	SMOKE SHACK
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,130.92	3714 BROADWAY
		SAN ANTONIO, TX 78209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CAMPAIGN EVENT DEPOSIT
		CAMPAIGN EVENT BEFOSIT
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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: 4/6 Rpt: 28/40	Ochoa Nelson, Anastacia 00089575
4	Date	5 Payee name
	06/25/2025	SPECIAL T'S
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$537.30	11031 WYE
		SAN ANTONIO, TX 78217
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CAMPAIGN SHIRTS
		CAWII AIGN SHIINTS
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	05/29/2025	STICKERYOU
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$353.59	670 CALEDONIA RD
	Ψ000.09	070 CALLDONIA ND
		TORONTO ONTARIO M6E4V9 Canada
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CAMPAIGN STICKERS
		CAWII AIGN STICKERS
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	06/30/2025	STRIPE
H	Amount (\$)	Payee address; City; State; Zip Code
	\$145.53	354 OYSTER POINT BLVD
		SAN FRANCISCO, CA 94080
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense ONLINE DONATION PROCESSING FEES
		ONLINE DONATION PROCESSING FEES
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 Printing Expense

ement Solicitation/Fundraising Expense
ense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a extensor pat listed above)

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	/e)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	n Filers)
	Sch: 5/6 Rpt: 29/40	Ochoa Nelson, Anastacia 00089575	
4	Date	5 Payee name	
	05/15/2025	THE PIG PEN	ĺ
6	Amount (\$) \$1,033.15	7 Payee address; City; State; Zip Code 106 PERSHING AVE	
		SAN ANTONIO, TX 78209	
8	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 CAMPAIGN EVENT	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	06/09/2025	TRU BRANDING	
	Amount (\$) \$294.00	Payee address; City; State; Zip Code 1811 S. LAREDO ST	
		SAN ANTONIO, TX 78207	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN HATS	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	06/25/2025	TRU BRANDING	
	Amount (\$) \$292.69	Payee address; City; State; Zip Code 1811 S. LAREDO ST	
		SAN ANTONIO, TX 78207	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN HATS	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Coi	F G	iees iood/Beverage Expense Sift/Awards/Memorials Expense legal Services	Pol Prir	ling Expense nting Expens	d/Rental Expense e e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense trict category not listed above)
	Credit Card F dyment		٦	The Instruction Guide expl	lains how	to comple	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 6/6 Rpt: 30/40		Ochoa Nelso	n, Anastacia					00089575	
4	Date	5	Payee name				•	_		
	05/14/2025		VIVROUX							
<u>-</u>	Amount (\$)	7	Payee address	s; City; S	State; Zi	n Code				
ľ	\$294.12	ľ		EWOOD DR	state, Zi	p couc				
	Ψ234.12		ZZZZ DIKLLZ	LWOOD DIX						
			CAN ANTON	UO TV 70000						
L			SAN ANTON	IIO, TX 78209						
8	PURPOSE OF	(a)		Categories listed at the top of the	his schedule	(b)	Description			
	EXPENDITURE		Advertising E	Expense			_		de of Texas. Com	
							CAMPAIGN S		officeholder living	expense
							CAMI AION	JI 11	11(1)	
9	Complete ONLY if direct	<u> </u>	Candidate/Office	ahaldar nama	Office	a sought			Office he	.ld
ľ	Complete ONLY if direct expenditure to benefit C/Ol		Januluale/Onici	enoider name	Office	e sought			Office he	eiu
_										
l										

