

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

|                                       |   |                            |   |   |  |
|---------------------------------------|---|----------------------------|---|---|--|
| 1 Filer ID<br>00083777                |   | 2 Total pages filed:<br>40 |   | OFFICE USE ONLY                                     |  |
|                                       |   |                            |   | Date Received<br>ELECTRONICALLY FILED<br>01/15/2026 |  |
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME | MS / MRS / MR<br>The Honorable                    |                            | FIRST<br>Jose A.  |   |  |
|                                       | NICKNAME<br>Joe                                   |                            | LAST<br>Ramirez   |   | SUFFIX   |
| 4 ORIGINAL<br>REPORT TYPE             | <input type="checkbox"/> January 15               |                            | <input type="checkbox"/> Runoff   |   | <input type="checkbox"/> Other (specify) _____ |
|                                       | <input checked="" type="checkbox"/> July 15       |                            | <input type="checkbox"/> Exceeded modified reporting limit                                    |   |  |
|                                       | <input type="checkbox"/> 30th day before election |                            | <input type="checkbox"/> 15th day after campaign treasurer<br>appointment (officeholder only) |   |  |
|                                       | <input type="checkbox"/> 8th day before election  |                            | <input type="checkbox"/> Final Report (Attach C/OH-FR)  |   |  |
| 5 ORIGINAL PERIOD<br>COVERED          | Month<br>01/01/2025                               | Day                        | Year  | Month<br>06/30/2025                                 | Day  |
|                                       | THROUGH   |                            |   |   | Year   |

## 6 EXPLANATION OF CORRECTION

Original amount entered was \$53,367.85 and was to reflect \$52,841.85 instead for correct total.

## 7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

The Honorable Jose A. Ramirez

\_\_\_\_\_  
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

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

**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<br>(Ethics Commission Filers)<br>00083777       | 2 Total pages filed:<br>40   |                                  |          |
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME   | MS / MRS / MR<br>The Honorable                              | FIRST<br>Jose A.                                  | MI   | <b>OFFICE USE ONLY</b>   |                                  |          |
|   | NICKNAME<br>Joe   | LAST<br>Ramirez                                   | SUFFIX   | Date Received<br>ELECTRONICALLY FILED<br>01/15/2026  |                                  |          |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE             |   |  | Date Hand-delivered or Date Postmarked   |                                  |          |
|   | <b>REDACTED PER 254.0313, GOVT CODE</b>                     |   |  | Receipt #  | Amount                           |          |
|   |   |   |  | Date Processed   |                                  |          |
|   |   |   |  | Date Imaged  |                                  |          |
| 5 CAMPAIGN<br>TREASURER<br>NAME   | MS / MRS / MR   | FIRST<br>Veronica Selpulveda                      | MI   |  |                                  |          |
|   | NICKNAME  | LAST<br>Martinez                                  | SUFFIX   |  |                                  |          |
| 6 CAMPAIGN<br>TREASURER<br>ADDRESS<br><br>(Residence or Business)                                     | STREET ADDRESS (NO PO BOX PLEASE);                          |   | APT / SUITE #;   | CITY;  | STATE;                           | ZIP CODE |
|   | <b>REDACTED PER 254.0313, GOVT CODE</b>                     |   |  |  |                                  |          |
| 7 CAMPAIGN<br>TREASURER<br>PHONE  | AREA CODE<br>(956) 341-4193                                 | PHONE NUMBER                                      | EXTENSION  |  |                                  |          |
| 8 REPORT<br>TYPE  | <input 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 checked="" 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<br>COVERED   | Month<br>01/01/2025   | Day   | Year   | Month<br>06/30/2025  | Day                              | Year     |
| 10 ELECTION   | ELECTION DATE<br>Month Day Year                             |   |  | ELECTION TYPE  |                                  |          |
|   | <input 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)<br>District Judge District 464 Hidalgo |   |  | 12 OFFICE SOUGHT (if known)  |                                  |          |

