

**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) 00089931	2 Total pages filed: 16		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Alejandra D.	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME Ale	LAST Cajero	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 11222 Hall Greens Ct.  Houston, TX 77075			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Alejandra D.	MI			
	NICKNAME Ale	LAST Cajero	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 11222 Hall Greens Ct.  Houston, TX 77075		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (713) 822-4395					
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		<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) State Representative Place Houston District 131		

**GO TO PAGE 2**

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

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

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13 C / OH NAME	Cajero, Alejandra D. (Ms.)		14 Filer ID (Ethics Commission Filers) 00089931
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>		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 2,554.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 2,407.61
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00
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.

Ms. Alejandra D. Cajero

\_\_\_\_\_  
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****FORM C/OH  
COVER SHEET PG 3**

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<b>18</b> FILER NAME	<b>19</b> Filer ID (Ethics Commission Filers) 00089931
Cajero, Alejandra D. (Ms.)	
<b>20</b> SCHEDULE SUBTOTALS	
NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,464.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,090.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,489.95
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	\$ 917.66
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 A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/6 Rpt: 4/16
<b>2</b> FILER NAME Cajero, Alejandra D. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089931
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azios, Aaron ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) Unemployed	<b>9</b> Employer (See Instructions) N/A
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cajero, Jose ..... Contributor address; City; State; Zip Code  Houston, TX 77075	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Welder	Employer (See Instructions) Powell Industries
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cajero, Michelle ..... Contributor address; City; State; Zip Code  Houston, TX 77054	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Health Promotion Coordinator	Employer (See Instructions) Harris County
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camacho , Monica ..... Contributor address; City; State; Zip Code  Houston , TX 77093	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Organizer	Employer (See Instructions) MFV
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrizal, Bianca ..... Contributor address; City; State; Zip Code  Houston , TX 77061	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Legislative Director	Employer (See Instructions) Texas House of Representatives

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/6 Rpt: 5/16
<b>2</b> FILER NAME Cajero, Alejandra D. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089931
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaires, William ..... <b>6</b> Contributor address; City; State; Zip Code  Houston , TX 77033	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Welder		<b>9</b> Employer (See Instructions) Powell
<b>Date</b> 10/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Sofia ..... <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77048	<b>Amount of Contribution (\$)</b> \$70.00
Principal occupation / Job title (See Instructions) Server		Employer (See Instructions) Areas
<b>Date</b> 11/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Alan ..... <b>Contributor address; City; State; Zip Code</b>  Houston , TX 77034	<b>Amount of Contribution (\$)</b> \$20.00
Principal occupation / Job title (See Instructions) Policy Advisor		Employer (See Instructions) Harris County
<b>Date</b> 09/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dupree, Angie ..... <b>Contributor address; City; State; Zip Code</b>  Houston , TX 77051	<b>Amount of Contribution (\$)</b> \$40.00
Principal occupation / Job title (See Instructions) Citizenship Manager		Employer (See Instructions) NPNA
<b>Date</b> 09/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Jenna ..... <b>Contributor address; City; State; Zip Code</b>  Colorado Springs, CO 80903	<b>Amount of Contribution (\$)</b> \$25.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Springs Homes For Rent

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/6 Rpt: 6/16
<b>2</b> FILER NAME Cajero, Alejandra D. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089931
<b>4</b> Date 10/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Astrid	<b>7</b> Amount of Contribution (\$) \$131.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston , TX 77072	
<b>8</b> Principal occupation / Job title (See Instructions) Counselor		<b>9</b> Employer (See Instructions) Harmony Public Schools
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henriquez, Joel	Amount of Contribution (\$) \$31.00
	Contributor address; City; State; Zip Code  Houston, TX 77099	
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) Silk Worldwide
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Karina	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Houston , TX 77033	
Principal occupation / Job title (See Instructions) Case Admin		Employer (See Instructions) Olson
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iza, Dayana	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Spring, TX 77373	
Principal occupation / Job title (See Instructions) Nonprofit		Employer (See Instructions) Nonprofit
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khakzadghomi, Milad	Amount of Contribution (\$) \$62.00
	Contributor address; City; State; Zip Code  Houston , TX 77027	
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Home Depot

