CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

	Filer ID (Eth	ics Commission Filers)	2 Total pages filed:			OFFIC	E USE ONLY	
	00000030		16			Date Received		
	CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRON	IICALLY FILED	
	OFFICEHOLDER NAME	Ms.	Veronica			12/04/2023		
	· · · · · · · ·	NICKNAME	LAST		SUFFIX			
			Carbajal			Date Hand-deliver	red or Date Postmarke	
	ORIGINAL	January 15	Runoff	Other (s	specify)	Date Hand-deliver	red of Date Positiane	·
	REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount	
		30th day before election	15th day after cam			-		
		χ 8th day before election	appointment (office	• •		Date Processed	-	
	ODICINIAL DEDIOD		<u> </u>		Year	_		
	ORIGINAL PERIOD COVERED	Month Day Ye 11/10/2023	THROUGH	Month Day 11/29/2023	real	Date Imaged		
_	EXPLANATION OF C			11/29/2023		<u> </u>		
		CORRECTION 2/1/2023 listed a political e:	vnanditure of \$200 cm	1/20/2022 for conver	sing poid to \/	onica Carbaial	2252 Townslow	+
	the check as deposite made in good faith.	ed, if necessary. It appear	s that Veronica Carbaji	al's and Lorena Ramire	ez's information	was somehow	merged. The err	or was
	AFFIDAVIT		l sw	rear, or affirm, under p	enalty of periur	y, that this corre	ected report is tru	·
	AFFIDAVIT			ear, or affirm, under p correct.	enalty of perjur	y, that this corre	ected report is tru	,
	AFFIDAVIT		and		, , , ,		·	·
	AFFIDAVIT		and	correct.	and all applica	able statements:	·	·
	AFFIDAVIT		and	correct.	and all applicas:	able statements:	original report	·
	AFFIDAVIT		and	correct. ck the box next to any Semiannual reports	and all applicas: I swear, or aith and without	able statements: r affirm that the o	original report slead or to	,
•	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual report: was made in good fa misrepresent the infe	and all applicas: I swear, or aith and without ormation contai	able statements: r affirm that the o t an intent to mis ned in the repor	original report slead or to t.	;
	AFFIDAVIT		and	correct. ck the box next to any Semiannual report: was made in good fa	and all applica s: I swear, or aith and without ormation contai	able statements: r affirm that the of t an intent to mis ined in the repor , that I am filing	original report slead or to t. this corrected	;
	AFFIDAVIT		and Che	Semiannual reports was made in good fa misrepresent the info	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is ir	able statements: r affirm that the of the an intent to missined in the report, that I am filing ess day after the naccurate or inc	original report slead or to t. this corrected adate I learned omplete. I)
	AFFIDAVIT		and Che	Semiannual reports was made in good fa misrepresent the info	v and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or	able statements: r affirm that the of the an intent to missined in the report, that I am filing ess day after the naccurate or inc	original report slead or to t. this corrected adate I learned omplete. I	;
	AFFIDAVIT		and Che	Semiannual reports was made in good fa misrepresent the info	v and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or	able statements: r affirm that the of the an intent to missined in the report, that I am filing ess day after the naccurate or inc	original report slead or to t. this corrected adate I learned omplete. I	}
	AFFIDAVIT		and Che	Semiannual reports was made in good fa misrepresent the info Other reports: I see report not later than that the report as ori swear, or affirm, that filed was made in good	e and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or ood faith.	able statements: r affirm that the of the an intent to misined in the report, that I am filingless day after the naccurate or incomission in the re	original report slead or to t. this corrected adate I learned omplete. I	•
	AFFIDAVIT		and Che	Semiannual reports was made in good fa misrepresent the info Other reports: I see report not later than that the report as ori swear, or affirm, that filed was made in good	v and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or	able statements: r affirm that the of the an intent to misined in the report, that I am filingless day after the naccurate or incomission in the re	original report slead or to t. this corrected adate I learned omplete. I	÷
	AFFIDAVIT		and Che	Semiannual reports was made in good fa misrepresent the info	e and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or ood faith. Ms. Veronica	able statements: r affirm that the of the an intent to misined in the report, that I am filingless day after the naccurate or incomission in the re	original report slead or to t. this corrected e date I learned omplete. I eport as originally	
		TAMP / SEAL ABOVE	and Che	Semiannual reports was made in good fa misrepresent the info	e and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or ood faith. Ms. Veronica	able statements: r affirm that the of an intent to missined in the report that I am filing ess day after the naccurate or incomission in the reformation.	original report slead or to t. this corrected e date I learned omplete. I eport as originally	-
	AFFIX NOTARY ST		and Che	Semiannual reports was made in good fa misrepresent the info Other reports: I see report not later than that the report as or is swear, or affirm, that filed was made in good Signature.	e and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or ood faith.	able statements: r affirm that the of an intent to missined in the report, that I am filing ess day after the naccurate or included mission in the record of the company of	original report slead or to t. this corrected e date I learned omplete. I eport as originally	
	AFFIX NOTARY ST Sworn to and subsc	ribed before me, by the sa	and Che	Semiannual reports was made in good fa misrepresent the info Other reports: I seport that the report as or swear, or affirm, that filed was made in good signature.	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or ood faith. Ms. Veronica ure of Candidate	able statements: r affirm that the of an intent to missined in the report, that I am filing ess day after the naccurate or included mission in the record of the company of	original report slead or to t. this corrected e date I learned omplete. I eport as originally	;
	AFFIX NOTARY ST Sworn to and subsc		and Che	Semiannual reports was made in good fa misrepresent the info Other reports: I seport that the report as or swear, or affirm, that filed was made in good signature.	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or ood faith. Ms. Veronica ure of Candidate	able statements: r affirm that the of an intent to missined in the report, that I am filing ess day after the naccurate or included mission in the record of the company of	original report slead or to t. this corrected e date I learned omplete. I eport as originally	
	AFFIX NOTARY ST Sworn to and subsc	ribed before me, by the sa	and Che	Semiannual reports was made in good fa misrepresent the info Other reports: I seport that the report as or swear, or affirm, that filed was made in good signature.	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or ood faith. Ms. Veronica ure of Candidate	able statements: r affirm that the of an intent to missined in the report, that I am filing ess day after the naccurate or included mission in the record of the company of	original report slead or to t. this corrected e date I learned omplete. I eport as originally	-