**GO TO PAGE 2**

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

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

3 of 40

|  |   |   |   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
|--|---|---|---|---|----------------|----------------|--|----------------------------------|-------------------|--|-----------------------------------|-----------------------------------|--|--|--------------------------------------|
| 13 C / OH NAME   | Ramirez, Jose A. (The Honorable)  |   | 14 Filer ID<br>(Ethics Commission Filers)<br>00083777 |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
| 15 NOTICE<br>FROM<br>POLITICAL<br>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<br>TOTALS  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS,<br>OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)   |   | \$ 0.00   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
|  | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  |   | \$ 0.00   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
| EXPENDITURE<br>TOTALS  | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  |   | \$ 0.00   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
|  | 4. <b>TOTAL POLITICAL EXPENDITURES</b>  |   | \$ 45,210.54  |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
| CONTRIBUTION<br>BALANCE  | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE<br>REPORTING PERIOD   |   | \$ 52,841.85  |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
| OUTSTANDING<br>LOAN TOTALS   | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY<br>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 style="text-align: right;">The Honorable Jose A. Ramirez<br/>_____<br/>Signature of Candidate or Officeholder</p> |   |   |   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
| AFFIX NOTARY STAMP / SEAL ABOVE  |   |   |   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
| Sworn to and subscribed before me, by the said _____, this the _____ day<br>of _____, 20_____, to certify which, witness my hand and seal of office.   |   |   |   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
| _____<br>Signature of officer administering oath   |   | _____<br>Printed name of officer administering oath |   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |
| _____<br>Title of officer administering oath   |   |   |   |   |                |                |  |                                  |                   |  |                                   |                                   |  |  |                                      |

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

4 of 40

|  |  |
|--|--|
| <b>18</b> FILER NAME<br>Ramirez, Jose A. (The Honorable)   | <b>19</b> Filer ID<br>(Ethics Commission Filers)<br>00083777 |
| <b>20</b> SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE   |  |
| 1. <input type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)                             |  |
| 2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                            |  |
| 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            |  |
| 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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                                 |  |
| 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<br>TO FILER |  |
| SUBTOTAL AMOUNT  |  |

