

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00089575	2 Total pages filed: 40
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Anastacia		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025
	<hr/> NICKNAME LAST SUFFIX Ana Ochoa Nelson		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 6161 San Antonio, TX 78209		Date Hand-delivered or Date Postmarked
			Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Fidel		
	<hr/> NICKNAME LAST SUFFIX Tres Rodriguez III		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 231 W. Cypress San Antonio, TX 78212		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 610-8545		
8 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</div> <div style="width: 50%;"><input checked="" type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded modified reporting limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH-FR)</div> </div>		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 04/01/2025 06/30/2025		
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Criminal District Court Judge District 226th

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 40

13 C / OH NAME Ochoa Nelson, Anastacia	14 Filer ID (Ethics Commission Filers) 00089575
---	---

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 32,015.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 9,078.23
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 25,329.44
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 1,000.00

17 AFFIDAVIT		
<p>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.</p> <div style="text-align: right;"><u>Anastacia Ochoa Nelson</u> Signature of Candidate or Officeholder</div>		
<p>AFFIX NOTARY STAMP / SEAL ABOVE</p>		
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>		
<div style="display: flex; justify-content: space-between;"><div>_____ Signature of officer administering oath</div><div>_____ Printed name of officer administering oath</div><div>_____ Title of officer administering oath</div></div>		