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00000030	sion Filers)	2 Total pages file 16	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	Ms.	Veronica			Date Received	
					ELECTRONICAL	LY FILED
	NICKNAME	LACT		SUFFIX	12/04/2023	
	NICKNAME	LAST		SUFFIX	12/04/2020	
		Carbajal				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or D	Date Postmarked
OFFICEHOLDER MAILING	3016 Wheeling Avenue					•
ADDRESS					Receipt #	Amount
Change of Address	El Paso, TX 79930				2 . 2	
	,				Date Processed	
					Date Imaged	
					Date illiaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u> </u>	
TREASURER	Ms.	Emma C.		1411		
NAME	IVIS.	Lillia C.				
				0115517		
	NICKNAME	LAST		SUFFIX		
	Kitty	Spalding				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STAT	E; ZIP CODE
ADDRESS	920 Blanchard					
(Residence or Business)						
,	El Paso, TX 79902					
7 CAMPAICNI	ADEA CODE DUON	E NUMBER - F	VIENCION			
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION			
PHONE	(915) 532-3731					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after cam	naign treasurer
		_ court day belore			appointment (office	
	July 15	8th day before		Exceeded modified	Final Report (Attac	h C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	11/10/2023	TH	IROUGH	11/29/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	12/09/2023	П	eneral	X Special		
				<u> </u>		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
III OFFICE	None				ıncil Representativ	e District 2
				2.1 400 0119 000	mon representativ	o Biotriot E
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 16