# 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:<br>Sch: 1/36 Rpt: 5/40     | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>06/03/2025                                  | 5 Payee name<br>Academy Sporting Goods  |   |
| 6 Amount (\$)<br>\$158.01                             | 7 Payee address; City;<br>651 E. Trenton<br><br>Edinburg, TX 78539                        | State; Zip Code   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Expense       |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>02/20/2025                                    | Payee name<br>Alex's Boot Shoe & Luggage  |   |
| Amount (\$)<br>\$37.15                                | Payee address; City;<br>608 E University Dr,<br><br>Edinburg, TX 78539                    | State; Zip Code   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>02/10/2025                                    | Payee name<br>Anita's Cafe  |   |
| Amount (\$)<br>\$67.00                                | Payee address; City;<br>2102 N. McColl Rdq<br><br>Edinburg, TX 78541                      | State; Zip Code   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting         |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 2/36 Rpt: 6/40     | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>01/21/2025                                  | 5 Payee name<br>Best Buy  |  |
| 6 Amount (\$)<br>\$297.65                             | 7 Payee address; City; State; Zip Code<br>8012 N. 10th St.<br><br>McAllen, TX 78504       |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense      |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>01/18/2025                                    | Payee name<br>CARRERA, MIGUEL   |  |
| Amount (\$)<br>\$12,000.00                            | Payee address; City; State; Zip Code<br>135 PASEO DEL PRADO AVE<br><br>EDINBURG, TX 78539 |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense    | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign consulting expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>01/09/2025                                    | Payee name<br>COSTA MESSA   |  |
| Amount (\$)<br>\$156.94                               | Payee address; City; State; Zip Code<br>5248 N. 10TH ST.<br><br>MCCALLEN, TX 78504        |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting              |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a)  |   |   |   |
|--|---|---|---|
| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee<br>Credit Card Payment | Event Expense<br>Fees<br>Food/Beverage Expense<br>Gift/Awards/Memorials Expense<br>Legal Services   | Loan Repayment/Reimbursement<br>Office Overhead/Rental Expense<br>Polling Expense<br>Printing Expense<br>Salaries/Wages/Contract Labor  | Solicitation/Fundraising Expense<br>Transportation Equipment & Related Expense<br>Travel in District<br>Travel Out of District<br>OTHER (enter a category not listed above) |
| The Instruction Guide explains how to complete this form.  |   |   |   |
| 1 Total pages Schedule F1:<br>Sch: 3/36 Rpt: 7/40  | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID<br>(Ethics Commission Filers)<br>00083777  |   |
| 4 Date<br>06/27/2025   | 5 Payee name<br>Chapa, Melissa  |   |   |
| 6 Amount (\$)<br>\$300.00  | 7 Payee address; City;<br>1118 W. 4TH ST.<br><br>WESLACO, TX 78596  |   |   |
| 8 PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation       |   |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |   |
| Date<br>06/03/2025   | Payee name<br>Costco  |   |   |
| Amount (\$)<br>\$65.00   | Payee address; City;<br>1501 W. Kelly Ave.<br><br>Pharr, TX 78577   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Expense |   |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |   |
| Date<br>06/03/2025   | Payee name<br>Costco  |   |   |
| Amount (\$)<br>\$86.45   | Payee address; City;<br>1501 W. Kelly Ave.<br><br>Pharr, TX 78577   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Expense |   |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 4/36 Rpt: 8/40        | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>03/12/2025                                     | 5 Payee name<br>Devine Ideas Flower Shop  |   |
| 6 Amount (\$)<br>\$269.53                                | 7 Payee address; City;<br>100 S 12th Ave<br><br>Edinburg , TX 78539                       |   |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign expense |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>01/03/2025                                       | Payee name<br>El Jardin Mexican Restaurant  |   |
| Amount (\$)<br>\$168.76                                  | Payee address; City;<br>2405 E. University Dr.<br><br>Edinburg , TX 78539                 |   |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting   |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>02/26/2025                                       | Payee name<br>Extra Space Storage   |   |
| Amount (\$)<br>\$177.64                                  | Payee address; City;<br>1317 E. Jackson<br><br>Pharr , TX 78577                           |   |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign expense |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 5/36 Rpt: 9/40     | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>03/26/2025                                  | 5 Payee name<br>Extra Space Storage   |   |
| 6 Amount (\$)<br>\$127.00                             | 7 Payee address; City;<br>1317 E. Jackson<br><br>Pharr , TX 78577                 |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought                                      | Office held   |
| Date<br>04/28/2025                                    | Payee name<br>Extra Space Storage   |   |
| Amount (\$)<br>\$127.00                               | Payee address; City;<br>1317 E. Jackson<br><br>Pharr, TX 78577                    |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought                                      | Office held   |
| Date<br>05/27/2025                                    | Payee name<br>Extra Space Storage   |   |
| Amount (\$)<br>\$127.00                               | Payee address; City;<br>1317 E. Jackson<br><br>Pharr, TX 78577                    |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 6/36 Rpt: 10/40       | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>06/26/2025                                     | 5 Payee name<br>Extra Space Storage   |  |
| 6 Amount (\$)<br>\$226.00                                | 7 Payee address; City;<br>1317 E. Jackson<br><br>Pharr, TX 78577  | State; Zip Code  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign expense    |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>02/06/2025                                       | Payee name<br>Family Dollar   |  |