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Pollin y - Gift/Awards/Memorials Expense Printi al Committee Legal Services Salar	Overhead/Rental Expense g Expense ig Expense es/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
	orean out a syment	The Instruction Guide explains how to	complete this form.					
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	Sch: 1/10 Rpt: 31/40	Ochoa Nelson, Anastacia		00089575				
4	Date	5 Payee name	I					
	05/04/2025	ADOBE						
6			Codo					
٥	Amount (\$) \$14.93	7 Payee address; City; State; Zip 345 PARK AVENUE	Code					
		343 PARK AVENUE						
	Reimbursement from political contributions intended	SAN JOSE, CA 95110						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.				
	OF	Advertising Expense	[(*,	Check if Austin, TX, officeholder living expense				
	EXPENDITURE	raverseing Expense	DESIGN SOFTW	ARE FEE				
9	Complete ONLY if direct expenditure to benefit	L Candidate/Officeholder name	Office sought	Office held				
	C/OH							
	Date	Payee name						
	06/05/2025	ADOBE						
	Amount (\$)	ount (\$) Payee address; City; State; Zip Code						
	\$14.93	345 PARK AVENUE						
	Reimbursement from							
	political contributions intended	SAN JOSE, CA 95110						
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense				
			DESIGN SOFTW	ARE FEE				
		Candidate/Officeholder name	Office sought	Office held				
	expenditure to benefit C/OH							
	Date	Payee name						
	06/12/2025	AMAZON						
	Amount (\$)	Payee address; City; State; Zip	Code					
	\$75.76	410 TERRY AVE. N.						
	Reimbursement from							
	political contributions intended	SEATTLE, WA 98109						
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense				
			BUTTONMAKER	FOR CAMPAIGN BUTTONS				
		Candidate/Officeholder name	Office sought	Office held				
	expenditure to benefit C/OH							
	0,011							

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 The Instruction Guide explains I	Office Over Polling Ex Printing E Salaries/V	xpense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
_	Sch: 2/10 Rpt: 32/40		Ochoa Nelson, Anastacia				00089575
4	Date	5	Payee name				
	06/21/2025		AMAZON				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode		
	\$25.97		410 TERRY AVE. N.				
	Reimbursement from political contributions intended		SEATTLE, WA 98109				
8	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b) Description	Cł	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense			Cł	neck if Austin, TX, officeholder living expense
	EXPENDITORE				CAMPAIGN BUT	TO	N SUPPLY
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	06/24/2025		AMAZON				
	Amount (\$)	H	Payee address; City; State;	Zip Co	ode		
	\$34.36		410 TERRY AVE. N.				
			410 TERRY 702.10.				
	Reimbursement from political contributions intended		SEATTLE, WA 98109				
	PURPOSE		Category (See Categories listed at the top of this school	edule)	Description	Cł	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Office Overhead/Rental Expense			Cł	neck if Austin, TX, officeholder living expense
					OFFICE SUPPLI	ES	
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date	П	Payee name				
	06/29/2025		AMAZON				
\vdash	Amount (\$)	\vdash		Zip Co	nde		
	\$56.26		410 TERRY AVE. N.	p 00			
			410 121((17)(2.14)				
	Reimbursement from political contributions intended		SEATTLE, WA 98109				
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	Description	_	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense		L	_	neck if Austin, TX, officeholder living expense
					CAMPAIGN BUT	TO	N SUPPLY
	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH						

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Rein Fees Office Overhead/Renta Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contra The Instruction Guide explains how to complete this	If Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	FILER NAME	3 Filer ID (Ethics Commission Filers)
_	Sch: 3/10 Rpt: 33/40	Ochoa Nelson, Anastacia	00089575
4	Date	Payee name	·
	04/14/2025	BEXAR COUNTY DEMOCRATIC PARTY	
6	Amount (\$) \$5.00	Payee address; City; State; Zip Code 1844 FREDERICKSBURG RD	
	political contributions intended	SAN ANTONIO, TX 78201	
8	PURPOSE	(b) Description (See Categories listed at the top of this schedule)	cription
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee RECUR	Check if Austin, TX, officeholder living expense RING MONTHLY DONATION
9	Complete ONLY if direct expenditure to benefit C/OH	andidate/Officeholder name Office	e sought Office held
	Date	Payee name	
	05/14/2025	BEXAR COUNTY DEMOCRATIC PARTY	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.00	1844 FREDERICKSBURG RD	
	Reimbursement from political contributions intended	SAN ANTONIO, TX 78201	
	PURPOSE	Category (See Categories listed at the top of this schedule) Desc	cription
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee RECUR	Check if Austin, TX, officeholder living expense RING MONTHLY DONATION
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	andidate/Officeholder name Office	e sought Office held
	Date	Payee name	
	06/14/2025	BEXAR COUNTY DEMOCRATIC PARTY	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.00	1844 FREDERICKSBURG RD	
	Reimbursement from political contributions intended	SAN ANTONIO, TX 78201	
	PURPOSE	Category (See Categories listed at the top of this schedule) Desc	cription Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributions/Donations Made By	Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee RECUR	RING MONTHLY DONATION
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	andidate/Officeholder name Office	e sought Office held

