

**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) 00084894	2 Total pages filed: 58		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Marissa L. NICKNAME LAST Giovenco			MI OFFICE USE ONLY		
				Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 23644 San Antonio, TX 78223			Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount		
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms. FIRST Elisa M. NICKNAME LAST Gonzales			MI SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 13315 El Charro St. San Antonio, TX 78233			APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 867-2013					
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
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) District Judge District 226		

GO TO PAGE 2

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM JC/OH
COVER SHEET PG 2**

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13 C / OH NAME	Giovenco, Marissa L.		14 Filer ID (Ethics Commission Filers) 00084894												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>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.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	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)		\$ 27,375.65												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. TOTAL POLITICAL EXPENDITURES		\$ 24,756.05												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 7,448.74												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 7,470.00												

17 AFFIDAVIT

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

Marissa L. Giovenco

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

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18 FILER NAME Giovenco, Marissa L.	19 Filer ID (Ethics Commission Filers) 00084894
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 19,029.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 8,346.65	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 13,762.30	
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 3,000.00	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 7,469.58	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 731.59	
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$ 1,695.00	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/27 Rpt: 4/58	
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894	
4 Date 11/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar , Omar (Mr.)	7 Amount of Contribution (\$) \$15.00	
	6 Contributor address; City; State; Zip Code San Antonio, TX 78252		
8 Contributor's Principal Occupation Underwriter		9 Contributor's Job Title underwriter	
10 Contributor's employer/law firm Epm		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 10/24/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Roxanne Contributor address; City; State; Zip Code boerne, TX 78006	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Digital Product Manager		Contributor's Job Title Digital Product Manager	
Contributor's employer/law firm USAA		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 11/18/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrera Jr, Roy Contributor address; City; State; Zip Code san antonio, TX 78205	Amount of Contribution (\$) \$1,000.00
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: 2/27 Rpt: 5/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Caitlin	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code san antonio, TX 78247	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm Jean Brown Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Kenneth Contributor address; City; State; Zip Code san antonio, TX 78240		Amount of Contribution (\$) \$20.00
Contributor's Principal Occupation Utility technician		Contributor's Job Title utility technician
Contributor's employer/law firm Grey Forest Utilities		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/01/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Sade Contributor address; City; State; Zip Code Cibilo, TX 78108		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm US attorneys office		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: 3/27 Rpt: 6/58	
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894	
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Sade	7 Amount of Contribution (\$) \$100.00	
	6 Contributor address; City; State; Zip Code Cibilo, TX 78108		
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney	
10 Contributor's employer/law firm US attorneys office		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 10/01/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Sade Contributor address; City; State; Zip Code Cibilo, TX 78108	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney	
Contributor's employer/law firm US attorneys		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 11/01/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Sade Contributor address; City; State; Zip Code Cibilo, TX 78108	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney	
Contributor's employer/law firm US attorneys		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: 4/27 Rpt: 7/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Sade 6 Contributor address; City; State; Zip Code cibilo, TX 78108	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm US attorneys		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brien, Megan Contributor address; City; State; Zip Code san antonio, TX 78261		Amount of Contribution (\$) \$25.00
Contributor's Principal Occupation paralegal		Contributor's Job Title paralegal
Contributor's employer/law firm Tinsman & Sciano		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, William Contributor address; City; State; Zip Code san antonio, TX 78205		Amount of Contribution (\$) \$250.00
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: 5/27 Rpt: 8/58																											
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894																											
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabanas Law Firm 6 Contributor address; City; State; Zip Code san antonio, TX 78212	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)																													
