

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) 00089521 | | 2 Total pages filed: 11 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | | FIRST Abel | MI | |
| | NICKNAME | | LAST Villarreal | SUFFIX Jr. | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 128 Roma, TX 78584 | | | ZIP CODE | |
| | OFFICE USE ONLY | | | | |
| | Date Received ELECTRONICALLY FILED 02/02/2026 | | | | |
| | Date Hand-delivered or Date Postmarked | | | | |
| | | Receipt # | | Amount | |
| | | Date Processed | | | |
| | | Date Imaged | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Ms. | | FIRST Brendaly | MI | |
| | NICKNAME | | LAST Guerrero | SUFFIX | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 43 Rincon Road Roma, TX 78584 | | | | |
| | | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | | |
| | (956) | 208-9362 | | | |
| 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 | Day | Year | THROUGH | Month Day Year |
| | 01/01/2026 | | | | 01/22/2026 |
| 10 ELECTION | ELECTION DATE | | ELECTION TYPE | | |
| | Month | Day | Year | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |
| | 03/03/2026 | | | | |
| 11 OFFICE | OFFICE HELD (if any) | | | 12 OFFICE SOUGHT (if known) | |
| | | | | District Judge District 229 | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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| | |
|--|---|
| 13 C / OH NAME Villarreal Jr., Abel (Mr.) | 14 Filer ID (Ethics Commission Filers) 00089521 |
|--|---|

| | | | |
|---|--|---|----------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | 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. | | |
| | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME | |
| | | COMMITTEE ADDRESS | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 2,175.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 4,521.54 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 6,983.16 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Abel Villarreal Jr.

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

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

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| | | |
|--|--|---|
| 18 FILER NAME Villarreal Jr., Abel (Mr.) | | 19 Filer ID (Ethics Commission Filers) 00089521 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ 2,000.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 175.00 |
| 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 | \$ 12.00 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 4,509.54 |
| 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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 3.00 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/11 |
| 2 FILER NAME Villarreal Jr., Abel (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089521 |
| 4 Date 01/13/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Billy <hr/> 6 Contributor address; City; State; Zip Code Bishop, TX 78343 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Contributor's Principal Occupation Senior Business Advisor | | 9 Contributor's Job Title Senior Business Advisor |
| 10 Contributor's employer/law firm Wyatt Ranches of Texas, LLC | | 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#: _____) Wyatt, Bradford <hr/> Contributor address; City; State; Zip Code Realitos, TX 78376 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Administrator | | Contributor's Job Title Administrator |
| Contributor's employer/law firm Wyatt Ranches of Texas LLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 5/11 | |
| 2 FILER NAME Villarreal Jr., Abel (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089521 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 01/03/2026 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Ivan | 8 Amount of contribution (\$) \$175.00 | 9 In-kind contribution description Event Refreshments |
| | 7 Contributor address; City; State; Zip Code Roma, TX 78584 | <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) Law Enforcement | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) Investigator | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) Roma Police Department | | 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
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 F1: Sch: 1/1 Rpt: 6/11 | 2 FILER NAME Villarreal Jr., Abel (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089521 |
| 4 Date 01/09/2026 | 5 Payee name Lone Star National Bank | |
| 6 Amount (\$) \$3.00 | 7 Payee address; City; State; Zip Code 201 N. Texas Street Rio Grande City, TX 78582 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (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 Charges & Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/22/2026 | Payee name Lone Star National Bank | |
| Amount (\$) \$9.00 | Payee address; City; State; Zip Code 201 N. Texas Street Rio Grande City, TX 78582 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Temp Check/Deposit Slip Fee |
| 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: 1/4 Rpt: 7/11 | | 2 FILER NAME Villarreal Jr., Abel (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089521 | |
| 4 Date 01/09/2026 | | 5 Payee name Avina, Jose | | | |
| 6 Amount (\$) \$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Rio Grande City, TX 78582 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Event 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 Food for Campaign Event | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 01/19/2026 | | Payee name Avina, Jose | | | |
| Amount (\$) \$120.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Rio Grande City, TX 78582 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Event Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Campaign Event | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 01/21/2026 | | Payee name Frontera Rio | | | |
| Amount (\$) \$750.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code 699 La Mesa Street Rio Grande City, TX 78582 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Advertising | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|---|--|
| 1 Total pages Schedule G: Sch: 2/4 Rpt: 8/11 | | 2 FILER NAME Villarreal Jr., Abel (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089521 | |
| 4 Date 01/02/2026 | | 5 Payee name Hinojosa Bros Wholesale | | | |
| 6 Amount (\$) \$96.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address; City; State; Zip Code P.O. Box 901 Roma, TX 78584 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Event 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 Event Refreshments | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 01/08/2026 | | Payee name Hinojosa Bros Wholesale | | | |
| Amount (\$) \$92.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code P.O. Box 901 Roma, TX 78584 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Event Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Refreshments | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 01/16/2026 | | Payee name Hinojosa Bros Wholesale | | | |
| Amount (\$) \$112.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code P.O. Box 901 Roma, TX 78584 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Event Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Refreshments | |
| 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: 3/4 Rpt: 9/11 | | 2 FILER NAME Villarreal Jr., Abel (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089521 | |
| 4 Date 01/02/2026 | | 5 Payee name Meta Platforms, Inc. | | | |
| 6 Amount (\$) \$965.00 <input type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Advertising | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 01/20/2026 | | Payee name Meta Platforms, Inc. | | | |
| Amount (\$) \$600.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Advertising | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 01/21/2026 | | Payee name Meta Platforms, Inc. | | | |
| Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Advertising | |
| 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: 4/4 Rpt: 10/11 | | 2 FILER NAME Villarreal Jr., Abel (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089521 | |
| 4 Date 01/15/2026 | | 5 Payee name Montalvo, Dorothy | | | |
| 6 Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Rio Grande City, TX 78582 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Billboard Rental | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 01/09/2026 | | Payee name Ollervides, Lily | | | |
| Amount (\$) \$550.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE McAllen, TX 78504 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Advertising | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 01/07/2026 | | Payee name makestickers.com | | | |
| Amount (\$) \$324.54 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code 18621 81st Ave. Tinley Park, IL 60487 | | | |
| 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 Bumper Stickers | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 11/11

2 FILER NAME

Villarreal Jr., Abel (Mr.)

3 Filer ID (Ethics Commission Filers)
00089521

4 Date

01/22/2026

5 Name of person from whom amount is received

Lone Star National Bank

8 Amount (\$)

\$3.00

6 Address of person from whom amount is received; City; State; Zip Code

Rio Grande City, TX 78582

7 Purpose for which amount is received

Refund Temporary Check Fee

☒ Check if political contribution returned to filer