SCHEDULE G

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

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Comm	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Ex Printing E: Salaries/V	xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 F	ILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 4/10 Rpt: 34/40	l	Ochoa Nelson, Anastacia				00089575
4	Date	5 P	ayee name				
	05/07/2025	F	EDEX				
6	Amount (\$)	7 P	ayee address; City; State;	Zip Co	ode		
	\$239.20	4	418 BROADWAY ST				
	Reimbursement from political contributions intended	S	SAN ANTONIO, TX 78209				
8	PURPOSE	(a) C	category (See Categories listed at the top of this sche	edule)	(b) Description	Cł	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	A	dvertising Expense			Cł	heck if Austin, TX, officeholder living expense
	LAPENDITORE				CAMPAIGN BAN	INE	ER
9	Complete ONLY if direct expenditure to benefit C/OH	Candi	idate/Officeholder name		Office sought		Office held
	Date	Р	ayee name				
	05/07/2025	F	EDEX				
	Amount (\$)	Р	ayee address; City; State;	Zip Co	ode		
	\$76.33	4	418 BROADWAY ST	·			
	Reimbursement from political contributions intended	s	SAN ANTONIO, TX 78209				
	PURPOSE	С	category (See Categories listed at the top of this sche	edule)	Description	Cł	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	A	dvertising Expense			Cł	heck if Austin, TX, officeholder living expense
	EXI ENDITORE				CAMPAIGN BOO	١X	MARKS
	Complete ONLY if direct expenditure to benefit C/OH	Candi	date/Officeholder name		Office sought		Office held
	Date	Р	ayee name				
	05/07/2025	F	EDEX				
	Amount (\$)	P	ayee address; City; State;	Zip Co	ode		
	\$92.54	4	418 BROADWAY ST	•			
	Reimbursement from						
	political contributions intended	S	SAN ANTONIO, TX 78209				
	PURPOSE	С	Category (See Categories listed at the top of this sche	edule)	Description	=	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	A	dvertising Expense			_	heck if Austin, TX, officeholder living expense
					CAMPAIGN LITE	R/	ATURÉ
	Complete ONLY if direct	Candi Candi	idate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH	Cariul	date/Onicendide name		Onice Sought		Office field