| Amount (\$)<br>\$14.34                                   | Payee address; City;<br>3511 W. Hwy 107<br><br>Edinburg, TX 78539   | State; Zip Code  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>donation            |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>06/10/2025                                       | Payee name<br>Foundation, Speedy Memorial   |  |
| Amount (\$)<br>\$200.00                                  | Payee address; City;<br>504 E. 11th St.<br><br>San Juan, TX 78589   | State; Zip Code  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Memorial Foundation |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 7/36 Rpt: 11/40    | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>01/01/2025                                  | 5 Payee name<br>GONZALEZ, DOMINIQUE  |   |
| 6 Amount (\$)<br>\$4,500.00                           | 7 Payee address; City; State; Zip Code<br>703 W. NOLANA LOOP APT 8207<br><br>PHARR, TX 78577       |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense            | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>SOCIAL MEDIA           |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held   |
| Date<br>04/17/2025                                    | Payee name<br>Gateway Printing   |   |
| Amount (\$)<br>\$1.23                                 | Payee address; City; State; Zip Code<br>315 S. Closner<br><br>Edinburg, TX 78539                   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies        |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held   |
| Date<br>01/08/2025                                    | Payee name<br>HEB  |   |
| Amount (\$)<br>\$32.38                                | Payee address; City; State; Zip Code<br>1212 S. Closner<br><br>Edinburg, TX 78589                  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 8/36 Rpt: 12/40       | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>02/21/2025                                     | 5 Payee name<br>HEB   |  |
| 6 Amount (\$)<br>\$171.68                                | 7 Payee address; City;<br>901 Trenton Rd<br><br>Edinburg, TX 78504                                |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                 | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense      |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>02/23/2025                                       | Payee name<br>HEB   |  |
| Amount (\$)<br>\$89.70                                   | Payee address; City;<br>1212 S Closner Blvd<br><br>Edinburg, TX 78539                             |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                 | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense      |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>04/01/2025                                       | Payee name<br>HEB   |  |
| Amount (\$)<br>\$1,875.00                                | Payee address; City;<br>1212 S Closner Blvd<br><br>Edinburg, TX 78539                             |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign expense-gift cards |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 9/36 Rpt: 13/40    | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>04/29/2025                                  | 5 Payee name<br>HEB  |  |
| 6 Amount (\$)<br>\$110.00                             | 7 Payee address; City; State; Zip Code<br>1212 S Closner Blvd<br><br>Edinburg, TX 78539            |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Expense  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>04/11/2025                                    | Payee name<br>Hidalgo County Bar Association   |  |
| Amount (\$)<br>\$75.00                                | Payee address; City; State; Zip Code<br>323 W. Cano, 1st Fl.<br><br>Edinburg, TX 78539             |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Fees                           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>dues/fees expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>02/16/2025                                    | Payee name<br>Hobby Lobby  |  |
| Amount (\$)<br>\$111.98                               | Payee address; City; State; Zip Code<br>7600 N 10th St Building 300<br><br>Mcallen, TX 78504       |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 10/36 Rpt: 14/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>01/02/2025                                  | 5 Payee name<br>Home Depot   |   |
| 6 Amount (\$)<br>\$715.13                             | 7 Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501 |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought                                       | Office held   |
| Date<br>01/03/2025                                    | Payee name<br>Home Depot   |   |
| Amount (\$)<br>\$1,435.76                             | Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought                                       | Office held   |
| Date<br>01/10/2025                                    | Payee name<br>Home Depot   |   |
| Amount (\$)<br>\$571.33                               | Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 11/36 Rpt: 15/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>01/13/2025                                  | 5 Payee name<br>Home Depot  |   |
| 6 Amount (\$)<br>\$215.44                             | 7 Payee address; City;<br>801 Trenton Rd<br><br>McAllen , TX 78501                |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought                                      | Office held   |
| Date<br>01/13/2025                                    | Payee name<br>Home Depot  |   |
| Amount (\$)<br>\$909.14                               | Payee address; City;<br>801 Trenton Rd<br><br>McAllen , TX 78501                  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought                                      | Office held   |
| Date<br>01/14/2025                                    | Payee name<br>Home Depot  |   |
| Amount (\$)<br>\$590.02                               | Payee address; City;<br>801 Trenton Rd<br><br>McAllen , TX 78501                  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 12/36 Rpt: 16/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>01/27/2025                                  | 5 Payee name<br>Home Depot   |   |
| 6 Amount (\$)<br>\$256.21                             | 7 Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501 |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought                                       | Office held   |
| Date<br>01/27/2025                                    | Payee name<br>Home Depot   |   |