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

3 of 40

18 FILER NAME Ochoa Nelson, Anastacia		19 Filer ID 00089575	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	30,715.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	1,300.00
3.	<input checked="" type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	2,000.00
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	1,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	6,864.68
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	2,213.55
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/18 Rpt: 4/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDES DAVIS, MARGARET <hr/> 6 Contributor address; City; State; Zip Code MESQUITE, TX 75181	7 Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
8 Contributor's Principal Occupation RETIRED		9 Contributor's Job Title RETIRED
10 Contributor's employer/law firm RETIRED		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, STEPHANIE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) <div style="text-align: right;">\$50.00</div>
Contributor's Principal Occupation UNEMPLOYED		Contributor's Job Title UNEMPLOYED
Contributor's employer/law firm UNEMPLOYED		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, WILLIAM <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205	Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm SELF		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/18 Rpt: 5/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, GRANT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation ATTORNEY		9 Contributor's Job Title ATTORNEY
10 Contributor's employer/law firm LIGHTFOOT FRANKLINK AND WRIGHT		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMMACK III, THOMAS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm HARPER LAW FIRM		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOLO, ERIC <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm LAW OFFICES OF MALONEY AND CAMPOLO		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/18 Rpt: 6/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHACON, CAMPBELL, & ALEXANDER <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	7 Amount of Contribution (\$) \$1,500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, M. BENAVIDES <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75181	Amount of Contribution (\$) \$2,000.00
Contributor's Principal Occupation RETIRED		Contributor's Job Title RETIRED
Contributor's employer/law firm RETIRED		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ZACK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm BEXAR COUNTY		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/18 Rpt: 7/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLINOR, DAN 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation RETIRED		9 Contributor's Job Title RETIRED
10 Contributor's employer/law firm RETIRED		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERNEST ACEVEDO III Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSSIER, MARY Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm HARRIS COUNTY		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/18 Rpt: 8/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, ANDI <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	7 Amount of Contribution (\$) \$25.00
8 Contributor's Principal Occupation SUPERVISOR		9 Contributor's Job Title SUPERVISOR
10 Contributor's employer/law firm BEXAR COUNTY		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGEE, AUSTIN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm AUSTIN HAGEE LAW FIRM PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, DARYL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205	Amount of Contribution (\$) \$20.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm BEXAR COUNTY		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/18 Rpt: 9/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRERA, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation RETIRED		9 Contributor's Job Title RETIRED
10 Contributor's employer/law firm RETIRED		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA, MARTINA <hr/> Contributor address; City; State; Zip Code SAN ANTOINO, TX 78209	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm BRACEWELL LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRISTOFERSON, SANDRA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76205	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation HOMEMAKER		Contributor's Job Title HOMEMAKER
Contributor's employer/law firm HOMEMAKER		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/18 Rpt: 10/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHOOD NORTON PLLC <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	7 Amount of Contribution (\$) <div style="text-align: right;">\$1,500.00</div>
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW OFFICE OF ALBERTO ACEVEDO III <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78207	Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW OFFICE OF DAVID D. CHRISTIAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/18 Rpt: 11/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW OFFICE OF J. CHARLES BUNK <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW OFFICE OF JAMES V. TOCCI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW OFFICE OF JOHN D. PEREZ <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/18 Rpt: 12/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW OFFICE OF PAUL R. ACEVEDO 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78207	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW OFFICE OF SCOTT MCCRUM Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> 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 Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/18 Rpt: 13/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW OFFICES OF FIDEL RODRIGUEZ JR 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$1,500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEGARETTA LAW FIRM Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, CRISTINA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation ADVOCATE		Contributor's Job Title ADVOCATE
Contributor's employer/law firm BEXAR COUNTY		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/18 Rpt: 14/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOUIS MARTINEZ PC 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARIN, SAL Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205	Amount of Contribution (\$) \$20.00
Contributor's Principal Occupation OFFICE MANAGER		Contributor's Job Title OFFICE MANAGER
Contributor's employer/law firm BEXAR COUNTY		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, MARGARET Contributor address; City; State; Zip Code NEW ORLEANS, LA 70001	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation VP OPERATIONS		Contributor's Job Title VP OPERATIONS
Contributor's employer/law firm BENZAIT		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/18 Rpt: 15/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNDT, BRANDON <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation ATTORNEY		9 Contributor's Job Title ATTORNEY
10 Contributor's employer/law firm SAHADI LEGAL GROUP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation RETIRED		Contributor's Job Title RETIRED
Contributor's employer/law firm RETIRED		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIXON, ALI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm PARALLON/HCA HEALTHCARE		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/18 Rpt: 16/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORSATTI LEGAL GROUP <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	7 Amount of Contribution (\$) \$1,500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, TREY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm SELF		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, BRIAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm SELF-EMPLOYED		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/18 Rpt: 17/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> 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 Contributor's Principal Occupation ATTORNEY		9 Contributor's Job Title ATTORNEY
10 Contributor's employer/law firm GRAHAM LAW FIRM		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS AND DEL CUETO PLLC Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS, CHRISTOPHER Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228	Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm SELF		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/18 Rpt: 18/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, SCOTT <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation ATTORNEY		9 Contributor's Job Title ATTORNEY
10 Contributor's employer/law firm BEXAR COUNTY		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, CATHERINE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$25.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm 81ST DISTRICT ATTORNEY'S OFFICE		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PATRICK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation PSYCHOLOGIST		Contributor's Job Title PSYCHOLOGIST
Contributor's employer/law firm VETERAN'S AFFAIRS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/18 Rpt: 19/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, SHAWN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation RECEPTION		9 Contributor's Job Title RECEPTION
10 Contributor's employer/law firm BEXAR COUNTY		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE LAW OFFICE OF EDWARD F. SHAUGHNESSY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE LAW OFFICE OF ROBERT MAURER II <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 17/18 Rpt: 20/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE LAW OFFICES OF JOHN KUNTZ <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE RAMOS AND TORRES LAW FIRM <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEGA, CHRISTIAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm SELF		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:
Sch: 18/18 Rpt: 21/40

