

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM JC/OH
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00090553	2 Total pages filed: 23		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Amanda	MI	OFFICE USE ONLY		
	NICKNAME	LAST Enriquez	SUFFIX	Date Received ELECTRONICALLY FILED 02/01/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked		
	REDACTED PER 254.0313, GOVT CODE			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Ms.	MI			
	NICKNAME	LAST Linda	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	REDACTED PER 254.0313, GOVT CODE					
7 CAMPAIGN TREASURER PHONE	AREA CODE (915) 549-2928	PHONE NUMBER EXTENSION				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 01/01/2026	Day	Year	Month 01/22/2026	Day	Year
10 ELECTION	ELECTION DATE Month 03/03/2026		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) District Judge Place El Paso District 171st El Paso			12 OFFICE SOUGHT (if known) District Judge Place El Paso District 171		

GO TO PAGE 2

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

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

2 of 23

13 C / OH NAME	Enriquez, Amanda		14 Filer ID (Ethics Commission Filers) 00090553												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME													
		COMMITTEE CAMPAIGN TREASURER ADDRESS													
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00												
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 17,225.00												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. TOTAL POLITICAL EXPENDITURES		\$ 21,263.87												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 26,694.50												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 10,000.00												
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;">Amanda Enriquez</p> <hr/> <p style="text-align: right;">Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>															
Signature of officer administering oath		Printed name of officer administering oath													
		Title of officer administering oath													