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/6 Rpt: 7/16
<b>2</b> FILER NAME Cajero, Alejandra D. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089931
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kooiman , Cynthia	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  Hockley, TX 77447	
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Hines
<b>Date</b> 10/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Meza, Genesis	<b>Amount of Contribution (\$)</b> \$31.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77006	
<b>Principal occupation / Job title (See Instructions)</b> Case Admin		<b>Employer (See Instructions)</b> Olson & Olson LLP
<b>Date</b> 09/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Peavy, John	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Houston , TX 77005	
<b>Principal occupation / Job title (See Instructions)</b> Manager		<b>Employer (See Instructions)</b> Alejandra Salinas
<b>Date</b> 10/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Peavy, John	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Houston , TX 77005	
<b>Principal occupation / Job title (See Instructions)</b> Manager		<b>Employer (See Instructions)</b> Alejandra Salinas
<b>Date</b> 10/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Douglas	<b>Amount of Contribution (\$)</b> \$31.00
	<b>Contributor address; City; State; Zip Code</b>  Houston , TX 77053	
<b>Principal occupation / Job title (See Instructions)</b> Project Management		<b>Employer (See Instructions)</b> Shell

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/6 Rpt: 8/16
<b>2</b> FILER NAME Cajero, Alejandra D. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089931
<b>4</b> Date 10/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salvador, Jailene	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  Garland, TX 75043	
<b>8</b> Principal occupation / Job title (See Instructions) Organizer		<b>9</b> Employer (See Instructions) Mi Familia Vota
<b>Date</b> 09/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Spranger, Avery	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Normal, IL 61761	
<b>Principal occupation / Job title (See Instructions)</b> Project Coordinator		<b>Employer (See Instructions)</b> Harris County Department of Education
<b>Date</b> 10/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Spranger, Avery	<b>Amount of Contribution (\$)</b> \$31.00
	<b>Contributor address; City; State; Zip Code</b>  Normal, IL 61761	
<b>Principal occupation / Job title (See Instructions)</b> Project Coordinator		<b>Employer (See Instructions)</b> Harris County Department of Education
<b>Date</b> 10/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Tichy, Claire	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Friendswood, TX 77546	
<b>Principal occupation / Job title (See Instructions)</b> Copywriter		<b>Employer (See Instructions)</b> RPA Advertising
<b>Date</b> 09/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Jonathan	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Houston , TX 77091	
<b>Principal occupation / Job title (See Instructions)</b> Transmission Developer		<b>Employer (See Instructions)</b> Grid United

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 6/6 Rpt: 9/16
<b>2</b> FILER NAME Cajero, Alejandra D. (Ms.)			<b>3</b> Filer ID (Ethics Commission Filers) 00089931
<b>4</b> Date 10/08/2025	<b>5</b> Full name of contributor Urbina, Christian ..... <b>6</b> Contributor address; City; State; Zip Code  Houston , TX 77053	<b>7</b> Amount of Contribution (\$)  \$131.00	
<b>8</b> Principal occupation / Job title (See Instructions) Financial Analyst		<b>9</b> Employer (See Instructions) UT Health	
<b>Date</b> 10/08/2025	<b>Full name of contributor</b> Valencia, Kaylee ..... <b>Contributor address; City; State; Zip Code</b>  Houston , TX 77006	<b>Amount of Contribution (\$)</b>  \$31.00	
Principal occupation / Job title (See Instructions) Partnerships Manager		Employer (See Instructions) Unify America	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 10/16
<b>2</b> FILER NAME Cajero, Alejandra D. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089931
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
<b>5</b> Date 10/08/2025	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eureste, Arturo  <b>7</b> Contributor address; City; State; Zip Code  Houston , TX 77025	<b>8</b> Amount of contribution (\$) <b>9</b> In-kind contribution description \$90.00 Food for campaign kickoff event  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) N/A
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/03/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madeleine Nicole Photography  Contributor address; City; State; Zip Code  Houston , TX 77006		Amount of contribution (\$) <b>9</b> In-kind contribution description \$1,000.00 Photography services  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