13 C / OH NAME	Carbajal , Veronica (Ms.)	14 Filer ID (100000030	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00		
	5)	\$ 5,015.00		
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 5,983.48
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 2,590.62
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 292.34
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Ms. V	/eronica Carbajal	
		Signature of	Candidate or Officehold	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	OVER SHEET	PG 3 4 of 16
l	ER NAN rbajal ,	1E Veronica (Ms.)	19 Filer ID 00000030	(Ethics Commissio	n Filers)
l		E SUBTOTALS SCHEDULE		SUBTOTAL A	MOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,015.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	1,000.00
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	5,983.48
6.		\$			
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
9.	9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS				
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/7 Rpt: 5/16			
2	FILER NAME Carbajal , Ve	eronica (Ms.)		3	Filer ID (Ethics Commission 00000030	n Filers)		
4	Date 11/12/2023	 Full name of contributor out-of-state PAC (ID#:_Armendariz, Patricia Contributor address; City; State; Zip Code 3027 Wheeling Ave.)	7	Amount of Contribution (\$)	\$200.00		
		El Paso, TX 79930						
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired	5)				
	Date 11/10/2023	Full name of contributor out-of-state PAC (ID#:_ Balovich J.D., Julie Contributor address; City; State; Zip Code 305 Texas Oak Drive)		Amount of Contribution (\$)	\$150.00		
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Self	5)				
	Date 11/29/2023	Full name of contributor out-of-state PAC (ID#:_ Camacho, Irma Contributor address; City; State; Zip Code 9009 West H Burges Drive.)		Amount of Contribution (\$)	\$100.00		
	Principal occu Retired	El Paso, TX 79925 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)				
	Date 11/19/2023	Full name of contributor out-of-state PAC (ID#:_ Crawford J.D., Connie Contributor address; City; State; Zip Code 1010 Madeline Drive			Amount of Contribution (\$)	\$75.00		
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions	 - s)				
	Retired		Retired					
	Date 11/28/2023	Full name of contributor out-of-state PAC (ID#:_ Dicker J.D., Alan Contributor address; City; State; Zip Code 1400 North Florence Street El Paso, TX 79902			Amount of Contribution (\$)	\$40.00		
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Texas RioGrande Legal		d, Inc.			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 6/16	
2	FILER NAME Carbajal , Ve	eronica (Ms.)		3	Filer ID (Ethics Commission 00000030	n Filers)
4	Date 11/27/2023	 Full name of contributor out-of-state PAC (ID#:_Dominguez, Adriana Contributor address; City; State; Zip Code 10217 Aggie Circle 		7	Amount of Contribution (\$)	\$25.00
g	Principal occu	El Paso, TX 79924 pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
0	Assistant Pro		UTEP UTEP	3)		
	Date 11/28/2023	Full name of contributor out-of-state PAC (ID#:_Driscoll, Don Contributor address; City; State; Zip Code 1311 Elm St. El Paso, TX 79930			Amount of Contribution (\$)	\$250.00
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Union Repre		National Nurses United	_		
	Date 11/25/2023	Full name of contributor out-of-state PAC (ID#:) Garcia, Monica Contributor address; City; State; Zip Code 134 Green Desert Cir. El Paso, TX 79928			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Health Strat	egy Specialist	MHP Salud			
	Date 11/17/2023	Full name of contributor out-of-state PAC (ID#:_ James J.D., Stephanie Contributor address; City; State; Zip Code 908 Cortijo Dr. El Paso, TX 79912			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Lawyer		Texas RioGrande Lega	l Ai	d, Inc.	
	Date 11/12/2023	Full name of contributor out-of-state PAC (ID#:_ Jose Roberto Rodriguez Campaign Account Contributor address; City; State; Zip Code 911 Dallas El Paso, TX 79902)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	I S)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/7 Rpt: 7/16	
2	FILER NAME Carbajal , Ve	ronica (Ms.)		3	Filer ID (Ethics Commission 00000030	n Filers)
4	Date 11/26/2023	 Full name of contributor out-of-state PAC (ID#:_Karmally J.D., Sameena Contributor address; City; State; Zip Code 14 Bishop Gate 	_	7	Amount of Contribution (\$)	\$500.00
_		Allen, TX 75002	<u> </u>	_		
8	Principal occu Lawyer	pation / Job title (See Instructions)	9 Employer (See Instructions Self	5)		
	Date 11/23/2023	Full name of contributor out-of-state PAC (ID#:_ Kruzich, Ann Contributor address; City; State; Zip Code 3202 Old Spanish Trail			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 11/12/2023	Full name of contributor out-of-state PAC (ID#:_ Kurtyka, Jerry Contributor address; City; State; Zip Code 715 B Espada El Paso, TX 79912)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 11/12/2023	Full name of contributor out-of-state PAC (ID#:_McAlmon, Annie Contributor address; City; State; Zip Code 408 Blacker Ave. El Paso, TX 79902			Amount of Contribution (\$)	\$250.00
		pation / Job title (See Instructions) ss Diversion Case Worker	Employer (See Instructions El Paso Coalition for the		omeless	
	Date 11/13/2023	Full name of contributor out-of-state PAC (ID#:_Medrano, Vanessa Contributor address; City; State; Zip Code 10474 Davwood Lane El Paso, TX 79925			Amount of Contribution (\$)	\$10.00
	Principal occu Student	pation / Job title (See Instructions)	Employer (See Instructions Student	<u>(</u>		

