CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.	**1** Filer ID (Ethics Commission Filers) 00090206	**2** Total pages filed: 6

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Steven	MI	**OFFICE USE ONLY**

	NICKNAME	LAST Rivas	SUFFIX	Date Received ELECTRONICALLY FILED 01/14/2026

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1006 Banister Ln. Apt 1001 Austin, TX 78704	Date Hand-delivered or Date Postmarked
		Receipt # Amount
		Date Processed
		Date Imaged

5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Steven	MI
	NICKNAME	LAST Rivas	SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1006 Banister Ln. Apt. 1001 Austin, TX 78704

7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 310-4224

8 REPORT TYPE

- [X] January 15
- [ ] 30th day before election
- [ ] Runoff
- [ ] 15th day after campaign treasurer appointment (officeholder only)
- [ ] July 15
- [ ] 8th day before election
- [ ] Exceeded modified reporting limit
- [ ] Final Report (Attach C/OH-FR)

9 PERIOD COVERED	Month Day Year 07/01/2025	THROUGH	Month Day Year 12/31/2025

10 ELECTION

ELECTION DATE
Month   Day   Year
03/03/2026

ELECTION TYPE
- [X] Primary
- [ ] Runoff
- [ ] Other
- [ ] General
- [ ] Special

11 OFFICE	OFFICE HELD (if any)	**12** OFFICE SOUGHT (if known) State Representative District 49

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

13 C / OH NAME	Rivas, Steven (Mr.)	**14** Filer ID (Ethics Commission Filers) 00090206

15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

☐ Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	
	COMMITTEE ADDRESS
☐ 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)	$ 2,712.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 2,712.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

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.

Mr. Steven Rivas
_____
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

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME	**19** Filer ID	(Ethics Commission Filers)
Rivas, Steven (Mr.)	00090206	

20 SCHEDULE SUBTOTALS

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. [X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 2,712.00
2. [ ]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3. [ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4. [ ]	SCHEDULE E: LOANS	$
5. [ ]	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
6. [ ]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7. [ ]	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$
8. [ ]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9. [ ]	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	$
10. [ ]	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11. [ ]	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
12. [ ]	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: Sch: 1/3 Rpt: 4/6

2 FILER NAME
Rivas, Steven (Mr.)

3 Filer ID (Ethics Commission Filers)
00090206

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4 Date 12/07/2025	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____) BERKEL, SUZANNE	**7** Amount of Contribution ($) $100.00
	6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	

8 Principal occupation / Job title (See Instructions) ATTY	**9** Employer (See Instructions) SELF

Date 11/30/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) DARR, AARON	Amount of Contribution ($) $10.00
	Contributor address; City; State; Zip Code MASSILLON, OH 44646	

Principal occupation / Job title (See Instructions) NOT EMPLOYED	Employer (See Instructions) NOT EMPLOYED

Date 11/30/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) DEL RIO, ALICIA	Amount of Contribution ($) $100.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78749	

Principal occupation / Job title (See Instructions) DIRECTOR	Employer (See Instructions) TEXAS HOUSE

Date 12/31/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) DEL RIO, ALICIA	Amount of Contribution ($) $25.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78749	

Principal occupation / Job title (See Instructions) DIRECTOR	Employer (See Instructions) TEXAS HOUSE

Date 12/31/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) GILBERT, HANK & SHIRLEY LAYTON	Amount of Contribution ($) $1,000.00
	Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791	

Principal occupation / Job title (See Instructions) SELF-EMPLOYED	Employer (See Instructions) HANK GILBERT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: Sch: 2/3 Rpt: 5/6

2 FILER NAME	**3** Filer ID (Ethics Commission Filers)
Rivas, Steven (Mr.)	00090206

4 Date 11/23/2025	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____) MCATEE, ROBERT	**7** Amount of Contribution ($) $250.00
	6 Contributor address; City; State; Zip Code MILPITAS, CA 95035	

8 Principal occupation / Job title (See Instructions) UNDERWRITER	**9** Employer (See Instructions) NMSI

Date 11/30/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) MCDANIEL, LEE	Amount of Contribution ($) $27.00
	Contributor address; City; State; Zip Code PROVIDENCE, RI 02906	

Principal occupation / Job title (See Instructions) CONSULTANT	Employer (See Instructions) CARBERRY DEVELOPMENT GROUP LLC

Date 11/16/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) MONNIG, RONALD	Amount of Contribution ($) $75.00
	Contributor address; City; State; Zip Code EAGLE ROCK, MO 65641	

Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED

Date 12/07/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) MORITZ, CAROL	Amount of Contribution ($) $100.00
	Contributor address; City; State; Zip Code DAVENPORT, IA 52803	

Principal occupation / Job title (See Instructions) SALES MANAGER	Employer (See Instructions) MID-AMERICAN GLASS

Date 12/31/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) SCHWARTZ, CYNTHIA	Amount of Contribution ($) $500.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78731	

Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT	Employer (See Instructions) GARRY MAURO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: Sch: 3/3 Rpt: 6/6

2 FILER NAME
Rivas, Steven (Mr.)

3 Filer ID (Ethics Commission Filers)
00090206

4 Date 11/09/2025	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____) STUART, GUY	**7** Amount of Contribution ($) $25.00
	6 Contributor address; City; State; Zip Code BURNET, TX 78611	

8 Principal occupation / Job title (See Instructions)
NOT EMPLOYED

9 Employer (See Instructions)
NOT EMPLOYED

Date 11/16/2025	Full name of contributor ☐ out-of-state PAC (ID#:_____) WEST, JOHN	Amount of Contribution ($) $500.00
	Contributor address; City; State; Zip Code CHICAGO, IL 60610	

Principal occupation / Job title (See Instructions)
DESIGNER

Employer (See Instructions)
JWL