# 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: 1/3 Rpt: 11/16	2 FILER NAME Cajero, Alejandra D. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089931
4 Date 09/30/2025	5 Payee name Cullen/Frost Bankers, Inc.	
6 Amount (\$) \$14.00	7 Payee address; City; P.O. Box 1315  Houston , TX 77251	State; Zip Code
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 Frost Bank monthly service charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cullen/Frost Bankers, Inc.	Office sought Office held
Date 10/31/2025	Payee name Cullen/Frost Bankers, Inc.	
Amount (\$) \$14.00	Payee address; City; P.O. Box 1315  Houston , TX 77251	State; Zip Code
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 Frost Bank monthly service charge for campaign account
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cullen/Frost Bankers, Inc.	Office sought Office held
Date 11/30/2025	Payee name Cullen/Frost Bankers, Inc.	
Amount (\$) \$14.00	Payee address; City; P.O. Box 1315  Houston , TX 77251	State; Zip Code
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 Frost Bank monthly service charge for campaign account
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cullen/Frost Bankers, Inc.	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: 2/3 Rpt: 12/16	2 FILER NAME Cajero, Alejandra D. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089931
4 Date 12/31/2025	5 Payee name Cullen/Frost Bankers, Inc.	
6 Amount (\$) \$14.00	7 Payee address; City; P.O. Box 1315  Houston , TX 77251	
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 Frost Bank monthly service charge for campaign account
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Google	
Amount (\$) \$71.64	Payee address; City; 1600 Amphitheatre Pkwy  Mountain View, CA 94043	
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 Service charge for Google Suite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name Google	
Amount (\$) \$71.64	Payee address; City; 1600 Amphitheatre Pkwy  Mountain View, CA 94043	
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 Service charge for Google Suite
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: 3/3 Rpt: 13/16	2 FILER NAME Cajero, Alejandra D. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089931
4 Date 12/29/2025	5 Payee name Iftikhar, Hoor	
6 Amount (\$) \$591.93	7 Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Sugar Land, TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract worker payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Wix.com	
Amount (\$) \$198.74	Payee address; City; State; Zip Code  100 Gansevoort St  New York , NY 10014	
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 Service charge for website builder platform for campaign website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Zamora, Jesus	
Amount (\$) \$500.00	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Houston , TX 77042	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract worker payment
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	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: 14/16	2 FILER NAME Cajero, Alejandra D. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089931	
4 Date 08/19/2025	5 Payee name Cullen/Frost Bankers, Inc.		
6 Amount (\$) \$60.00  <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 1315  Houston , TX 77251		
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 Initial deposit to open campaign bank account	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/08/2025	Payee name Dollar Tree, Inc.		
Amount (\$) \$8.12  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 500 Volvo Pkwy  Chesapeake, VA 23320		
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 Balloons for campaign kickoff event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/08/2025	Payee name Estrella Bakery		
Amount (\$) \$41.20  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 14023 S Post Oak Rd B6 Houston , TX 77045		
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 Cake for campaign kick off event	
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: 15/16	2 FILER NAME Cajero, Alejandra D. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089931	
4 Date 08/11/2025	5 Payee name Google		
6 Amount (\$) \$12.00  <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043		
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 Service charge for Google Workspace	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/01/2025	Payee name Google		
Amount (\$) \$12.13  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service charge for Google Workspace	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/01/2025	Payee name Google		
Amount (\$) \$60.89  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service charge for Google Workspace	
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: 16/16	2 FILER NAME Cajero, Alejandra D. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089931	
4 Date 11/15/2025	5 Payee name La Mexicana		
6 Amount (\$) \$82.05	7 Payee address; City; State; Zip Code 1018 Fairview St,  Houston, TX 77006		
<input type="checkbox"/> Reimbursement from political contributions intended	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Thank you breakfast for campaign volunteers	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/03/2025	Payee name M3 Graphics Signs & Printing		
Amount (\$) \$625.40	Payee address; City; State; Zip Code 11730 Wilcrest Dr  Houston , TX 77099		
<input type="checkbox"/> Reimbursement from political contributions intended	(a) Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing of stickers with campaign logo	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/08/2025	Payee name Target Corporation		
Amount (\$) \$15.87	Payee address; City; State; Zip Code 1000 Nicollet Mall  Minneapolis, MN 55403		
<input type="checkbox"/> Reimbursement from political contributions intended	(a) 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  Plates, napkins, and plastic silverware for campaign kickoff event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held