| Amount (\$)<br>\$711.52                               | Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought                                       | Office held   |
| Date<br>01/27/2025                                    | Payee name<br>Home Depot   |   |
| Amount (\$)<br>\$11.33                                | Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 13/36 Rpt: 17/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>01/27/2025                                  | 5 Payee name<br>Home Depot   |   |
| 6 Amount (\$)<br>\$15.90                              | 7 Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501 |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought                                       | Office held   |
| Date<br>01/27/2025                                    | Payee name<br>Home Depot   |   |
| Amount (\$)<br>\$60.70                                | Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought                                       | Office held   |
| Date<br>01/27/2025                                    | Payee name<br>Home Depot   |   |
| Amount (\$)<br>\$278.14                               | Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 14/36 Rpt: 18/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>02/10/2025                                  | 5 Payee name<br>Home Depot   |   |
| 6 Amount (\$)<br>\$175.39                             | 7 Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501 |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought                                       | Office held   |
| Date<br>02/18/2025                                    | Payee name<br>Home Depot   |   |
| Amount (\$)<br>\$195.72                               | Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen , TX 78501   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought                                       | Office held   |
| Date<br>02/18/2025                                    | Payee name<br>Home Depot   |   |
| Amount (\$)<br>\$261.26                               | Payee address; City; State; Zip Code<br>120 S. Shary Rd.<br><br>Mission , TX 78572 |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 15/36 Rpt: 19/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>02/18/2025                                  | 5 Payee name<br>Home Depot  |   |
| 6 Amount (\$)<br>\$334.01                             | 7 Payee address; City;<br>409 N. Jackson Ave<br><br>Pharr, TX 78577               |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought                                      | Office held   |
| Date<br>02/17/2025                                    | Payee name<br>Home Depot  |   |
| Amount (\$)<br>\$393.54                               | Payee address; City;<br>409 N. Jackson Ave<br><br>Pharr, TX 78577                 |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought                                      | Office held   |
| Date<br>02/24/2025                                    | Payee name<br>Home Depot  |   |
| Amount (\$)<br>\$54.07                                | Payee address; City;<br>409 N. Jackson Rd<br><br>Pharr, TX 78577                  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 16/36 Rpt: 20/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>02/22/2025                                  | 5 Payee name<br>Home Depot  |   |
| 6 Amount (\$)<br>\$418.49                             | 7 Payee address; City; State; Zip Code<br>801 Trenton Rd<br><br>McAllen, TX 78504 |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought                                      | Office held   |
| Date<br>03/28/2025                                    | Payee name<br>Home Depot  |   |
| Amount (\$)<br>\$841.07                               | Payee address; City; State; Zip Code<br>409 N. Jackson Rd<br><br>Pharr, TX 78577  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign expense       |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought                                      | Office held   |
| Date<br>03/31/2025                                    | Payee name<br>Home Depot  |   |
| Amount (\$)<br>\$521.75                               | Payee address; City; State; Zip Code<br>409 N. Jackson Rd<br><br>Pharr, TX 78577  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign expense       |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 17/36 Rpt: 21/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>01/24/2025                                  | 5 Payee name<br>Home Depot  |   |
| 6 Amount (\$)<br>\$11.33                              | 7 Payee address; City;<br>409 N. Jackson Rd<br><br>Pharr, TX 78577                        |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event expense    |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>03/28/2025                                    | Payee name<br>HomeGoods   |   |
| Amount (\$)<br>\$27.05                                | Payee address; City;<br>7600 N 10th St Ste 100<br><br>McAllen, TX 78504                   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>01/06/2025                                    | Payee name<br>Howling Rabbits   |   |
| Amount (\$)<br>\$286.09                               | Payee address; City;<br>1200 Auburn Ave Ste. 350<br><br>McAllen, TX 78504                 |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 18/36 Rpt: 22/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |                            |
| 4 Date<br>01/27/2025                                  | 5 Payee name<br>Howling Rabbits  |   |                            |
| 6 Amount (\$)<br>\$111.58                             | 7 Payee address; City; State; Zip Code<br>1200 Auburn Ave Ste. 350<br><br>McAllen, TX 78504        |   |                            |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting         |                            |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Candidate/Officeholder name   | Office sought<br>Office sought  | Office held<br>Office held |
| Date<br>01/21/2025                                    | Payee name<br>LOWES  |   |                            |
| Amount (\$)<br>\$68.18                                | Payee address; City; State; Zip Code<br>1015 E. Expressway 83<br><br>Weslaco , TX 78596            |   |                            |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies        |                            |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Candidate/Officeholder name   | Office sought<br>Office sought  | Office held<br>Office held |
| Date<br>01/02/2025                                    | Payee name<br>Lowe's   |   |                            |