2 FILER NAME
Ochoa Nelson, Anastacia

3 Filer ID (Ethics Commission Filers)
00089575

4 Date
05/20/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
VILLARREAL, MICHAEL J.

7 Amount of Contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code

SAN ANTONIO, TX 78240

8 Contributor's Principal Occupation
ATTORNEY

9 Contributor's Job Title
ATTORNEY

10 Contributor's employer/law firm
BEXAR COUNTY

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 22/40	
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/20/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINS, C. ELAINE	8 Amount of contribution (\$) \$50.00	9 In-kind contribution description FOOD AND BEVERAGE FOR NETWORKING EVENT
	7 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) RETIRED		13 Contributor's job title (FOR JUDICIAL) (See instructions) RETIRED	
14 Contributor's employer/law firm (FOR JUDICIAL) RETIRED		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, BRITTANIE	Amount of contribution (\$) \$50.00	In-kind contribution description CAMPAING STICKERS
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) HOMEMAKER		Contributor's job title (FOR JUDICIAL) (See instructions) HOMEMAKER	
Contributor's employer/law firm (FOR JUDICIAL) HOMEMAKER		Law firm of contributor's spouse (if any) (FOR JUDICIAL) LAW OFFICES OF FIDEL RODRIGUEZ JR.	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOLK & MCELROY	Amount of contribution (\$) \$1,200.00	In-kind contribution description ADVERTISING SPACE
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / 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 contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B(J): Sch: 1/1 Rpt: 23/40	
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 TOTAL OF UNITEMIZED PLEDGES			\$ 0.00
5 Date 05/15/2025	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACEVEDO, PAUL R. <hr/> 7 Pledgor Address; City; State; Zip Code SAN ANTONIO, TX 78207	8 Amount of pledge (\$) \$500.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind description (If applicable)
10 Pledgor's principal occupation ATTORNEY		11 Pledgor's job title ATTORNEY	
12 Pledgor's employer/law firm LAW OFFICE OF PAUL ACEVEDO		13 Law firm of pledgor's spouse (if any)	
14 If pledgor is a child, law firm of parent(s) (if any)			
Date 05/12/2025	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, LOUIS D. <hr/> Pledgor Address; City; State; Zip Code SAN ANTONIO, TX 78205	Amount of pledge (\$) \$500.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind description (If applicable)
Pledgor's principal occupation ATTORNEY		Pledgor's job title ATTORNEY	
Pledgor's employer/law firm LOUIS D. MARTINEZ PC		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			
Date 05/12/2025	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, LINDSEY <hr/> Pledgor Address; City; State; Zip Code SAN ANTONIO, TX 78205	Amount of pledge (\$) \$1,000.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind description (If applicable)
Pledgor's principal occupation ATTORNEY		Pledgor's job title ATTORNEY	
Pledgor's employer/law firm LAW OFFICE OF J. CHARLES BUNK		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 1/1 Rpt: 24/40
2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 04/03/2025	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) OCHOA NELSON, ANASTACIA	9 Loan Amount (\$) \$1,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code SAN ANTONIO, TX 78209	10 Interest Rate
		11 Maturity Date
12 Lender's Principal Occupation ATTORNEY		13 Lender's Job Title ATTORNEY
14 Lender's Employer/Law Firm BEXAR COUNTY		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, 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 -
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.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 25/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/22/2025	5 Payee name ACADEMY SPORTS AND OUTDOORS	
6 Amount (\$) \$54.11	7 Payee address; City; State; Zip Code 2727 NE LOOP 410 SAN ANTONIO, TX 78217	
8 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 FOLDING TABLE FOR EVENTS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2025	Payee name ACADEMY SPORTS AND OUTDOORS	
Amount (\$) \$48.69	Payee address; City; State; Zip Code 2727 NE LOOP 410 SAN ANTONIO, TX 78217	
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 POP-UP TENT FOR CAMPAIGN EVENTS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name DONORBOX	
Amount (\$) \$141.25	Payee address; City; State; Zip Code 1520 BELLE VIEW BLVD ALEXANDRIA, VA 22307	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 ONLINE DONATION PROCESSING FEES
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.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 26/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 04/23/2025	5 Payee name FROST	
6 Amount (\$) \$34.30	7 Payee address; City; State; Zip Code 111 W. HOUSTON ST SAN ANTONIO, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 FOR CHECK PRINTING
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name FROST		
Amount (\$) \$8.00	Payee address; City; State; Zip Code 111 W. HOUSTON ST SAN ANTONIO, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANKING FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name Office sought Office held	