	MONEI	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/7 Rpt: 8/16
2	FILER NAME Carbajal , Ve	eronica (Ms.)		3 Filer ID (Ethics Commission Filers) 00000030
4	Date 11/22/2023	 Full name of contributor out-of-state PAC (ID#:_Mesta J.D., Alberto Contributor address; City; State; Zip Code 1206 Mesita Dr. 		7 Amount of Contribution (\$) \$100.00
8	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	9 Employer (See Instructions)
	Lawyer		Texas RioGrande Legal	Aid, Inc.
	Date 11/25/2023	Full name of contributor out-of-state PAC (ID#:_ Peregrino Ph.D, Sylvia Contributor address; City; State; Zip Code 12452 Robert Dahl El Paso, TX 79938)	Amount of Contribution (\$) \$25.00
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
	Instructor		El Paso Community Col	lege
	Date 11/12/2023	Full name of contributor out-of-state PAC (ID#:_Ramirez, Toni (Dr.) Contributor address; City; State; Zip Code 7410 Sidewinder Bend Dr.		Amount of Contribution (\$) \$20.00
	Dringing con	El Paso, TX 79911 pation / Job title (See Instructions)	Employer (Can Instructions	<u> </u>
	Family Physi		Employer (See Instructions Centro San Vicente, Plu	
	Date 11/29/2023	Full name of contributor out-of-state PAC (ID#:_Reza, Ana Contributor address; City; State; Zip Code 9133 Cuernavaca Dr. El Paso, TX 79907)	Amount of Contribution (\$) \$230.00
	Principal occu Bridge Chap	pation / Job title (See Instructions) lain	Employer (See Instructions Episcopal Diocese of the	
	Date 11/27/2023	Full name of contributor out-of-state PAC (ID#:_Rivera, Cristina Contributor address; City; State; Zip Code 2504 Nashville Avenue El Paso, TX 79930)	Amount of Contribution (\$) \$250.00
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions CR Strategies)

	MONEI	ARY POLITICAL C	ONTRIBUTION	15		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 5/7 Rpt: 9/16	
2	FILER NAME	eronica (Ms.)			3	Filer ID (Ethics Commission 00000030	on Filers)
_					Ŀ		
4	Date 11/11/2023				7	Amount of Contribution (\$)	\$250.00
		6 Contributor address; City; Star	te; Zip Code				
		1809 Georgia Pl.					
		El Paso, TX 79902					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Retired			Retired			
_	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	11/17/2023	Saucedo J.D., Everett				(+)	\$20.00
	11/11/12020		to: 7in Codo		ł		Ψ20.00
		Contributor address; City; Star 2904 Grant Ave.	te, zip Code				
		2904 Giaill Ave.					
		El Paso, TX 79930					
_	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Lawyer	pation / out title (oce motituetions)		Texas RioGrande Legal		d Inc	
_			<u>l</u>	Texas Moorande Legal	T		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	# 20.00
	11/12/2023	Saucedo J.D., Everett					\$20.00
		Contributor address; City; Sta	te; Zip Code				
		2904 Grant Ave.					
		El Paso, TX 79930					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Lawyer	,		Texas RioGrande Legal		d, Inc.	
_	Date	Full name of contributor	Tout of state DAC (ID#:	,	Г	Amount of Contribution (\$)	
	11/24/2023	Schulte, Kim	out-of-state PAC (ID#:)		Amount of Continuation (\$)	\$50.00
	11/24/2023						Φ50.00
		Contributor address; City; Sta	te; Zip Code				
		7956 Morning Dawn Ave.					
		El Paso, TX 79932					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Counselor			Universal Health Service	es		
_	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	11/10/2023	Spalding, Kitty				(·/	\$1,000.00
		Contributor address; City; State; Zip Code			ł		,
		920 Blanchard Avenue	te, zip code				
		320 Blanchard / Wende					
		El Paso, TX 79902					
		pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Retired			Retired			
l							