| Amount (\$)<br>\$271.13                               | Payee address; City; State; Zip Code<br>2802 W. University<br><br>Edinburg, TX 78539               |   |                            |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |                            |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Candidate/Officeholder name   | Office sought<br>Office sought  | Office held<br>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:<br>Sch: 19/36 Rpt: 23/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>01/21/2025                                  | 5 Payee name<br>Lowe's  |   |
| 6 Amount (\$)<br>\$42.15                              | 7 Payee address; City;<br>2802 W. University<br><br>Edinburg, TX 78539            |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Lowe's   | Office sought<br>Office held  |
| Date<br>01/21/2025                                    | Payee name<br>Lowe's  |   |
| Amount (\$)<br>\$312.55                               | Payee address; City;<br>2802 W. University<br><br>Edinburg, TX 78539              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Lowe's   | Office sought<br>Office held  |
| Date<br>01/27/2025                                    | Payee name<br>Lowe's  |   |
| Amount (\$)<br>\$135.31                               | Payee address; City;<br>2802 W. University<br><br>Edinburg, TX 78539              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Lowe's   | Office sought<br>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 -<br>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:<br>Sch: 20/36 Rpt: 24/40      | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>03/31/2025                                     | 5 Payee name<br>MICHAELS STORES  |  |
| 6 Amount (\$)<br>\$213.69                                | 7 Payee address; City;<br>315 E. TRENTON RD<br><br>EDINBURG, TX 78539                              |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>04/17/2025                                       | Payee name<br>MICHAELS STORES  |  |
| Amount (\$)<br>\$391.97                                  | Payee address; City;<br>315 E. TRENTON RD<br><br>EDINBURG, TX 78539                                |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>02/14/2025                                       | Payee name<br>MORENO, DAVID  |  |
| Amount (\$)<br>\$1,650.00                                | Payee address; City;<br>4901 N. CONWAY AVE.<br><br>MISSION, TX 78573                               |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contract Labor  |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 21/36 Rpt: 25/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>02/12/2025                                  | 5 Payee name<br>MR. PRESS  |   |
| 6 Amount (\$)<br>\$16.04                              | 7 Payee address; City; State; Zip Code<br>224 E. CANO ST.<br><br>EDINB, TX 78539                   |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held   |
| Date<br>02/14/2025                                    | Payee name<br>Margaritas Flower Shop   |   |
| Amount (\$)<br>\$365.70                               | Payee address; City; State; Zip Code<br>901 E Cano St<br><br>Edinburg, TX 78539                    |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held   |
| Date<br>01/23/2025                                    | Payee name<br>Mi Chula Restaurant  |   |
| Amount (\$)<br>\$54.65                                | Payee address; City; State; Zip Code<br>2314 E. Richardson Rd<br><br>Edinburg, TX 78542            |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 22/36 Rpt: 26/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>02/03/2025                                  | 5 Payee name<br>Office Depot  |   |
| 6 Amount (\$)<br>\$174.28                             | 7 Payee address; City; State; Zip Code<br>5115 N. 10th St<br><br>McAllen, TX 78504        |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>03/11/2025                                    | Payee name<br>Office Depot  |   |
| Amount (\$)<br>\$15.13                                | Payee address; City; State; Zip Code<br>5115 N. 10th St<br><br>McAllen, TX 78504          |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>02/28/2025                                    | Payee name<br>Olive Garden  |   |
| Amount (\$)<br>\$116.23                               | Payee address; City; State; Zip Code<br>7812 N 10th St<br><br>McAllen, TX 78504           |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting         |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 23/36 Rpt: 27/40      | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>01/27/2025                                     | 5 Payee name<br>Perez, Andrew   |  |
| 6 Amount (\$)<br>\$4,000.00                              | 7 Payee address; City;<br>500 N. 8th St.<br><br>McAllen, TX 78501   |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>sponsorship contribution-smokin on the rio 2025 |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>02/14/2025                                       | Payee name<br>Perez, Andrew   |  |
| Amount (\$)<br>\$310.00                                  | Payee address; City;<br>500 N. 8th St.<br><br>McAllen, TX 78501   |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>sponsorship                                     |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>04/16/2025                                       | Payee name<br>Premier Awards & Gifts  |  |
| Amount (\$)<br>\$69.28                                   | Payee address; City;<br>2301 N 10th St<br><br>McAllen, TX 78501   |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies                                 |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 24/36 Rpt: 28/40      | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>05/08/2025                                     | 5 Payee name<br>REYES, NORMA  |  |
| 6 Amount (\$)<br>\$120.00                                | 7 Payee address; City; State; Zip Code<br>3457 PFC PEDRO MARTINEZ RD.<br><br>MERCEDES, TX 78570   |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DONATION        |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>01/08/2025                                       | Payee name<br>ROBLEDO, MIGUEL   |  |
| Amount (\$)<br>\$2,600.00                                | Payee address; City; State; Zip Code<br>914 S. 15TH ST., STE. A<br><br>MCALLEN, TX 78501  |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>contract labor  |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>04/01/2025                                       | Payee name<br>Sam's Club  |  |