Payee name MONARCH TROPHY STUDIO		
Amount (\$) \$12.99	Payee address; City; State; Zip Code 16227 SAN PEDRO SAN ANTONIO, TX 78232	
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 NAME TAG FOR EVENTS
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.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 27/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/21/2025	5 Payee name NATIONAL PEN COMPANY	
6 Amount (\$) \$725.21	7 Payee address; City; State; Zip Code 1 SHARPIE WAY SHELBYVILLE, TN 37160	
8 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 CAMPAIGN PENS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/13/2025	Payee name PRESTIGE PRINTING	
Amount (\$) \$758.83	Payee address; City; State; Zip Code 8 BURWOOD LANE SAN ANTONIO, TX 78216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 CAMPAIGN LITERATURE PRINTING
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/13/2025	Payee name SMOKE SHACK	
Amount (\$) \$2,130.92	Payee address; City; State; Zip Code 3714 BROADWAY SAN ANTONIO, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 CAMPAIGN EVENT DEPOSIT
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.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 28/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 06/25/2025	5 Payee name SPECIAL T'S	
6 Amount (\$) \$537.30	7 Payee address; City; State; Zip Code 11031 WYE SAN ANTONIO, TX 78217	
8 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 CAMPAIGN SHIRTS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/29/2025	Payee name STICKERYOU	
Amount (\$) \$353.59	Payee address; City; State; Zip Code 670 CALEDONIA RD TORONTO ONTARIO M6E4V9 Canada	
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 CAMPAIGN STICKERS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name STRIPE	
Amount (\$) \$145.53	Payee address; City; State; Zip Code 354 OYSTER POINT BLVD SAN FRANCISCO, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 ONLINE DONATION PROCESSING FEES
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.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 29/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/15/2025	5 Payee name THE PIG PEN	
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
Date 06/09/2025	Payee name 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN HATS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN HATS
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.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 30/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/14/2025	5 Payee name VIVROUX	
6 Amount (\$) \$294.12	7 Payee address; City; State; Zip Code 2222 BREEZEWOOD DR SAN ANTONIO, TX 78209	
8 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 CAMPAIGN SHIRTS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/10 Rpt: 31/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/04/2025	5 Payee name ADOBE	
6 Amount (\$) \$14.93 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 345 PARK AVENUE SAN JOSE, CA 95110	
8 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 DESIGN SOFTWARE FEE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$14.93 <input type="checkbox"/> Reimbursement from political contributions intended	Payee name ADOBE Payee address; City; State; Zip Code 345 PARK AVENUE SAN JOSE, CA 95110	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DESIGN SOFTWARE FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/12/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$75.76 <input type="checkbox"/> Reimbursement from political contributions intended	Payee name AMAZON Payee address; City; State; Zip Code 410 TERRY AVE. N. SEATTLE, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BUTTONMAKER FOR CAMPAIGN BUTTONS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/10 Rpt: 32/40		2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 Date 06/21/2025		5 Payee name AMAZON			
6 Amount (\$) \$25.97 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 410 TERRY AVE. N. SEATTLE, WA 98109			
8 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 CAMPAIGN BUTTON SUPPLY	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/24/2025		Payee name AMAZON			
Amount (\$) \$34.36 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 410 TERRY AVE. N. SEATTLE, WA 98109			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		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 ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/29/2025		Payee name AMAZON			
Amount (\$) \$56.26 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 410 TERRY AVE. N. SEATTLE, WA 98109			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN BUTTON SUPPLY	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/10 Rpt: 33/40		2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 Date 04/14/2025		5 Payee name BEXAR COUNTY DEMOCRATIC PARTY			
6 Amount (\$) \$5.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 1844 FREDERICKSBURG RD SAN ANTONIO, TX 78201			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RECURRING MONTHLY DONATION	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/14/2025		Payee name BEXAR COUNTY DEMOCRATIC PARTY			
Amount (\$) \$5.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1844 FREDERICKSBURG RD SAN ANTONIO, TX 78201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RECURRING MONTHLY DONATION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/14/2025		Payee name BEXAR COUNTY DEMOCRATIC PARTY			