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ext Gift/Awards/Memorials Expense Printing Ext Legal Services Salaries/M	xpense Travel Out of District /ages/Contract Labor OTHER (enter a category not listed above)				
L		The Instruction Guide explains how to co	·				
1	, ,	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
L	Sch: 5/10 Rpt: 35/40	Ochoa Nelson, Anastacia	00089575				
4	Date	5 Payee name					
	05/12/2025	FEDEX					
6	Amount (\$)	7 Payee address; City; State; Zip Co	de				
l	\$113.65	4418 BROADWAY ST					
	Reimbursement from political contributions intended	SAN ANTONIO, TX 78209					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.				
	OF	Advertising Expense	Check if Austin, TX, officeholder living expense				
l	EXPENDITURE	2 1 1 2 9 Pr 1 2	CAMPAIGN LITERATURE				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
	Date	Payee name					
	05/13/2025	FEDEX					
H	Amount (\$)	Payee address; City; State; Zip Code					
	\$4.61	4418 BROADWAY ST					
	Reimbursement from political contributions intended	SAN ANTONIO, TX 78209					
Γ	PURPOSE	Category (See Categories listed at the top of this schedule)	Description				
	OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense				
			LOGO PRINTING FOR CAMPAIGN BUTTONS				
$ldsymbol{f eta}$							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Г	Date	Payee name					
	05/14/2025	FEDEX					
\vdash	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$75.76	4418 BROADWAY ST					
	Reimbursement from political contributions intended	SAN ANTONIO, TX 78209					
\vdash	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.				
	OF	Advertising Expense	Check if Austin, TX, officeholder living expense				
	EXPENDITURE		POSTER				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)		
			The Instruction Guide explains	s how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER N	AME			3	Filer ID	(Ethics Commission Filers)
	Sch: 6/10 Rpt: 36/40	Ochoa I	Nelson, Anastacia				0008957	75
4	Date	5 Payee na	ame			1		
	05/14/2025	FEDEX						
6	Amount (\$)	7 Payee a	ddress; City; State	e; Zip C	ode			
	\$9.79	4418 BF	ROADWAY ST					
	Reimbursement from							
	political contributions intended	SAN AN	ITONIO, TX 78209					
8	PURPOSE	(a) Category	(See Categories listed at the top of this sc	hedule)	(b) Description	Ch	eck if travel c	outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertis	ing Expense			Ch	eck if Austin,	TX, officeholder living expense
	LAFENDITORE				CAMPAIGN LITE	ERA	TURE	
9	Complete ONLY if direct expenditure to benefit	Candidate/O	ficeholder name		Office sought			Office held
	C/OH							
	Date	Payee na	ame					
	05/14/2025	FEDEX						
	Amount (\$)	Pavee a	ldress; City; State	e. Zin Co	nde			
	\$4.61	Payee address; City; State; Zip Code 4418 BROADWAY ST						
		4410 Dr	ROADWAT 31					
	Reimbursement from political contributions							
	intended	SAN AN	ITONIO, TX 78209					
	PURPOSE	Category	(See Categories listed at the top of this sc	hedule)	Description			outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertis	ing Expense		L	Ch	eck if Austin,	TX, officeholder living expense
					LOGO PRINTING	G F	OR CAM	PAIGN BUTTONS
	Complete ONLY if direct	Candidate/Of	ficeholder name		Office sought			Office held
	expenditure to benefit C/OH							
	Date	Payee na	ame					
	06/13/2025	FEDEX						
	Amount (\$)	Payee a	ddress; City; State	e; Zip C	ode			
	\$9.77	4418 BF	ROADWAY ST					
	Reimbursement from							
	political contributions intended	SAN AN	ITONIO, TX 78209					
	PURPOSE	Category	(See Categories listed at the top of this sc	hedule)	Description	Ch	eck if travel c	outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Printing	Expense			Ch	eck if Austin,	TX, officeholder living expense
	EXPENDITORE				PETITION SHEE	ETS		
	Complete ONLY if direct	Candidate/Of	ficeholder name		Office sought			Office held
	expenditure to benefit				Ç ·			
L	C/OH							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Advertising Expense Event Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Polling Expense Printing Expense Pr	ense Travel in I pense Travel Ou ages/Contract Labor OTHER (c	ation Equipment & Related Expense District it of District enter a category not listed above)				
	orean oura'r ayment	The Instruction Guide explains how to co	nplete this form.					
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID	(Ethics Commission Filers)				
	Sch: 7/10 Rpt: 37/40	Ochoa Nelson, Anastacia	000899	575				
4	Date	5 Payee name	l					
	06/22/2025	FEDEX						
6			10					
٥	Amount (\$) \$46.54	7 Payee address; City; State; Zip Co 4418 BROADWAY ST	ie					
	Ф40.54	4418 BROADWAY ST						
	Reimbursement from political contributions							
	intended	SAN ANTONIO, TX 78209						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	el outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Advertising Expense	Check if Aust	tin, TX, officeholder living expense				
	EXI ENDITORE		THANK YOU CARDS					
9		Candidate/Officeholder name	Office sought	Office held				
	expenditure to benefit C/OH							
	C/OH							
	Date	Payee name						
	06/27/2025	FEDEX						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$22.73	4418 BROADWAY ST						
	Reimbursement from							
	political contributions intended	SAN ANTONIO, TX 78209						
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	· <u>–</u>	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense				
	EXPENDITURE	Printing Expense	—	un, 17, omeendider niving expense				
			PETITION SHEETS					
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held				
	C/OH							
	Data							
	Date	Payee name FEDEX						
	06/29/2025							
	Amount (\$)	Payee address; City; State; Zip Co	de					
	\$7.68	1275 NE LOOP 410						
	Reimbursement from political contributions							
	intended	SAN ANTONIO, TX 78209						
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if trave	el outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Advertising Expense	Check if Aust	tin, TX, officeholder living expense				
	EXPENDITURE		LOGO PRINTING FOR CA	MPAIGN BUTTONS				
	Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held				
	expenditure to benefit		-					
	C/OH							