| Amount (\$)<br>\$79.38                                   | Payee address; City; State; Zip Code<br>7601 N. 10th St<br><br>McAllen, TX 78504  |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>food for jurors |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 25/36 Rpt: 29/40      | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>01/21/2025                                     | 5 Payee name<br>Sherwin-Williams  |   |
| 6 Amount (\$)<br>\$219.08                                | 7 Payee address; City;<br>2223 S. Business Hwy 281<br><br>Edinburg, TX 78539              |   |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>02/10/2025                                       | Payee name<br>Smokin Moon   |   |
| Amount (\$)<br>\$61.84                                   | Payee address; City;<br>1617 W. Polk<br><br>Pharr, TX 78577                               |   |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting         |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>02/10/2025                                       | Payee name<br>Smokin Moon   |   |
| Amount (\$)<br>\$129.81                                  | Payee address; City;<br>1617 W. Polk<br><br>Pharr, TX 78577                               |   |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting         |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 26/36 Rpt: 30/40      | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>01/06/2025                                     | 5 Payee name<br>Stripes  |  |
| 6 Amount (\$)<br>\$24.53                                 | 7 Payee address; City;<br>721 N. Closner<br><br>Edinburg, TX 78539                                 |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District             | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event-transportation gas |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>02/13/2025                                       | Payee name<br>Target   |  |
| Amount (\$)<br>\$244.71                                  | Payee address; City;<br>7400 N. 10th<br><br>McAllen, TX 78504                                      |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense            |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>02/05/2025                                       | Payee name<br>The UPS Store  |  |
| Amount (\$)<br>\$71.99                                   | Payee address; City;<br>7017 N. 10th St. Ste. N2<br><br>McAllen , TX 78504                         |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office expense                    |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 27/36 Rpt: 31/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>01/05/2025                                  | 5 Payee name<br>Toloa Rooftop  |  |
| 6 Amount (\$)<br>\$236.98                             | 7 Payee address; City; State; Zip Code<br>1200 Auburn Ave., Ste. 360<br><br>McAllen, TX 78504      |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                        | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>01/17/2025                                    | Payee name<br>University Draft House   |  |
| Amount (\$)<br>\$86.88                                | Payee address; City; State; Zip Code<br>2405 W. University Dr.<br><br>Edinburg, TX 78539           |  |
| PURPOSE<br>OF<br>EXPENDITURE                          | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>02/10/2025                                    | Payee name<br>Wal-Mart   |  |
| Amount (\$)<br>\$9.71                                 | Payee address; City; State; Zip Code<br>1724 W. University Dr<br><br>Edinburg, TX 78539            |  |
| PURPOSE<br>OF<br>EXPENDITURE                          | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 28/36 Rpt: 32/40      | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>04/29/2025                                     | 5 Payee name<br>Walgreens   |   |
| 6 Amount (\$)<br>\$190.00                                | 7 Payee address; City;<br>1418 E. University Dr.<br><br>Edinburg, TX 78539                |   |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Expense |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Walgreens  | Office sought<br>Office held  |
| Date<br>05/07/2025                                       | Payee name<br>Walgreens   |   |
| Amount (\$)<br>\$507.95                                  | Payee address; City;<br>1418 E. University Dr.<br><br>Edinburg, TX 78539                  |   |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Expense |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Whataburger  | Office sought<br>Office held  |
| Date<br>01/30/2025                                       | Payee name<br>Whataburger   |   |
| Amount (\$)<br>\$21.84                                   | Payee address; City;<br>717 E. University Dr.<br><br>Edinburg, TX 78539                   |   |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting   |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought<br>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 -<br>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:<br>Sch: 29/36 Rpt: 33/40      | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777  |
| 4 Date<br>02/26/2025                                     | 5 Payee name<br>Whataburger  |  |
| 6 Amount (\$)<br>\$35.91                                 | 7 Payee address; City;<br>717 E. University Dr.<br><br>Edinburg, TX 78539                          |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office meeting  |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>02/14/2025                                       | Payee name<br>amazon.com   |  |
| Amount (\$)<br>\$52.62                                   | Payee address; City;<br>410 Terry Ave N<br><br>Seattle, WA 98109                                   |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>04/04/2025                                       | Payee name<br>amazon.com   |  |
| Amount (\$)<br>\$51.92                                   | Payee address; City;<br>410 Terry Ave N<br><br>Seattle, WA 98109                                   |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office expense  |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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 -<br>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:<br>Sch: 30/36 Rpt: 34/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |                            |
| 4 Date<br>05/27/2025                                  | 5 Payee name<br>amazon.com   |   |                            |
| 6 Amount (\$)<br>\$28.76                              | 7 Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                 |   |                            |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Expense         |                            |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Candidate/Officeholder name   | Office sought<br>Office sought  | Office held<br>Office held |
| Date<br>02/12/2025                                    | Payee name<br>ebay.com   |   |                            |
| Amount (\$)<br>\$103.89                               | Payee address; City; State; Zip Code<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125               |   |                            |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |                            |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Candidate/Officeholder name   | Office sought<br>Office sought  | Office held<br>Office held |
| Date<br>02/12/2025                                    | Payee name<br>ebay.com   |   |                            |
| Amount (\$)<br>\$129.89                               | Payee address; City; State; Zip Code<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125               |   |                            |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |                            |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Candidate/Officeholder name   | Office sought<br>Office sought  | Office held<br>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:<br>Sch: 31/36 Rpt: 35/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>02/12/2025                                  | 5 Payee name<br>ebay.com  |   |
| 6 Amount (\$)<br>\$133.66                             | 7 Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125            |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought   |
| Date<br>02/18/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$24.90                                | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought   |
| Date<br>02/18/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$21.62                                | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 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:<br>Sch: 32/36 Rpt: 36/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>02/18/2025                                  | 5 Payee name<br>ebay.com  |   |
| 6 Amount (\$)<br>\$21.62                              | 7 Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125            |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought   |
| Date<br>02/18/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$121.24                               | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought   |
| Date<br>02/18/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$150.47                               | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 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:<br>Sch: 33/36 Rpt: 37/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>03/09/2025                                  | 5 Payee name<br>ebay.com  |   |
| 6 Amount (\$)<br>\$81.89                              | 7 Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125            |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought   |
| Date<br>03/24/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$28.97                                | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought   |
| Date<br>03/24/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$30.27                                | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 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:<br>Sch: 34/36 Rpt: 38/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>03/24/2025                                  | 5 Payee name<br>ebay.com  |   |
| 6 Amount (\$)<br>\$34.96                              | 7 Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125            |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>ebay.com   | Office sought<br>Office held  |
| Date<br>03/24/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$46.29                                | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>ebay.com   | Office sought<br>Office held  |
| Date<br>04/14/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$17.51                                | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>ebay.com   | Office sought<br>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:<br>Sch: 35/36 Rpt: 39/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)                                  | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>04/14/2025                                  | 5 Payee name<br>ebay.com  |   |
| 6 Amount (\$)<br>\$26.14                              | 7 Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125            |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>ebay.com   | Office sought<br>Office held  |
| Date<br>04/14/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$33.28                                | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>ebay.com   | Office sought<br>Office held  |
| Date<br>04/14/2025                                    | Payee name<br>ebay.com  |   |
| Amount (\$)<br>\$33.28                                | Payee address; City;<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125              |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>ebay.com   | Office sought<br>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:<br>Sch: 36/36 Rpt: 40/40   | 2 FILER NAME<br>Ramirez, Jose A. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00083777   |
| 4 Date<br>04/14/2025                                  | 5 Payee name<br>ebay.com   |   |
| 6 Amount (\$)<br>\$44.52                              | 7 Payee address; City; State; Zip Code<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125             |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign event expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>ebay.com  | Office sought<br>Office held  |
| Date<br>01/10/2025                                    | Payee name<br>ebay.com   |   |
| Amount (\$)<br>\$120.76                               | Payee address; City; State; Zip Code<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125               |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>office supplies        |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>ebay.com  | Office sought<br>Office held  |
| Date<br>06/09/2025                                    | Payee name<br>ebay.com   |   |
| Amount (\$)<br>\$50.77                                | Payee address; City; State; Zip Code<br>2145 Hamilton Ave.<br><br>San Jose, CA 95125               |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event Expense          |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>ebay.com  | Office sought<br>Office held  |