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

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18 FILER NAME Enriquez, Amanda	19 Filer ID (Ethics Commission Filers) 00090553
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 17,025.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 200.00	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 16,122.80	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 5,141.07	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/15 Rpt: 4/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaronson, Michael 6 Contributor address; City; State; Zip Code El Paso , TX 79941	7 Amount of Contribution (\$) \$150.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aboud , Sam Contributor address; City; State; Zip Code El Paso, TX 79912		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/16/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abrar and Vergara, Arif and Linzui Contributor address; City; State; Zip Code El Paso, TX 79903		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/15 Rpt: 5/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/22/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta , Alejandro	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code El Paso , TX 79932	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Claudia
		Contributor address; City; State; Zip Code El Paso , TX 79902
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arellano , Elizabeth
		Contributor address; City; State; Zip Code El paso , TX 79927
Contributor's Principal Occupation Administrator		Contributor's Job Title Admin
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/15 Rpt: 6/23	
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553	
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit , Chris	7 Amount of Contribution (\$) \$500.00	
	6 Contributor address; City; State; Zip Code El Paso , TX 79902		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney	
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 01/14/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caballero , Andres Contributor address; City; State; Zip Code El paso , TX 79902	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation attorney		Contributor's Job Title Deputy Public Defender	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 01/13/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas , Carlos Contributor address; City; State; Zip Code El Paso , TX 79901	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/15 Rpt: 7/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cordero , Jesus	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Fort Stockton , TX 79735	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Las Mora , Lorena	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code El Paso , TX 79936	
Contributor's Principal Occupation Social Work		Contributor's Job Title Social Worker
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Robert	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code El Paso , TX 79932	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/15 Rpt: 8/23	
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553	
4 Date 01/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) El Paso Association of Firefighters LOCAL-51	7 Amount of Contribution (\$) \$2,000.00	
	6 Contributor address; City; State; Zip Code El Paso, TX 79935		
8 Contributor's Principal Occupation		9 Contributor's Job Title	
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 01/13/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Irene Contributor address; City; State; Zip Code El Paso , TX 79932	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 01/15/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esparza, Jaime Contributor address; City; State; Zip Code El Paso , TX 79936	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/15 Rpt: 9/23												
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553												
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esparza Jimenez, Elena and Nicklaus 6 Contributor address; City; State; Zip Code El Paso, TX 79925	7 Amount of Contribution (\$) \$100.00												
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney												
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 01/19/2026</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia Contributor address; City; State; Zip Code El Paso , TX 79925 </td> <td>Amount of Contribution (\$) \$250.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 01/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia Contributor address; City; State; Zip Code El Paso , TX 79925	Amount of Contribution (\$) \$250.00	Contributor's Principal Occupation		Contributor's Job Title	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 01/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia Contributor address; City; State; Zip Code El Paso , TX 79925	Amount of Contribution (\$) \$250.00												
Contributor's Principal Occupation		Contributor's Job Title												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 01/05/2026</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez , Ray Contributor address; City; State; Zip Code Anthony , NM 88021 </td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez , Ray Contributor address; City; State; Zip Code Anthony , NM 88021	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation		Contributor's Job Title	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez , Ray Contributor address; City; State; Zip Code Anthony , NM 88021	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation		Contributor's Job Title												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/15 Rpt: 10/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Daniel	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code El Paso , TX 79925	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holguin, Enrique
		Contributor address; City; State; Zip Code El Paso , TX 79905
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/12/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy , Brian
		Contributor address; City; State; Zip Code El Paso, TX 79901
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/15 Rpt: 11/23												
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553												
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Labinoti , Daniela 6 Contributor address; City; State; Zip Code El Paso , TX 79901	7 Amount of Contribution (\$) \$2,500.00												
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney												
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td> Date 01/15/2026 </td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litton , Andra Contributor address; City; State; Zip Code El Paso , TX 79925 </td> <td> Amount of Contribution (\$) \$25.00 </td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Executive Assistant </td> <td> Contributor's Job Title Executive Asst. </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm </td> <td> Law firm of contributor's spouse (if any) </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litton , Andra Contributor address; City; State; Zip Code El Paso , TX 79925	Amount of Contribution (\$) \$25.00	Contributor's Principal Occupation Executive Assistant		Contributor's Job Title Executive Asst.	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litton , Andra Contributor address; City; State; Zip Code El Paso , TX 79925	Amount of Contribution (\$) \$25.00												
Contributor's Principal Occupation Executive Assistant		Contributor's Job Title Executive Asst.												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td> Date 01/12/2026 </td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margo, Donald Contributor address; City; State; Zip Code El Paso , TX 79922 </td> <td> Amount of Contribution (\$) \$500.00 </td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation </td> <td> Contributor's Job Title </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm </td> <td> Law firm of contributor's spouse (if any) </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margo, Donald Contributor address; City; State; Zip Code El Paso , TX 79922	Amount of Contribution (\$) \$500.00	Contributor's Principal Occupation		Contributor's Job Title	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margo, Donald Contributor address; City; State; Zip Code El Paso , TX 79922	Amount of Contribution (\$) \$500.00												
Contributor's Principal Occupation		Contributor's Job Title												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/15 Rpt: 12/23	
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553	
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez , Victor	7 Amount of Contribution (\$) \$150.00	
	6 Contributor address; City; State; Zip Code El Paso , TX 79912		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney	
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 01/19/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayr, Brent Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 01/15/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/15 Rpt: 13/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mond, Darrell and Charlene 6 Contributor address; City; State; Zip Code El Paso , TX 79938	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation retired		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/13/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya , Roger Contributor address; City; State; Zip Code El paso , TX 79925		
Contributor's Principal Occupation Attorney		Contributor's Job Title Deputy Public Defender
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales , Alice Contributor address; City; State; Zip Code El Paso , TX 79936		
Contributor's Principal Occupation Administrative Asst.		Contributor's Job Title Admin
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/15 Rpt: 14/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales , Estella	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code El Paso , TX 79936	
8 Contributor's Principal Occupation Administrative Asst.		9 Contributor's Job Title Administrative Asst.
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papadakis , Manny and Evy
		Contributor address; City; State; Zip Code El Paso , TX 79912
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez , Rudy
		Contributor address; City; State; Zip Code El Paso , TX 79936
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/15 Rpt: 15/23	
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553	
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel , Yvonne	7 Amount of Contribution (\$) \$150.00	
	6 Contributor address; City; State; Zip Code El Paso , TX 79912		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title	
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 01/10/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reich, Tracy and John Contributor address; City; State; Zip Code Santa Teresa , NM 88008	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 01/15/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rincon, Carlos Contributor address; City; State; Zip Code El Paso , TX 79912	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/15 Rpt: 16/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas , Rafael 6 Contributor address; City; State; Zip Code El paso , TX 79902	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/11/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez , Christina Contributor address; City; State; Zip Code El paso , TX 79902		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm County Attorney's Office		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/16/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis , Eduardo Contributor address; City; State; Zip Code El Paso , TX 79902		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/15 Rpt: 17/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Christopher 6 Contributor address; City; State; Zip Code El Paso , TX 79912	7 Amount of Contribution (\$) \$200.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarango-Lopez, Rebecca and Jose Contributor address; City; State; Zip Code El Paso , TX 79930		Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/15/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas , Rene Contributor address; City; State; Zip Code El paso , TX 79930		Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Deputy Public Defender
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/15 Rpt: 18/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wenke, John 6 Contributor address; City; State; Zip Code El Paso , TX 79902	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS**SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 19/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 01/15/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Stillinger Godinez Lawfirm 7 Contributor address; City; State; Zip Code El paso , TX 79902	8 Amount of contribution (\$) 9 In-kind contribution description \$200.00 Beverages for Fundraiser <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 20/23	2 FILER NAME Enriquez, Amanda	3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/22/2026	5 Payee name Act Blue	
6 Amount (\$) \$67.13	7 Payee address; City; PO Box 441146 Somerville , MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service fee for actblue
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 01/08/2026	Payee name Airport Printing Service	
Amount (\$) \$756.67	Payee address; City; 7 Leigh Fisher Blvd El Paso , TX 79906	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door Tags
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 01/12/2026	Payee name Airport Printing Service	
Amount (\$) \$15,299.00	Payee address; City; 7 Leigh Fisher Blvd El Paso , TX 79906	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/2 Rpt: 21/23	2 FILER NAME Enriquez, Amanda	3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/16/2026	5 Payee name Bell, Rachel	
6 Amount (\$) \$298.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE El Paso , TX 79912	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 01/05/2026	Payee name Carmona , Mario	
Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE El paso , TX 79938	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signage/labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 01/05/2026	Payee name Imprint.com	
Amount (\$) \$593.07 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 14550 Beechnut St. Houston , TX 77083	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 22/23	2 FILER NAME Enriquez, Amanda	3 Filer ID (Ethics Commission Filers) 00090553
4 Date 01/14/2026	5 Payee name Landeros, Jose	
6 Amount (\$) \$2,500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE El Paso , TX 79936	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Legacy Catering	Office sought Office held
Date 01/13/2026	Payee name Legacy Catering	
Amount (\$) \$750.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 10744 Mellward Rd. El Paso, TX 79927	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.		1 Total pages Schedule L: Sch: 1/1 Rpt: 23/23
2 FILER NAME Enriquez, Amanda		3 Filer ID (Ethics Commission Filers) 00090553
LENDER INFORMATION	4 Name of lender Enriquez, Amanda	
	5 Lender address; City; State; Zip Code El Paso , TX 79934	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	6 Name of guarantor	
	7 Guarantor address; City; State; Zip Code	