

STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT

FORM SC C/OH
COVER SHEET PG 1

The SC C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090467		2 Total pages filed: 8	
3 CANDIDATE NAME	MS / MRS / MR FIRST MI Ms. Lorraine		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/06/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged		
	NICKNAME LAST SUFFIX De Leon				
4 CANDIDATE ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 210 E. Linda Harlingen, TX 78550				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Jerry				
	NICKNAME LAST SUFFIX Santos				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 17733 Forest Lane Harlingen, TX 78552				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 659-0531				
8 REPORT TYPE	☐ January 15 ☒ 30th day before convention / election ☐ Runoff ☐ July 15 ☐ 8th day before convention / election ☐ Final report (Attach SC C/OH-FR)				
9 PERIOD COVERED	Month Day Year Month Day Year 01/01/2026 THROUGH 01/22/2026				
10 CONVENTION / ELECTION DATE	Month Day Year		11 OFFICE SOUGHT	☐ STATE CHAIR ☒ COUNTY CHAIR	
12 POLITICAL PARTY	Republican COUNTY (If Applicable) Cameron				

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**STATE / COUNTY CHAIR
CAMPAIGN FINANCE REPORT:
SUPPORT & TOTALS**

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

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13 CANDIDATE NAME De Leon, Lorraine (Ms.)		14 Filer ID (Ethics Commission Filers) 00090467	
15 NOTICE FROM POLITICAL COMMITTEE(S) ☐ Additional Pages	This box is for notice of political expenditures by political committees to support the candidate. <i>These expenditures may have been made without the candidate's knowledge or consent.</i> Candidates are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE ☐ GENERAL ☐ 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)	\$ 600.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 75.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,275.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,000.00

17 AFFADAVIT

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

Ms. Lorraine De Leon

Signature of Candidate

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 - SC C/OH

FORM SC C/OH COVER SHEET PG 3

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18 CANDIDATE NAME De Leon, Lorraine (Ms.)		19 Filer ID 00090467	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	100.00
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	500.00
3.	☒ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	☒ SCHEDULE E: LOANS	\$	0.00
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	75.00
6.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	☒ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	☒ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00
10.	☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 1/1 Rpt: 4/8

2 FILER NAME

De Leon, Lorraine (Ms.)

3 Filer ID (Ethics Commission Filers)
00090467

4 Date

01/05/2026

5 Full name of contributor

Stolar, Kenneth (Mr.)

☐ out-of-state PAC (ID#: _____)

7 Amount of Contribution (\$)

\$100.00

6 Contributor address; City; State; Zip Code

Harlingen, TX 78552

8 Principal occupation / Job title (See Instructions)

Registered Nurse

9 Employer (See Instructions)

Retired

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: 5/8	
2 FILER NAME De Leon, Lorraine (Ms.)				3 Filer ID (Ethics Commission Filers) 00090467	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$ 0.00	
5 Date 01/21/2026	6 Full name of contributor ☐ out-of-state PAC (ID#: _____) Cisneros, Noemi (Mrs.)			8 Amount of contribution (\$) \$200.00	9 In-kind contribution description Meet and greet
	7 Contributor address; City; State; Zip Code Harlingen, TX 78550			☐ Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			11 Employer (FOR NON-JUDICIAL) (See instructions) N/A		
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)					
Date 01/16/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Flores, Irene (Mrs.)			Amount of contribution (\$) \$200.00	In-kind contribution description Meet and Greet
	Contributor address; City; State; Zip Code Harlingen, TX 78550			☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			Employer (FOR NON-JUDICIAL) (See instructions) N/A		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 01/21/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sanchez, Erica (Ms.)			Amount of contribution (\$) \$100.00	In-kind contribution description Print Media
	Contributor address; City; State; Zip Code Harlingen, TX 78550			☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)			Employer (FOR NON-JUDICIAL) (See instructions) HEB		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

Sch: 1/1 Rpt: 6/8

2 FILER NAME

De Leon, Lorraine (Ms.)

3 Filer ID (Ethics Commission Filers)

00090467

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 7/8
2 FILER NAME De Leon, Lorraine (Ms.)		3 Filer ID (Ethics Commission Filers) 00090467
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender ☐ out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral ☐ None		15 Check if personal funds were deposited into political account (See Instructions) ☐
16 GUARANTOR INFORMATION ☐ not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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: 8/8	2 FILER NAME De Leon, Lorraine (Ms.)	3 Filer ID (Ethics Commission Filers) 00090467
4 Date 01/15/2026	5 Payee name Print Pack Ship Store	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 1327 E. Washington Ave. Harlingen, TX 78550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Print media
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held