	MONEI	ARY POLITICAL CO	NTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 10/16	
2	FILER NAME Carbajal, Ve	eronica (Ms.)			3	Filer ID (Ethics Commission 00000030	n Filers)
4	Date 11/24/2023	_	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$25.00
8		Buda, TX 78610 pation / Job title (See Instructions)		9 Employer (See Instructions			
	Date 11/25/2023	Full name of contributor Stone J.D., Briana Contributor address; City; State; 210 Rosemary Hollow Buda, TX 78610	out-of-state PAC (ID#:	National Center for Stat		Amount of Contribution (\$)	\$100.00
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions National Center for Stat		Courts	
	Date 11/10/2023	Teixeira, Juana Contributor address; City; State; 711 Tepic Dr.	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$125.00
	Principal occu Banker	El Paso, TX 79912 pation / Job title (See Instructions)		Employer (See Instructions MUFG Bank	<u> </u> 5)		
	Date 11/26/2023	Full name of contributor Tirres, Andrea Contributor address; City; State; 3401 Hixson St. El Paso, TX 79902	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$100.00
	•	pation / Job title (See Instructions) r., Interdisciplinary Research		Employer (See Instructions UTEP	5)		
	Date 11/13/2023	Full name of contributor Valdez, Jesus Contributor address; City; State; 4800 Caseta Rd. El Paso, TX 79922	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL CONTRIBUTION	;		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f		1	Total pages Schedule A1: Sch: 7/7 Rpt: 11/16	
2	FILER NAME Carbajal , Veronica (Ms.)		3	Filer ID (Ethics Commission Filers) 00000030		
4	Date 11/28/2023	 Full name of contributor out-of-state PAC (ID#:_ Wyatt J.D., Michael Contributor address; City; State; Zip Code 2906 Silver Ave. El Paso, TX 79930)	7	Amount of Contribution (\$) \$200.00
8	Principal occu	pation / Job title (See Instructions)		mployer (See Instructions I Paso County)	

The Instruction Guide explains how to complete this form. 2 FILER NAME 2 FILER NAME 3 FIRE ID (Ehics Commission Filers) 00000030 4 TOTAL OF UNITEMIZED PLEDGES 5 Date 6 Full name of piedgor Qued-state PAC (IDIT District Fronteriza PAC Telegopy Address: City: State: Zip Code S1,000.00 Printing costs to be paid directly to vendor El Paso, TX 79936 Check it travel outside of Texas. Complete Schedule 10 Principal occupation / Job 8tile (See Instructions) 1 Total pages Schedule E: Sch: 1/1 Rpt: 12/16 3 Filer ID (Ehics Commission Filers) 00000030 5 Date 6 Full name of piedgor Qued-state PAC (IDIT District Fronteriza PAC DISTRICT Fronteriza PAC Principal (IT applicable) Principal occupation / Job 8tile (See Instructions) IT Employer (See Instructions)	PLEDO	GED CONTRIBUTIONS				SCHEDULE B
2 FILER NAME Carbajal , Veronica (Ms.) 4 TOTAL OF UNITEMIZED PLEDGES 5 Date 11/29/2023 6 Full name of pledgor	The	Instruction Guide explains how to comple	te this form.	1		
TOTAL OF UNITEMIZED PLEDGES 5 Date 6 Full name of pledgorout-of-state PAC (ID#:) Justicia Fronteriza PAC 7 Pledgor Address; City; State; Zip Code 11/29/2023 City: State; Zip Code El Paso, TX 79936 \$ Amount of pledge (\$) (If applicable) Printing costs to be paid directly to vendor				3	Filer ID (Eth	
5 Date 6 Full name of pledgorout-of-state PAC (ID#:) Justicia Fronteriza PAC 7 Pledgor Address; City; State; Zip Code 11/29/2023 El Paso, TX 79936 8 Amount of pledge (\$) (If applicable) \$1,000.00 Printing costs to be paid directly to vendor	4					0.00
Justicia Fronteriza PAC 7 Pledgor Address; City; State; Zip Code 11/29/2023 1535 Raphael Circle El Paso, TX 79936 City; State; Zip Code paid directly to vendor Check if travel outside of Texas. Complete Schedule					Amount of	9 In-kind description
El Paso, TX 79936 El Paso, TX 79936 Check if travel outside of Texas. Complete Schedule		Justicia Fronteriza PAC				i Printing costs to be
	11/29/2023	1535 Raphael Circle				paid directly to vendor I I
11 Employer (See Instructions) 12 Employer (See Instructions)						ide of Texas. Complete Schedule T.
	10 Principal occ	cupation / Job title (See Instructions)	11 Employer (See Instru	ctio	ons)	