Amount (\$) \$5.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1844 FREDERICKSBURG RD SAN ANTONIO, TX 78201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RECURRING MONTHLY DONATION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/10 Rpt: 34/40		2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 Date 05/07/2025		5 Payee name FEDEX			
6 Amount (\$) \$239.20 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
8 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 CAMPAIGN BANNER	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/07/2025		Payee name FEDEX			
Amount (\$) \$76.33 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN BOOKMARKS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/07/2025		Payee name FEDEX			
Amount (\$) \$92.54 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN LITERATURE	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 5/10 Rpt: 35/40		2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 Date 05/12/2025		5 Payee name FEDEX			
6 Amount (\$) \$113.65 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
8 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 CAMPAIGN LITERATURE	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/13/2025		Payee name FEDEX			
Amount (\$) \$4.61 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LOGO PRINTING FOR CAMPAIGN BUTTONS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/14/2025		Payee name FEDEX			
Amount (\$) \$75.76 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POSTER	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 6/10 Rpt: 36/40		2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 Date 05/14/2025		5 Payee name FEDEX			
6 Amount (\$) \$9.79 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
8 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 CAMPAIGN LITERATURE	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/14/2025		Payee name FEDEX			
Amount (\$) \$4.61 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LOGO PRINTING FOR CAMPAIGN BUTTONS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/13/2025		Payee name FEDEX			
Amount (\$) \$9.77 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PETITION SHEETS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 7/10 Rpt: 37/40		2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 Date 06/22/2025		5 Payee name FEDEX			
6 Amount (\$) \$46.54 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
8 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 THANK YOU CARDS	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/27/2025		Payee name FEDEX			
Amount (\$) \$22.73 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PETITION SHEETS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/29/2025		Payee name FEDEX			
Amount (\$) \$7.68 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1275 NE LOOP 410 SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LOGO PRINTING FOR CAMPAIGN BUTTONS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 8/10 Rpt: 38/40		2 FILER NAME Ochoa Nelson, Anastacia		3 Filer ID (Ethics Commission Filers) 00089575	
4 Date 06/22/2025		5 Payee name FEDEX			
6 Amount (\$) \$13.84 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 1275 NE LOOP 410 SAN ANTONIO, TX 78209			
8 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 LOGO PRINTING FOR BUTTONS	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/24/2025		Payee name FEDEX			
Amount (\$) \$3.08 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4418 BROADWAY ST SAN ANTONIO, TX 78209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LOGO PRINTING FOR CAMPAIGN BUTTONS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/29/2025		Payee name FLEMING, JOE			
Amount (\$) \$250.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 16561 WASHINGTON ST OMAHA, TX 68135			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GRAPHIC DESIGN	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 9/10 Rpt: 39/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 04/14/2025	5 Payee name GODADDY	
6 Amount (\$) \$169.56 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 100 S. MILL AVE TEMPE, AZ 85281	
8 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 WEBSITE DOMAIN
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2025	Payee name NATIONAL PEN COMPANY	
Amount (\$) \$292.43 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1 SHARPIE WAY SHELBYVILLE, TN 37160	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PENS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2025	Payee name RISTAU, RANCE	
Amount (\$) \$250.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 300 E. BASSE RD SAN ANTONIO, TX 78209	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PHOTOGRAPHY
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 10/10 Rpt: 40/40	2 FILER NAME Ochoa Nelson, Anastacia	3 Filer ID (Ethics Commission Filers) 00089575
4 Date 05/07/2025	5 Payee name SQUARESPACE	
6 Amount (\$) \$294.22 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 225 VARICK ST NEW YORK, NY 10014	
8 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 WEBSITE BUILDING
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held