

**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) 00085515	2 Total pages filed: 12			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Kristina A.	MI	OFFICE USE ONLY			
	NICKNAME	LAST Escalona	SUFFIX	Date Received ELECTRONICALLY FILED 01/09/2026			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked			
	REDACTED PER 254.0313, GOVT CODE			Receipt #	Amount		
				Date Processed			
				Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
	Dr.	Sylvia					
	NICKNAME	LAST Ramirez Reyna	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	REDACTED PER 254.0313, GOVT CODE						
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(210) 385-3861						
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 03/03/2026		Day	ELECTION TYPE			
			Year	<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) District Judge District 186 Bexar			12 OFFICE SOUGHT (if known) District Judge District 186			

GO TO PAGE 2

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

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

2 of 12

13 C / OH NAME	Escalona, Kristina A. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00085515												
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)		\$ 1,635.00												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. TOTAL POLITICAL EXPENDITURES		\$ 3,946.00												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 38,621.23												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00												
17 AFFIDAVIT															
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p>															
<p>The Honorable Kristina A. Escalona _____ Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>															
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**

3 of 12

18 FILER NAME Escalona, Kristina A. (The Honorable)	19 Filer ID (Ethics Commission Filers) 00085515
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 1,300.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 335.00	
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 \$ 3,920.00	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 26.00	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/12
2 FILER NAME Escalona, Kristina A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085515
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Law Office of Albert Acevedo III 6 Contributor address; City; State; Zip Code San Antonio, TX 78207	7 Amount of Contribution (\$) \$300.00
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 07/02/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Raymond Martinez Attorney at Law Contributor address; City; State; Zip Code San Antonio, TX 78223		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)		

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: 1/2 Rpt: 5/12</p>			
<p>2 FILER NAME Escalona, Kristina A. (The Honorable)</p>			
<p>3 Filer ID (Ethics Commission Filers) 00085515</p>			
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$</p>			
<p>5 Date 09/03/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elite Print Studios LLC</p>	<p>8 Amount of contribution (\$) \$100.00</p>	<p>9 In-kind contribution description Graphic design and 2 boxes of printed business cards</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)</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 11/15/2025</p> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Adam LaHood</p> <p>Contributor address; City; State; Zip Code San Antonio, TX 78212</p>			
<p>Amount of contribution (\$) \$50.00</p> <p>In-kind contribution description Ticket to attend church gala</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 07/01/2025</p> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Ernest Acevedo, III</p> <p>Contributor address; City; State; Zip Code REDACTED PER 254.0313, GOV'T CODE</p>			
<p>Amount of contribution (\$) \$60.00</p> <p>In-kind contribution description Use of office address as campaign mailing address</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: 2/2 Rpt: 6/12</p>
<p>2 FILER NAME Escalona, Kristina A. (The Honorable)</p>		<p>3 Filer ID (Ethics Commission Filers) 00085515</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$</p>
<p>5 Date 10/24/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SD 19 Tejano Democrats</p> <p>7 Contributor address; City; State; Zip Code San Antonio, TX 78221</p>	<p>8 Amount of contribution (\$) \$50.00</p> <p>9 In-kind contribution description Seat at Convention gala</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 09/25/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: San Antonio Coalition for Veterans and Families</p> <p>Contributor address; City; State; Zip Code San Antonio, TX 78223</p>	<p>Amount of contribution (\$) \$75.00</p> <p>In-kind contribution description Admission to fundraising event</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: 1/5 Rpt: 7/12	2 FILER NAME Escalona, Kristina A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085515
4 Date 11/08/2025	5 Payee name Andy Mireles Foundation	
6 Amount (\$) \$80.00	7 Payee address; City; 329 Mary Louise Dr San Antonio, TX 78201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Ticket for event	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket for brunch event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/08/2025	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 to place on Democratic ballot
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/30/2025	Payee name Bexar County Democratic Party	
Amount (\$) \$25.00	Payee address; City; 1844 Fredericksburg Rd San Antonio , TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Participation fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee to participate in Bowling fundraiser
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: 2/5 Rpt: 8/12	2 FILER NAME Escalona, Kristina A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085515
4 Date 07/25/2025	5 Payee name Bexar County Democratic Party	
6 Amount (\$) \$500.00	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) 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 Membership fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/21/2025	Payee name Bexar County Democratic Party	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 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 Fees to get copies of filed petitions
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/09/2025	Payee name Canva US Inc	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 3212 E. Cesar Chavez St Bldg 1 Ste 1300 Austin, TX 78702	
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 Subscription for graphic design tool for social media and advertising
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: 3/5 Rpt: 9/12	2 FILER NAME Escalona, Kristina A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085515
4 Date 08/09/2025	5 Payee name Canva US Inc	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 3212 E. Cesar Chavez St Bldg 1 Ste 1300 Austin, TX 78702	
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 Subscription fee for graphic design tool for social media and advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name Canva US Inc	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 3212 E. Cesar Chavez St Bldg 1 Ste 1300 Austin, TX 78702	
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 Subscription for graphic design tool for social media and advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/18/2025	Payee name Northwest Bexar Democrats	
Amount (\$) \$65.00	Payee address; City; State; Zip Code PO Box 681911 San Antonio, TX 78268	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Ticket for dinner	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner ticket for Pat Maloney Service Dinner
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: 4/5 Rpt: 10/12	2 FILER NAME Escalona, Kristina A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085515
4 Date 07/18/2025	5 Payee name Northwest Bexar Democrats	
6 Amount (\$) \$150.00	7 Payee address; City; PO Box 681911 San Antonio, TX 78268	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee for event participation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee to participate in Labor Day Picnic for petition signing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/13/2025	Payee name SATX AFL-CIO	
Amount (\$) \$75.00	Payee address; City; 9502 Computer Dr San Antonio, TX 78229	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Ticket for dinner	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket for Labor Day dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name SD 19 Tejano Democrats	
Amount (\$) \$100.00	Payee address; City; 574 Kendalia San Antonio, TX 78221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee to participate in event	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee for space at an event to get petitions signed
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: 5/5 Rpt: 11/12	2 FILER NAME Escalona, Kristina A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085515
4 Date 07/07/2025	5 Payee name San Antonio Coalition for Veterans & Families	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 4102 S. New Braunfels Ave San Antonio, TX 78223	
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 Donation to organization
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/12/2025	Payee name Texas Latinx Judges	
Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 90683 San Antonio, TX 78209	
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 Membership dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 12/12	2 FILER NAME Escalona, Kristina A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085515	
4 Date 08/06/2025	5 Payee name Gutierrez, Abraham		
6 Amount (\$) \$26.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE San Antonio, TX 78228		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printed logo on tablecloths to use for events	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held