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 Commi

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 13/16	Carbajal , Veronica (Ms.) 00000030
4	Date	5 Payee name
	11/10/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.34	410 Terry Ave N,
		Seattle, WA 98019
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Yard sign stakes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Yard sign stakes
		Talu sign stakes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	David waren
	Date	Payee name
L	11/15/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.79	410 Terry Ave N,
		Seattle, WA 98019
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Yard sign stakes
		Check if Austin, TX, officeholder living expense Yard sign stakes
		Talu sign stakes
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
	11/20/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.63	410 Terry Ave N,
		Seattle, WA 98019
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Yard sign stakes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Yard sign stakes
		Talu sign stakes
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
I	expenditure to benefit C/OI	
\vdash		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex Legal Services	S		es/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed a	bove)	
4 Total manna Cabadula E1.		la EUED NAM		uction Guide explains how to complete tl		lete tills form.	1.	iles ID	/Ethios Commiss	oion Filoro)	
1	Total pages Schedule F1:	1						Filer ID	(Ethics Commiss	sion Filers)	
	Sch: 2/3 Rpt: 14/16	Carbajai ,	Veronica (Ms.)					00000030			
4	Date	5 Payee name	e								
	11/29/2023	Anedot									
6	Amount (\$)	7 Payee addr	7 Payee address; City; State; Zip Code								
\$140.70 1340 Poydras Street											
		Suite 1770									
		New Orlea	ns, LA 70112								
8	PURPOSE				(b) Description					
Ū	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outsi					l outside	e of Texas. Com	plete Schedule T.		
	EXPENDITURE	7.000011111	Check if Austin				n, TX, c	fficeholder living	j expense		
			Fees paid dur				uring	ring reporting period			
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Offi	ce sough	t		Office he	eld		
	Date	Payee name									
	11/13/2023	EPMP									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$2,000.00	1144 Vista de Oro									
	7-,000	Ste. A									
		El Paso, TX 79935									
	DUDDOGE				I a	.					
	PURPOSE OF		See Categories listed at the	top of this schedu	le) (b	Description Check if travel	l outside	of Tayas Com	nlete Schedule T		
EXPENDITURE		Tilling Expense				if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense					
			Printing								
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Offi	ce sough	İ		Office he	eld		
	Date	Payee name									
	11/24/2023	EPMP									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$3,001.11	1144 Vista de Oro									
	• •	Ste. A									
		El Paso, TX 79935									
	DUDDOCE										
	OE I		(,			Description Check if travel	l outside	e of Texas. Com	plete Schedule T.		
	EXPENDITURE	Printing E>	pense					fficeholder living			
						Printing					
	Complete ONLY if direct		ficeholder name	Offic	ce sough	t		Office he	eld		
	expenditure to benefit C/OI	Н									

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
dvertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 3/3 Rpt: 15/16	Carbajal , Veronica (Ms.) 00000030						
4	Date	5 Payee name						
	11/14/2023	Home Depot						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$4.91	11360 Rojas						
		El Paso, TX 79936						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Yard sign stakes Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Yard sign stakes						
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
H	Date	Payee name						
	11/16/2023	Idea Spreaders and Marketing						
L								
	Amount (\$)	Payee address; City; State; Zip Code						
	\$480.00	14337 Desert Wind Dr.						
		Horizon, TX 79928						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.						
EXPENDITORE		Check if Austin, TX, officeholder living expense Yard signs						
		Taru signs						
┡	Operation ONE V if dispert	Occasional Office health and a second of the						
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held						
┕								
	Date	Payee name						
	11/29/2023	Ramirez, Lorena						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$280.00	3253 Townsley St.						
		El Paso, TX 79904						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Salaries/Wages/Contract Labor						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Canvassing						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
L	experiorare to benefit C/OI							

TEXT ANNOT	ATION					
			Sch: 1/1 Rpt: 16/16			
FILER NAME Carbajal , Veronica (Ms.) Schedule Corrected Items			Filer ID (Ethics Commission Filers) 00000030			
Record Type	Tracking Info	Record Detail				
Report Info	Report	10000072				
Persent Info	Expenditure:	Ramirez, Lorena				