<table border="1"> <tr> <td>Date 12/03/2025</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238 </td> <td> Amount of Contribution (\$) \$50.00 </td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation retired </td> <td> Contributor's Job Title retired </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm na </td> <td> Law firm of contributor's spouse (if any) </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> <tr> <td colspan="3"> <table border="1"> <tr> <td>Date 12/12/2025</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238 </td> <td> Amount of Contribution (\$) \$75.00 </td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation retired </td> <td> Contributor's Job Title retired </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm na </td> <td> Law firm of contributor's spouse (if any) </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table> </td> </tr> </table>			Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation retired		Contributor's Job Title retired	Contributor's employer/law firm na		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)			<table border="1"> <tr> <td>Date 12/12/2025</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238 </td> <td> Amount of Contribution (\$) \$75.00 </td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation retired </td> <td> Contributor's Job Title retired </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm na </td> <td> Law firm of contributor's spouse (if any) </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238	Amount of Contribution (\$) \$75.00	Contributor's Principal Occupation retired		Contributor's Job Title retired	Contributor's employer/law firm na		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238	Amount of Contribution (\$) \$50.00																											
Contributor's Principal Occupation retired		Contributor's Job Title retired																											
Contributor's employer/law firm na		Law firm of contributor's spouse (if any)																											
If contributor is a child, law firm of parent(s) (if any)																													
<table border="1"> <tr> <td>Date 12/12/2025</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238 </td> <td> Amount of Contribution (\$) \$75.00 </td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation retired </td> <td> Contributor's Job Title retired </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm na </td> <td> Law firm of contributor's spouse (if any) </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238	Amount of Contribution (\$) \$75.00	Contributor's Principal Occupation retired		Contributor's Job Title retired	Contributor's employer/law firm na		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)																	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam Contributor address; City; State; Zip Code san antonio, TX 78238	Amount of Contribution (\$) \$75.00																											
Contributor's Principal Occupation retired		Contributor's Job Title retired																											
Contributor's employer/law firm na		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: 6/27 Rpt: 9/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Adam 6 Contributor address; City; State; Zip Code san antonio, TX 78238	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm na		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/10/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Leticia Contributor address; City; State; Zip Code san antonio, TX 78204		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Paralegal		Contributor's Job Title Paralegal
Contributor's employer/law firm Garza and Associates		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/04/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, David Contributor address; City; State; Zip Code San Antonio, TX 78212		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Christian & Nisbet		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: 7/27 Rpt: 10/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cisneros, Johnny 6 Contributor address; City; State; Zip Code San Antonio, TX 78207	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/20/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy Contributor address; City; State; Zip Code san antonio, TX 78217		Amount of Contribution (\$) \$10.00
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm na		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/02/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durbin, Laura Contributor address; City; State; Zip Code san antonio, TX 78212		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm US attorneys		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: 8/27 Rpt: 11/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esparza, Fernando 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Doctor		9 Contributor's Job Title doctor
10 Contributor's employer/law firm Fernando J. Esparza, PSY		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza and Brock 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 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Gerald Contributor address; City; State; Zip Code san antonio, TX 78213	Amount of Contribution (\$) \$300.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm na		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: 9/27 Rpt: 12/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowlks, Justin 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/31/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Justin Contributor address; City; State; Zip Code Eugene, OR 97403		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Consultant		Contributor's Job Title Consultant
Contributor's employer/law firm Juniper Rim Partners		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/15/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, John Contributor address; City; State; Zip Code san antonio, TX 78232		Amount of Contribution (\$) \$300.00
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: 10/27 Rpt: 13/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 07/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Mae	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code san antonio, TX 78229	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm Garza & Associates		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Michelle	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code san antonio, TX 78247	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm na		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gold, Charles	Amount of Contribution (\$) \$159.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
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: 11/27 Rpt: 14/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosset, Eric 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation paralegal		9 Contributor's Job Title paralegal
10 Contributor's employer/law firm walter law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/01/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Christine Contributor address; City; State; Zip Code Castle Hills, TX 78213		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 10/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Juan Carlos Contributor address; City; State; Zip Code san antonio, TX 78216		Amount of Contribution (\$) \$250.00
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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A(J)1: Sch: 12/27 Rpt: 15/58</p>	
<p>2 FILER NAME Giovenco, Marissa L.</p>		<p>3 Filer ID (Ethics Commission Filers) 00084894</p>	
<p>4 Date 10/02/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Lane, Jampala 6 Contributor address; City; State; Zip Code san antonio, TX 78205</p>	<p>7 Amount of Contribution (\$) \$500.00</p>	
<p>8 Contributor's Principal Occupation</p>		<p>9 Contributor's Job Title</p>	
<p>10 Contributor's employer/law firm</p>		<p>11 Law firm of contributor's spouse (if any)</p>	
<p>12 If contributor is a child, law firm of parent(s) (if any)</p>			
<p>Date 12/03/2025</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ishan, Sareen Contributor address; City; State; Zip Code san antonio, TX 78247</p>	<p>Amount of Contribution (\$) \$200.00</p>
<p>Contributor's Principal Occupation attorney</p>		<p>Contributor's Job Title attorney</p>	
<p>Contributor's employer/law firm self</p>		<p>Law firm of contributor's spouse (if any)</p>	
<p>If contributor is a child, law firm of parent(s) (if any)</p>			
<p>Date 11/26/2025</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Eduardo Contributor address; City; State; Zip Code san antonio, TX 78209</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Contributor's Principal Occupation attorney</p>		<p>Contributor's Job Title attorney</p>	
<p>Contributor's employer/law firm self</p>		<p>Law firm of contributor's spouse (if any)</p>	
<p>If contributor is a child, law firm of parent(s) (if any)</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/27 Rpt: 16/58	
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894	
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Eduardo 6 Contributor address; City; State; Zip Code san antonio, TX 78209	7 Amount of Contribution (\$) \$25.00	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney	
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 07/14/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kagan, Jerry Contributor address; City; State; Zip Code san antonio, TX 78201	Amount of Contribution (\$) \$150.00
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 09/09/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennick, michael Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Electronics Engineer		Contributor's Job Title Electronics Engineer	
Contributor's employer/law firm USAF		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: 14/27 Rpt: 17/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 07/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaHood, Adam	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code san antonio, TX 78212	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lessert, Todd	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code san antonio, TX 78209	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Todd Lessert law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Eduardo	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Universal city , TX 78148	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm na		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: 15/27 Rpt: 18/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 09/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Tim 6 Contributor address; City; State; Zip Code San Antonio, TX 78205	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm maloney and campolo		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/03/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manna, Kathleen Contributor address; City; State; Zip Code san antonio, TX 78240		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm na		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/02/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mejares, Michael Contributor address; City; State; Zip Code san antonio, TX 78251		Amount of Contribution (\$) \$30.00
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm na		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: 16/27 Rpt: 19/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michell, Jonathan 6 Contributor address; City; State; Zip Code san antonio, TX 78240	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/14/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Marissa Contributor address; City; State; Zip Code Boerne, TX 78006		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 10/02/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Megan Contributor address; City; State; Zip Code San Antonio, TX 78261		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation dentist		Contributor's Job Title dentist
Contributor's employer/law firm market ridge dental		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: 17/27 Rpt: 20/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muniz, Esmeralda 6 Contributor address; City; State; Zip Code San Antonio, TX 78223	7 Amount of Contribution (\$) \$25.00
8 Contributor's Principal Occupation district clerk		9 Contributor's Job Title district clerk
10 Contributor's employer/law firm bexar county district clerks office		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/12/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Lori Contributor address; City; State; Zip Code Roanoke, TX 76262		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm na		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Yvonne Contributor address; City; State; Zip Code san antonio, TX 78228		Amount of Contribution (\$) \$10.00
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm n/a		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: 18/27 Rpt: 21/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roger	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code san antonio, TX 78205	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pietrarezek, Mary	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code san antonio, TX 78212	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Pietrarezek Law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Trey	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code san antonio, TX 78212	
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: 19/27 Rpt: 22/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prince, Mary 6 Contributor address; City; State; Zip Code san antonio, TX 78254	7 Amount of Contribution (\$) \$10.00
8 Contributor's Principal Occupation unemployed		9 Contributor's Job Title unemployed
10 Contributor's employer/law firm na		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/02/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Adelfa Contributor address; City; State; Zip Code san antonio, TX 78213		
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm na		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/03/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Zoe Contributor address; City; State; Zip Code san antonio, TX 78210		
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Law Office of Zoe Russell, PLLC		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: 20/27 Rpt: 23/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saiz, Lawrence	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258	
8 Contributor's Principal Occupation Investigator		9 Contributor's Job Title investigator
10 Contributor's employer/law firm Bexar county district attorneys office		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Gina	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code san antonio, TX 78249	
Contributor's Principal Occupation Scrum naster		Contributor's Job Title scrum naster
Contributor's employer/law firm USAA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Gina	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code san antonio, TX 78249	
Contributor's Principal Occupation Scrum naster		Contributor's Job Title Scrum naster
Contributor's employer/law firm USAA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 21/27 Rpt: 24/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Mateo 6 Contributor address; City; State; Zip Code castroville , TX 78009	7 Amount of Contribution (\$) \$25.00
8 Contributor's Principal Occupation court administrator		9 Contributor's Job Title court administrator
10 Contributor's employer/law firm Kendall County		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/02/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwindt, Sheena Contributor address; City; State; Zip Code Dickenson, ND 58601		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation HR		Contributor's Job Title HR
Contributor's employer/law firm SRMS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/04/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sciano, Daniel Contributor address; City; State; Zip Code San Antonio, TX 78216		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Tinsman & Sciano		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: 22/27 Rpt: 25/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Second Chance Bail bonds 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 10/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shank, Maggie 6 Contributor address; City; State; Zip Code san antonio, TX 78247		
Contributor's Principal Occupation paralegal		Contributor's Job Title paralegal
Contributor's employer/law firm Brck law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiller, Lora 6 Contributor address; City; State; Zip Code san antonio, TX 78255		
Contributor's Principal Occupation Doctor		Contributor's Job Title Doctor
Contributor's employer/law firm University of Texas		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: 23/27 Rpt: 26/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Martha 6 Contributor address; City; State; Zip Code san antonio , TX 78216	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm na		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/2025		
Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanush, Lisa (Mrs.) Contributor address; City; State; Zip Code Universal City, TX 78109		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation office manager		
Contributor's Job Title office manager		
Contributor's employer/law firm caliber collision		
Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)		
Date 12/11/2025		
Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanush, Lisa (Mrs.) Contributor address; City; State; Zip Code Universal City, TX 78109		Amount of Contribution (\$) \$2,000.00
Contributor's Principal Occupation office manager		
Contributor's Job Title office manager		
Contributor's employer/law firm caliber collision		
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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A(J)1: Sch: 24/27 Rpt: 27/58</p>
<p>2 FILER NAME Giovenco, Marissa L.</p>		<p>3 Filer ID (Ethics Commission Filers) 00084894</p>
<p>4 Date 10/24/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stenberg, Joe</p> <p>6 Contributor address; City; State; Zip Code San Antonio, TX 78212</p>	<p>7 Amount of Contribution (\$) \$25.00</p>
<p>8 Contributor's Principal Occupation attorney</p>		<p>9 Contributor's Job Title attorney</p>
<p>10 Contributor's employer/law firm self</p>		<p>11 Law firm of contributor's spouse (if any)</p>
<p>12 If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 07/10/2025</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tally, James</p> <p>Contributor address; City; State; Zip Code san antonio, TX 78209</p>
<p>Contributor's Principal Occupation retired</p>		<p>Contributor's Job Title retired</p>
<p>Contributor's employer/law firm na</p>		<p>Law firm of contributor's spouse (if any)</p>
<p>If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 10/02/2025</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdovinos, Daisy</p> <p>Contributor address; City; State; Zip Code San Antonio, TX 78250</p>
<p>Contributor's Principal Occupation customer service</p>		<p>Contributor's Job Title customer service</p>
<p>Contributor's employer/law firm USAA</p>		<p>Law firm of contributor's spouse (if any)</p>
<p>If contributor is a child, law firm of parent(s) (if any)</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 25/27 Rpt: 28/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaught, Traci 6 Contributor address; City; State; Zip Code Lake Havasu City, AZ 86403	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation financial advisor		9 Contributor's Job Title financial advisor
10 Contributor's employer/law firm edward jones		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/31/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villalobos, Robert Contributor address; City; State; Zip Code converse , TX 78109		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm na		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/12/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wachendorf, John Contributor address; City; State; Zip Code Boyd, TX 76023		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation MD finance		Contributor's Job Title MD finance
Contributor's employer/law firm Futu clearing inc		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: 26/27 Rpt: 29/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 07/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, JG 6 Contributor address; City; State; Zip Code San Antonio, TX 78215	7 Amount of Contribution (\$) \$300.00
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wemmert, Judith Contributor address; City; State; Zip Code Bulverde, TX 78163		Amount of Contribution (\$) \$250.00
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 10/01/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, David Contributor address; City; State; Zip Code Schertz, TX 78154		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: 27/27 Rpt: 30/58
2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ybarra, Sergio 6 Contributor address; City; State; Zip Code San antonio, TX 78230	7 Amount of Contribution (\$) \$25.00
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm Dunham and jones		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ybarra, Timothy Contributor address; City; State; Zip Code san antonio, TX 78233	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm na		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 1/6 Rpt: 31/58</p>
<p>2 FILER NAME Giovenco, Marissa L.</p>				<p>3 Filer ID (Ethics Commission Filers) 00084894</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 11/22/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brandi's divine cleaning</p> <p>7 Contributor address; City; State; Zip Code san antonio, TX 78244</p>			<p>8 Amount of contribution (\$) \$100.00</p> <p>9 In-kind contribution description \$100 gift card</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bryant, Duane</p> <p>Contributor address; City; State; Zip Code san antonio, TX 78253</p>			<p>Amount of contribution (\$) \$85.00</p> <p>In-kind contribution description 2 rodeo tickets</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL) flight engineer</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions) flight engineer</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL) USAF</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 07/10/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cabanas, Alfonso</p> <p>Contributor address; City; State; Zip Code san antonio, TX 78212</p>			<p>Amount of contribution (\$) \$1,233.40</p> <p>In-kind contribution description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL) attorney</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions) attorney</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL) Cabanas law firm</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 2/6 Rpt: 32/58</p>
<p>2 FILER NAME Giovenco, Marissa L.</p>				<p>3 Filer ID (Ethics Commission Filers) 00084894</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 11/22/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Castillo, Adam</p>		<p>8 Amount of contribution (\$) \$85.00</p>	<p>9 In-kind contribution description Rival 16 qt roaster</p>
	<p>7 Contributor address; City; State; Zip Code san antonio, TX 78238</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL) retired</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions) retired</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL) na</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Evolve Texas medical group</p>		<p>Amount of contribution (\$) \$100.00</p>	<p>In-kind contribution description one month B12 shots</p>
	<p>Contributor address; City; State; Zip Code san antonio, TX 78258</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Evolve Texas medical group</p>		<p>Amount of contribution (\$) \$50.00</p>	<p>In-kind contribution description one cocoon session</p>
	<p>Contributor address; City; State; Zip Code san antonio, TX 78258</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 3/6 Rpt: 33/58</p>
<p>2 FILER NAME Giovenco, Marissa L.</p>				<p>3 Filer ID (Ethics Commission Filers) 00084894</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 12/03/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Flores, Gerald</p>		<p>8 Amount of contribution (\$) \$3,076.26</p>	<p>9 In-kind contribution description catering and cake</p>
	<p>7 Contributor address; City; State; Zip Code san antonio, TX 78213</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>12 Contributor's principal occupation (FOR JUDICIAL) retired</p>			<p>13 Contributor's job title (FOR JUDICIAL) (See instructions) retired</p>	
<p>14 Contributor's employer/law firm (FOR JUDICIAL) na</p>			<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Flores, Gerald</p>		<p>Amount of contribution (\$) \$300.00</p>	<p>In-kind contribution description painting</p>
	<p>Contributor address; City; State; Zip Code san antonio, TX 78213</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL) retired</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions) retired</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL) na</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Garcia, Geri</p>		<p>Amount of contribution (\$) \$600.00</p>	<p>In-kind contribution description Painting</p>
	<p>Contributor address; City; State; Zip Code san antonio, TX 78210</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL) artist</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions) artist</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL) self</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 4/6 Rpt: 34/58</p>
<p>2 FILER NAME Giovenco, Marissa L.</p>				<p>3 Filer ID (Ethics Commission Filers) 00084894</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 07/10/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giovenco, Marissa</p> <p>7 Contributor address; City; State; Zip Code San Antonio, TX 78229</p>		<p>8 Amount of contribution (\$) \$1,233.40</p>	<p>9 In-kind contribution description</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL) attorney</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions) attorney</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL) Garza & Associates</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giovenco, Marissa</p> <p>Contributor address; City; State; Zip Code San Antonio, TX 78207</p>		<p>Amount of contribution (\$) \$250.00</p>	<p>In-kind contribution description Coach handbag</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL) attorney</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions) attorney</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL) self</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iggys fine snack</p> <p>Contributor address; City; State; Zip Code universal city, TX 78148</p>		<p>Amount of contribution (\$) \$60.00</p>	<p>In-kind contribution description Salsa basket</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 5/6 Rpt: 35/58</p>
<p>2 FILER NAME Giovenco, Marissa L.</p>				<p>3 Filer ID (Ethics Commission Filers) 00084894</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 11/22/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pietrarezek Law</p> <p>7 Contributor address; City; State; Zip Code san antonio, TX 78212</p>		<p>8 Amount of contribution (\$) \$100.00</p>	<p>9 In-kind contribution description whiskey gift basket</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poderosa Jewelry and Co.</p> <p>Contributor address; City; State; Zip Code san antonio, TX 78207</p>		<p>Amount of contribution (\$) \$60.00</p>	<p>In-kind contribution description Gift bag with jewelry</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 10/02/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pratt, Clarissa</p> <p>Contributor address; City; State; Zip Code selma, TX 78154</p>		<p>Amount of contribution (\$) \$321.80</p>	<p>In-kind contribution description</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL) attorney</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions) attorney</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL) modern family law</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 6/6 Rpt: 36/58</p>
<p>2 FILER NAME Giovenco, Marissa L.</p>				<p>3 Filer ID (Ethics Commission Filers) 00084894</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 10/02/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ritchie, Derek</p>		<p>8 Amount of contribution (\$) \$326.79</p>	<p>9 In-kind contribution description</p>
	<p>7 Contributor address; City; State; Zip Code san antonio, TX 78205</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>12 Contributor's principal occupation (FOR JUDICIAL) attorney</p>			<p>13 Contributor's job title (FOR JUDICIAL) (See instructions) attorney</p>	
<p>14 Contributor's employer/law firm (FOR JUDICIAL) self</p>			<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Tenerio Morales, Yolanda</p>		<p>Amount of contribution (\$) \$250.00</p>	<p>In-kind contribution description Kurt Geiger Handbag</p>
	<p>Contributor address; City; State; Zip Code san antonio, TX 78245</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL) retired</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions) retired</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL) na</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: the Golab Center</p>		<p>Amount of contribution (\$) \$115.00</p>	<p>In-kind contribution description 50 min massage and cryo session</p>
	<p>Contributor address; City; State; Zip Code san antonio, TX 78232</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL)</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 1/11 Rpt: 37/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 07/15/2025	5 Payee name Amazon	
6 Amount (\$) \$192.68	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 backpacks for back to school drive
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/23/2025	Payee name Amazon	
Amount (\$) \$540.14	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 bags
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Bexar County Democratic Party Primary	
Amount (\$) \$2,500.00	Payee address; City; 1844 Fredericksburg Rd san antonio, TX 78201	
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 Filing Fee
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 2/11 Rpt: 38/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/08/2025	5 Payee name Bexar County Democratic Party Primary	
6 Amount (\$) \$42.50	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) 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 petitions
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Bexar County Tejano Democrats SD19	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 574 Kendalia Ave san antonio, TX 78221	
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 donation for christmas party
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name Bexar County Tejano Democrats SD19	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 574 Kendalia Ave san antonio , TX 78221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Petition signing party
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 3/11 Rpt: 39/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/08/2025	5 Payee name JVC Media, LLC	
6 Amount (\$) \$156.96	7 Payee address; City; 7113 San Pedro Ave suite 391 San Antonio, TX 78216	
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 sign
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Jaramillo, Leonard	
Amount (\$) \$3,000.00	Payee address; City; 330 w. baetz blvd san antonio , TX 78221	
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 sign placement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Mailchimp	
Amount (\$) \$21.32	Payee address; City; 405 N Angier Ave. NE Atlanta, GA 30308	
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 emailing
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 4/11 Rpt: 40/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/17/2025	5 Payee name Mailchimp	
6 Amount (\$) \$21.32	7 Payee address; City; 405 N Angier Ave. NE Atlanta, GA 30308	
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 emailing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mailchimp	Office sought Office held
Date 07/17/2025	Payee name Mailchimp	
Amount (\$) \$21.32	Payee address; City; 405 N Angier Ave. NE Atlanta, TX 30308	
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 email service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mailchimp	Office sought Office held
Date 08/17/2025	Payee name Mailchimp	
Amount (\$) \$21.32	Payee address; City; 405 N Angier Ave. NE atlanta, GA 30308	
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 email
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mailchimp	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 5/11 Rpt: 41/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 09/17/2025	5 Payee name Mailchimp	
6 Amount (\$) \$21.32	7 Payee address; City; 405 N Angier Ave. NE atlanta, GA 30308	
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 email
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mailchimp	Office sought Office held
Date 10/17/2025	Payee name Mailchimp	
Amount (\$) \$21.32	Payee address; City; 405 N Angier Ave. NE atlanta, GA 30308	
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 email service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Prestige Printing, LLC	Office sought Office held
Date 07/02/2025	Payee name Prestige Printing, LLC	
Amount (\$) \$259.80	Payee address; City; 8 Burwood Ln San Antonio, TX 78216	
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 push cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Prestige Printing, LLC	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 6/11 Rpt: 42/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 12/01/2025	5 Payee name Ramon and Associates	
6 Amount (\$) \$3,000.00	7 Payee address; City; 3939 Portsmouth San Antonio , TX 78223	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Ramon and Associates	
Amount (\$) \$3,000.00	Payee address; City; 3939 Portsmouth San Antonio , TX 78223	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/12/2025	Payee name Ramon and Associates	
Amount (\$) \$75.00	Payee address; City; 3939 Portsmouth San Antonio , TX 78223	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 labor union table
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 7/11 Rpt: 43/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 07/23/2025	5 Payee name T-Mobile	
6 Amount (\$) \$90.33	7 Payee address; City; 3006 Broadway ste 105 san antonio, TX 78209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) communication	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone bill
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name T-Mobile	Office sought Office held
Date 08/23/2025	Payee name T-Mobile	
Amount (\$) \$90.33	Payee address; City; 3006 Broadway ste 105 san antonio, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) communication	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone bill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name T-Mobile	Office sought Office held
Date 09/23/2025	Payee name T-Mobile	
Amount (\$) \$90.33	Payee address; City; 3006 Broadway ste 105 san antonio, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) communication	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone bill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name T-Mobile	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 8/11 Rpt: 44/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 10/23/2025	5 Payee name T-Mobile	
6 Amount (\$) \$90.33	7 Payee address; City; 3006 Broadway ste 105 san antonio, TX 78209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) communication	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name T-Mobile	Office sought Office held
Date 11/23/2025	Payee name T-Mobile	
Amount (\$) \$90.33	Payee address; City; 3006 Broadway ste 105 san antonio, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) communication	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone bill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name T-Mobile	Office sought Office held
Date 12/23/2025	Payee name T-Mobile	
Amount (\$) \$90.33	Payee address; City; 3006 Broadway ste 105 san antonio, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) communication	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone bill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name T-Mobile	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 9/11 Rpt: 45/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894	
4 Date 10/30/2025	5 Payee name Tejano Democrats SD19		
6 Amount (\$) \$50.00	7 Payee address; City; 574 Kendalia Ave san antonio, TX 78221		
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 Christmas Party sponsor	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 11/22/2025	Payee name Wix		
Amount (\$) \$29.22	Payee address; City; 100 Gansevoort New York, NY 10014		
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	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/22/2025	Payee name Wix		
Amount (\$) \$29.22	Payee address; City; 100 Gansevoort New York, NY 10014		
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	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 10/11 Rpt: 46/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4 Date 07/22/2025	5 Payee name Wix	
6 Amount (\$) \$29.22	7 Payee address; City; 100 Gansevoort 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
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/22/2025	Payee name Wix	
Amount (\$) \$29.22	Payee address; City; 100 Gansevoort New York, NY 10014	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/22/2025	Payee name Wix	
Amount (\$) \$29.22	Payee address; City; 100 Gansevoort New York, NY 10014	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 11/11 Rpt: 47/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894	
4 Date 10/22/2025	5 Payee name Wix		
6 Amount (\$) \$29.22	7 Payee address; City; 100 Gansevoort 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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F2:	2 FILER NAME Sch: 1/1 Rpt: 48/58 Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$	
5 Date 12/10/2025	6 Payee name Jaramillo, Leonard	
7 Amount (\$) \$3,000.00	8 Payee address; City; State; Zip Code 330 W. Baetz blvd san antonio, TX 78221	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 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 Sign placement
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
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 F4: Sch: 1/5 Rpt: 49/58	2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 CREDIT CARD ISSUER	Name of financial institution Paypal		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$652.21	(b) Date of Charge 12/09/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Boston Media		(b) Payee address; City, State, Zip Code 8407 Bandera Road STE 103-#507 san antonio, TX 78250
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description tshirts
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$128.70	(b) Date of Charge 11/21/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 4950 E. Houston San antonio, TX 78220
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description mailer
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$5,364.74	(b) Date of Charge 12/04/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name JVC Media, LLC		(b) Payee address; City, State, Zip Code 7113 San Pedro Ave suite 391 San Antonio, TX 78216
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Signs
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4: Sch: 2/5 Rpt: 50/58	2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$75.00	(b) Date of Charge 12/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Bexar County Young Democrats		(b) Payee address; City, State, Zip Code 1844 Fredericksburg Rd san antonio, TX 78201
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description sponsor christmas party
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$50.00	(b) Date of Charge 10/21/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name State Tejano Democrats		(b) Payee address; City, State, Zip Code 574 Kendalia Ave san antonio, TX 78221
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description donation/ticket
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 10/21/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Bexar County Young Democrats		(b) Payee address; City, State, Zip Code 1844 Fredericksburg Rd san antonio, TX 78201
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Sponsor Trunk or treat
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
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 F4: Sch: 3/5 Rpt: 51/58	2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$173.20	(b) Date of Charge 11/21/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Boston Media		(b) Payee address; City, State, Zip Code 8407 Bandera Road STE 103-#507 san antonio, TX 78250
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description literature
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$138.56	(b) Date of Charge 12/06/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Five Below		(b) Payee address; City, State, Zip Code 4522 Fredericksburg Rd Suite B-90A balcones heights, TX 78201
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Toys
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name		(b) Payee address; City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
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 F4: Sch: 4/5 Rpt: 52/58	2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 CREDIT CARD ISSUER	Name of financial institution Barclays		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$68.86	(b) Date of Charge 12/10/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Five Below		(b) Payee address; City, State, Zip Code 4522 Fredericksburg Rd balcones heights, TX 78238
8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Toys for tots
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name		(b) Payee address; City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name		(b) Payee address; City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
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 F4: Sch: 5/5 Rpt: 53/58	2 FILER NAME Giovenco, Marissa L.		3 Filer ID (Ethics Commission Filers) 00084894
4 CREDIT CARD ISSUER	Name of financial institution at home		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$568.31	(b) Date of Charge 11/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Boston Media		(b) Payee address; 8407 Bandera Road STE 103-#507 san antonio, TX 78250 City, State, Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description literature (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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 G: Sch: 1/3 Rpt: 54/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894	
4 Date 07/07/2025	5 Payee name Amazon		
6 Amount (\$) \$7.03	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
<input type="checkbox"/> Reimbursement from political contributions intended		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense rope	
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 pens	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/04/2025	Payee name Amazon		
Amount (\$) \$560.77	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
<input type="checkbox"/> Reimbursement from political contributions intended			
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 pens	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/10/2025	Payee name Amazon		
Amount (\$) \$17.31	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
<input type="checkbox"/> Reimbursement from political contributions intended			
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 sticker paper	
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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 G: Sch: 2/3 Rpt: 55/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894	
4 Date 10/19/2025	5 Payee name Amazon		
6 Amount (\$) \$20.56	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
<input type="checkbox"/> Reimbursement from political contributions intended	(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 thank you cards	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/21/2025	Payee name Amazon		
Amount (\$) \$68.14	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
<input type="checkbox"/> Reimbursement from political contributions intended	PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense trunk or treat supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/21/2025	Payee name Amazon		
Amount (\$) \$37.22	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
<input type="checkbox"/> Reimbursement from political contributions intended	PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense trunk or treat supplies	
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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 G: Sch: 3/3 Rpt: 56/58	2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894	
4 Date 10/28/2025	5 Payee name Amazon		
6 Amount (\$) \$20.56	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109		
8 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 thank you cards	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

**INTEREST, CREDITS, GAINS, REFUNDS, AND
CONTRIBUTIONS RETURNED TO FILER**

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: Sch: 1/1 Rpt: 57/58</p>
<p>2 FILER NAME Giovenco, Marissa L.</p>		<p>3 Filer ID (Ethics Commission Filers) 00084894</p>
<p>4 Date 11/20/2025</p>	<p>5 Name of person from whom amount is received Giovenco, Marissa</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code san antonio, TX 78223</p>	<p>8 Amount (\$) \$475.00</p>
	<p>7 Purpose for which amount is received tshirt sales</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/22/2025</p>	<p>Name of person from whom amount is received Giovenco, Marissa</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code san antonio, TX 78223</p>	<p>Amount (\$) \$915.00</p>
	<p>Purpose for which amount is received Silent Auction</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 12/15/2025</p>	<p>Name of person from whom amount is received Giovenco, Marissa</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code san antonio, TX 78223</p>	<p>Amount (\$) \$305.00</p>
	<p>Purpose for which amount is received sign sponsors/tshirts</p>	<input type="checkbox"/> Check if political contribution returned to filer

Assets Purchased with Political Contributions and On Hand As of The Last Day of The Reporting Period

SCHEDULE M

The Instruction Guide explains how to complete this form.		1 Total pages Schedule M: Sch: 1/1 Rpt: 58/58
2 FILER NAME Giovenco, Marissa L.	3 Filer ID (Ethics Commission Filers) 00084894	
4 Description of Asset Yard signs		