SCHEDULE G

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ov Polling E Printing E Salaries/	Expense Wages/Contract Labor	Solicitation/Fultifiating Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 8/10 Rpt: 38/40		Ochoa Nelson, Anastacia			00089575			
4	Date	5	Payee name						
	06/22/2025		FEDEX						
6	Amount (\$) \$13.84	7	7 Payee address; City; State; Zip Code 1275 NE LOOP 410						
	Reimbursement from political contributions intended		SAN ANTONIO, TX 78209						
8	PURPOSE	(a)	Category (See Categories listed at the top of this scl	nedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE		Advertising Expense			Check if Austin, TX, officeholder living expense			
	ZXI ZXIZITONZ				LOGO PRINTING	G FOR BUTTONS			
9	Complete ONLY if direct	Cal	ndidate/Officeholder name		Office sought	Office held			
	expenditure to benefit C/OH	Out	ididate of the control of the contro		Omec Sought	Cinice neid			
	Date		Payee name						
	06/24/2025		FEDEX						
	Amount (\$)		ode						
	\$3.08		4418 BROADWAY ST						
	Reimbursement from political contributions intended		SAN ANTONIO, TX 78209						
	PURPOSE		Category (See Categories listed at the top of this sol	nedule)	Description [Check if travel outside of Texas. Complete Schedule T.			
OF EXPENDITURE			Advertising Expense		Check if Austin, TX, officeholder living expense				
					LOGO PRINTING	G FOR CAMPAIGN BUTTONS			
	Complete ONLY if direct expenditure to benefit C/OH	Ca	ndidate/Officeholder name		Office sought	Office held			
	Date	Г	Payee name						
	06/29/2025		FLEMING, JOE						
	Amount (\$) \$250.00		Payee address; City; State 16561 WASHINGTON ST	; Zip C	ode				
	Reimbursement from political contributions intended		OMAHA, TX 68135						
	PURPOSE OF		Category (See Categories listed at the top of this sol	nedule)	Description	Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE		Advertising Expense		L	Check if Austin, TX, officeholder living expense			
					GRAPHIC DESIG	GN			
	Complete ONLY if direct expenditure to benefit C/OH	Ca	ndidate/Officeholder name		Office sought	Office held			

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E	Expense s/Wages/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
L	S. Sun Gura i ayincin		The Instruction Guide explains	how to co	omplete this form.	_				
1	Total pages Schedule G:	2 FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 9/10 Rpt: 39/40	Ochoa Nels	son, Anastacia				00089575			
4	Date	5 Payee name								
	04/14/2025	,	GODADDY							
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$169.56									
	Reimbursement from									
	political contributions intended	TEMPE, AZ 85281								
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sch	edule)	(b) Description	=	neck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Advertising	Expense			_	neck if Austin, TX, officeholder living expense			
					WEBSITE DOMA	AIN				
9	expenditure to benefit	Candidate/Office	holder name		Office sought		Office held			
	C/OH									
	Date	Payee name								
	05/07/2025	l	PEN COMPANY							
	Amount (\$)	Payee addre	ess; City; State;							
\$292.43 1 SHARPIE WAY										
	Reimbursement from									
	political contributions intended	SHELBYVI	LLE, TN 37160							
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.			
OF EXPENDITURE		Advertising		*		Ch	neck if Austin, TX, officeholder living expense			
	EAPENDITUKE		•		CAMPAIGN PEN	IS				
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit C/OH									
L										
	Date	Payee name								
	06/29/2025	RISTAU, R	ANCE							
	Amount (\$)	Payee addre	ess; City; State;	; Zip Co	ode					
	\$250.00	300 E. BAS	SSE RD							
	Reimbursement from									
	political contributions intended	SAN ANTO	NIO, TX 78209							
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Advertising	Expense		[Ch	neck if Austin, TX, officeholder living expense			
	ZA ERDITORLE				PHOTOGRAPHY	Y				
		Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit C/OH									

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event 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 NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 10/10 Rpt: 40/40 Ochoa Nelson, Anastacia 00089575 Date Payee name 05/07/2025 **SQUARESPACE** 6 Amount (\$) Payee address; City; State; Zip Code 225 VARICK ST \$294.22 Reimbursement from political contributions intended NEW YORK, NY 10014 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** WEBSITE BUILDING Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH