# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00000047	sion Filers)	2 Total pages file	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
NAME	Mrs.	Alejandra			Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	10/07/2024	
	Ale	Chávez		SUFFIX	10/01/2021	
	_					
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
MAILING	6305 Franklin Red Dr.					Т
ADDRESS					Receipt #	Amount
Change of Address	El Paso, TX 79912				Date Processed	
🖰					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Debbi		••••		
NAME	IVII 3.	DCBBI				
	NIO(ALANAE			OUEEN		
	NICKNAME	LAST Hester		SUFFIX		
		nester				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
ADDRESS	6102 Pinehurst Dr.					
(Residence or Business)						
	El Paso, TX 79912					
7 CAMPAICNI	ADEA CODE DUON	E NUMBER - F	VTENCION			
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION			
PHONE	(915) 252-5753					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after can	nnaign treasurer
			ы. П	L	appointment (office	
	July 15	8th day before 6	election	Exceeded modified	Final Report (Atta	ch C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/17/2024	TH	IROUGH	10/06/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	11/05/2024	l ПG	eneral	X Special		
				Δ' '		
11 OFFICE	OFFICE HELD (if any)	L		12 OFFICE SOUGHT	(if known)	
III OFFICE	OFFICE HELD (II ally)				ive District Distric	rt 1 Fl Paso
				City Representati	ive District Distric	X I LIT 030
		GO T	O PAGE 2			
I						

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 49

13 C / OH NAME	Chávez, Alejandra (N	irs.)	<b>14</b> Filer ID (	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 I 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	TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS (OTHER THA	N DI EDGES I DANS				
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00			
	(OTHER THAN I	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	<b>\$</b> 81,862.31			
EXPENDITURE TOTALS							
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 50,795.74			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 27,059.26			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00			
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		Mrs	Alejandra Chávez				
			Candidate or Officehole	der			
AFFIX NO	TARY STAMP / SEAL AB	DVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
		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

	3 of 49
18 FILER NAME 19 Filer ID	C (Ethics Commission Filers)
Chávez, Alejandra (Mrs.)	0047
20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	<b>\$</b> 77,855.00
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<b>\$</b> 4,007.31
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 50,795.74
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
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 CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	<b>\$</b>
	•

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/22 Rpt: 4/49	
2	FILER NAME Chávez, Alej	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 09/27/2024	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Acosta, Sylvia</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$100.00
_		El Paso, TX 79932				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 07/24/2024	Full name of contributor out-of-state PAC (ID#:_Aguilar, Richard  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	El Paso, TX 79912 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occa	pation 7 oob title (occ mondellons)	Employer (See Manacions	,		
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#:_ Alva, Concepcion Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/21/2024	Full name of contributor out-of-state PAC (ID#:_Alvarez, Sergio Contributor address; City; State; Zip Code El Paso, TX 79912			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#:_Anderson, Blake  Contributor address; City; State; Zip Code  El Paso, TX 79922			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/22 Rpt: 5/49	
2	FILER NAME Chávez, Alej	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 08/05/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$100.00
_		El Paso, TX 79912				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Arriola, Benjamin Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	El Paso, TX 79922 pation / Job title (See Instructions)	Employer (See Instructions	)		
	•	·				
	Date 08/01/2024	Full name of contributor out-of-state PAC (ID#:_ Assam, Isabel Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_Banks, Lee Ellen  Contributor address; City; State; Zip Code  El Paso, TX 79912	)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Bonner, Richard Contributor address; City; State; Zip Code El Paso, TX 79912			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/22 Rpt: 6/49	
2	FILER NAME Chávez, Alej	iandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 09/20/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$200.00
_		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/27/2024	Full name of contributor out-of-state PAC (ID#:_ Cardwell, Jim Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	El Paso, TX 79912 pation / Job title (See Instructions)	Employer (See Instructions	)		
		panon, cos uno (cos monasnono)		,		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Castillo, Silvia Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Chavez, Alfonso Contributor address; City; State; Zip Code El Paso, TX 79912	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:_ Chavez, Christ  Contributor address; City; State; Zip Code  El Paso, TX 79930			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/22 Rpt: 7/49	
2	FILER NAME Chávez, Alej	andra (Mrs.)		3	Filer ID (Ethics Commission 00000047	n Filers)
4	Date 08/06/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$500.00
_	Deinsinal	El Paso, TX 79912	2. Faralana (One hadrantica			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/21/2024	Full name of contributor out-of-state PAC (ID#: Chavez, Sergio Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
		El Paso, TX 79932				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/16/2024	Full name of contributor	)		Amount of Contribution (\$)	\$25.00
		New York, NY 10025				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 08/06/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	El Paso, TX 79936 pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/15/2024	Full name of contributor out-of-state PAC (ID#:_ Colquitt, Angelina Contributor address; City; State; Zip Code El Paso, TX 79922			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/22 Rpt: 8/49	
2	FILER NAME Chávez, Alej			3	Filer ID (Ethics Commission 00000047	n Filers)
4	Date 10/02/2024	5 Full name of contributor out-of-state PAC (ID#:_ Conroy, Cindy  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$250.00
_		El Paso, TX 79902				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#:_ Daniels, Amanda  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	El Paso, TX 79922 pation / Job title (See Instructions)	Employer (See Instructions	()		
		panent coo and (coo mendone)	p.oyo. (600 modacion	,		
	Date 08/05/2024	Full name of contributor out-of-state PAC (ID#:_ Daron Powell PLLC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Davalos, Rosalba  Contributor address; City; State; Zip Code  El Paso, TX 79912			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/13/2024	Full name of contributor out-of-state PAC (ID#:_ DeFrance, Billy Contributor address; City; State; Zip Code El Paso, TX 79902	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/22 Rpt: 9/49	
2	FILER NAME Chávez, Ale	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 09/17/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$300.00
_		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Dupree, John Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75238 pation / Job title (See Instructions)	Employer (See Instructions	)		
		,	, ,,			
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Escudero, Edward Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,500.00
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/17/2024	Full name of contributor out-of-state PAC (ID#:_ Escudero, Margarita  Contributor address; City; State; Zip Code  El Paso, TX 79902			Amount of Contribution (\$)	\$1,000.00
	Principal occu Domestic Er	pation / Job title (See Instructions) ngineer	Employer (See Instructions N/A	)		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_ Escudero, Margarita  Contributor address; City; State; Zip Code  El Paso, TX 79902			Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/22 Rpt: 10/49	
2	FILER NAME Chávez, Ale	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 09/20/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Fernandez, Francisco</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$40.00
_		El Paso, TX 79912				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 07/17/2024	Full name of contributor out-of-state PAC (ID#:_ Fernandez, Miguel  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / 300 title (See Instructions)	Employer (See instructions	,		
	Date 09/15/2024	Full name of contributor out-of-state PAC (ID#: Flores, Edward Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_Forsythe, Samuel  Contributor address; City; State; Zip Code  El Paso, TX 79903	)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:_ Francis, Frederick Contributor address; City; State; Zip Code  El Paso, TX 79901			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/22 Rpt: 11/49	
2	FILER NAME Chávez, Alej	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 08/16/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$2,500.00
_	Delicalis al access	El Paso, TX 79902	2 Farely (Carlot Arthur)			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (ID#:_Frank, Adam  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	El Paso, TX 79912 pation / Job title (See Instructions)	Employer (See Instructions			
	i ilicipai occu	pation 7 300 title (See Instructions)	Employer (See Instructions	,		
	Date 08/23/2024	Full name of contributor	)		Amount of Contribution (\$)	\$1,500.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:_ Gaddy, Lane Contributor address; City; State; Zip Code  El Paso, TX 79902			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/07/2024	Full name of contributor out-of-state PAC (ID#:_Galenski, Joe  Contributor address; City; State; Zip Code  El Paso, TX 79902			Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/22 Rpt: 12/49	
2	FILER NAME Chávez, Alej			3	Filer ID (Ethics Commission 00000047	n Filers)
4	Date 10/02/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
_		El Paso, TX 79902				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_ Godinez, Juan Jose Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Goldfarb, Allan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#:_ Hernandez, German  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:_ Hernandez, German  Contributor address; City; State; Zip Code  El Paso, TX 79902			Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/22 Rpt: 13/49	
2	FILER NAME Chávez, Ale	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 08/28/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$2,500.00
_		El Paso, TX 79912				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 08/16/2024	Full name of contributor out-of-state PAC (ID#:_ Houghton, Edward  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	El Paso, TX 79901 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occu	pation 7 300 title (See manuchons)	Employer (See instructions	,		
	Date 08/29/2024	Full name of contributor out-of-state PAC (ID#:_ Hughes, Bradley Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Hughes, Jeffrey Contributor address; City; State; Zip Code  El Paso, TX 79912	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#:_ Hunt, Joshua Contributor address; City; State; Zip Code El Paso, TX 79902	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/22 Rpt: 14/49	
2	FILER NAME Chávez, Alej	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 08/27/2024	5 Full name of contributor out-of-state PAC (ID#:_ Hunt, Woody  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$2,500.00
_	D: : 1	El Paso, TX 79913				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Joseph Moody Campaign Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions	)		
		,	, ,,			
	Date 09/14/2024	Full name of contributor out-of-state PAC (ID#:_ Kuchera, Aldrich Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#:_Laster, Nancy  Contributor address; City; State; Zip Code  El Paso, TX 79912			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/09/2024	Full name of contributor out-of-state PAC (ID#:_Longoria, Jesus Alfredo  Contributor address; City; State; Zip Code  El Paso, TX 79902			Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/22 Rpt: 15/49	
2	FILER NAME Chávez, Ale	iandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 08/23/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$1,000.00
_		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Lucatero, Javier  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dringing ago	Pleasanton, CA 51071 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See instructions	,		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Margo, Donald Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Martinez, Crystal  Contributor address; City; State; Zip Code  El Paso, TX 79936	)		Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ McCrory, Ryan Contributor address; City; State; Zip Code El Paso, TX 79922			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 13/22 Rpt: 16/49	
2	FILER NAME	AME :		3	Filer ID (Ethics Commission	n Filers)
	Chávez, Ale	jandra (Mrs.)			0000047	
4	Date 10/02/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 10/06/2024	Full name of contributor out-of-state PAC (ID#:_ McIntosh, Lillie	)		Amount of Contribution (\$)	\$250.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79912				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_Melendez, Susan  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_ Mitchell, Anne Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b>i)</b>		
	Date 08/18/2024	Full name of contributor out-of-state PAC (ID#: Morgan Lilly, Ann Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		El Paso, TX 79902				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 14/22 Rpt: 17/49	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Chávez, Ale	jandra (Mrs.)		L	00000047	
4	Date 08/28/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$150.00
		El Paso, TX 79902				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Π	Amount of Contribution (\$)	
	08/07/2024	Narvaez, Oscar Ricardo				\$500.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor	)	Г	Amount of Contribution (\$)	
	09/26/2024	O'Rourke, Amy			( )	\$500.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Г	Amount of Contribution (\$)	
	10/02/2024	Ordaz, Ellen				\$250.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Г	Amount of Contribution (\$)	
	08/28/2024	Ordaz, Raul				\$500.00
		Contributor address; City; State; Zip Code				
_		El Paso, TX 79912				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/22 Rpt: 18/49	
2	FILER NAME Chávez, Alej			3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 08/06/2024	5 Full name of contributor out-of-state PAC (ID#:_ Ortega, Antonio  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$300.00
_		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 08/07/2024	Full name of contributor out-of-state PAC (ID#:_ Ortega, Steve Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See instructions	,		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_ Osborn, David Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/05/2024	Full name of contributor out-of-state PAC (ID#:_ Overton, David Contributor address; City; State; Zip Code  Austin, TX 78723	)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Palacios, Raymond Contributor address; City; State; Zip Code El Paso, TX 79922	)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/22 Rpt: 19/49	
2	FILER NAME Chávez, Alej	iandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 08/29/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$2,600.00
_		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Pallares, Ebetual Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu	El Paso, TX 79912 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation 7 300 title (See Instructions)	Employer (See instructions	,		
	Date 09/21/2024	Full name of contributor out-of-state PAC (ID#:_ Perches, Salvador Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/31/2024	Full name of contributor out-of-state PAC (ID#:_ Ponzio, Audrey  Contributor address; City; State; Zip Code  El Paso, TX 78702	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Porras, Gary Paul Contributor address; City; State; Zip Code  El Paso, TX 79912			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 17/22 Rpt: 20/49	
2	FILER NAME Chávez, Alej	iandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 10/02/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$200.00
_		El Paso, TX 79932				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 09/06/2024	Full name of contributor out-of-state PAC (ID#:_Robison, JK  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions	)		
	о.ра. оооа	panon, cos uno (cos monasnon)				
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Rolon, Juan Carlos Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (ID#:_ Rubin, Jerry Contributor address; City; State; Zip Code  El Paso, TX 79912	)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/22/2024	Full name of contributor out-of-state PAC (ID#:_ Rubin, Jerry Contributor address; City; State; Zip Code  El Paso, TX 79912	)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/22 Rpt: 21/49	
2	FILER NAME Chávez, Alej	andra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 09/11/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$2,000.00
•	Dringing! goog	El Paso, TX 79912	O Employer (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	) 		
	Date 08/28/2024	Full name of contributor	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	El Paso, TX 79912 pation / Job title (See Instructions)	Employer (See Instructions	)		
	'	,				
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#:_ Santana, Rosa Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_Shauer, Janice  Contributor address; City; State; Zip Code  El Paso, TX 79912			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Shwartz, Douglad Contributor address; City; State; Zip Code  El Paso, TX 79922	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/22 Rpt: 22/49	
2	FILER NAME Chávez, Alej	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	on Filers)
4	Date 09/22/2024	5 Full name of contributor out-of-state PAC (ID#:_ Sommers, Tiffany  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
_		El Paso, TX 79912				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_Spier, Peter  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	El Paso, TX 79922 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Timoipai occa	pation / vos title (eee metactions)	Employer (Gee mondone)	,		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ Tawney, Andrea Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Las Cruces, NM 88011				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_ Tawney, Andrea Contributor address; City; State; Zip Code El Paso, NM 79912			Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/17/2024	Full name of contributor out-of-state PAC (ID#:_ Tomblin, Kelly Contributor address; City; State; Zip Code El Paso, TX 79912			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 20/22 Rpt: 23/49	
2	FILER NAME	ER NAME		3	Filer ID (Ethics Commission	on Filers)
	Chávez, Ale	jandra (Mrs.)			0000047	
4	Date 09/14/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$15.00
		El Paso, TX 79911				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor  ut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/28/2024	Troncoso, Linda C.				\$1,000.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/06/2024	Urrea, Angela Contributor address; City; State; Zip Code				\$250.00
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/22/2024	Urrea, Luis				\$250.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	08/06/2024	Urrea, Robert				\$250.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/22 Rpt: 24/49	
2	FILER NAME Chávez, Ale	jandra (Mrs.)		3	Filer ID (Ethics Commission 00000047	n Filers)
4	Date 08/30/2024	5 Full name of contributor out-of-state PAC (ID#:_ Urrea, Robert  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$750.00
_		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#:_ Venegas, Mary  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Anthony, NM 88021 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occu	pation 7 sob title (see instructions)	Employer (See Instructions	,		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#: Vick, Thomas Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_Villalobos, Jose  Contributor address; City; State; Zip Code  El Paso, TX 79912			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Westbrook, Sonia Contributor address; City; State; Zip Code  El Paso, TX 79912			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/22 Rpt: 25/49	
2	FILER NAME Chávez, Ale	jandra (Mrs.)		3	Filer ID (Ethics Commissio 00000047	n Filers)
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  Wilson, Joyce  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$150.00	
		El Paso, TX 79912				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  08/06/2024 Zavaleta, Gloria  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$100.00
		El Paso, TX 79912				
Principal occupation / Job title (See Instructions)  Employer (See Instructions)						
	Date 08/24/2024	Full name of contributor out-of-state PAC (ID#: Zientek, Gustavo Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Doral, FL 33178				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Zuloaga, Deborah Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu	El Paso, TX 79912 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	uction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 26/49						
2 FILER NAME Chávez, Ale	≘ ejandra (Mrs.)		3 Filer ID (Ethics Commission Filers) 00000047					
4 TOTAL OI	F UNITEMIZED IN-KIND POLITICAL CONTRIB	\$						
5 Date 07/23/2024	6 Full name of contributor out-of-state PAC (ID#: Morgan Lilly, Ann  7 Contributor address; City; State; Zip Code  El Paso, TX 79902	8 Amount of contribution (\$)   9 In-kind contribution description   \$811.88   Yard Signs						
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  -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 contributo	or's spouse (if any) (FOR JUDICIAL)					
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date 08/27/2024	Full name of contributor out-of-state PAC (ID#:  Morgan Lilly, Ann  Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$1,299.00 Banners and Yard Signs					
	El Paso, TX 79902		Check if travel outside of Texas. Complete Schedule T.					
Principal occ	supation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date Full name of contributor out-of-state PAC (ID#:		)	Amount of In-kind contribution contribution (\$) description \$1,396.43 Banners and Yard Signs					
	El Paso, TX 79902		Check if travel outside of Texas. Complete Schedule T.					
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)					
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	L	SCHEDULE A2
The Instruction Guide explains how to complete this	L Total pages Schedule A2: Sch: 2/2 Rpt: 27/49	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Chávez, Alejandra (Mrs.)		00000047
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	\$	
5 Date 08/06/2024 6 Full name of contributor ☐ out-of-state PAC (ID#:	) 8	3 Amount of contribution (\$) 9 In-kind contribution description \$500.00   Meal Donation
El Paso, TX 79912		Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-	
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (F	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)	1	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising 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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/22 Rpt: 28/49	Chávez, Alejandra (Mrs.) 00000047
4	Date	5 Payee name
	07/31/2024	Airport Printing
6	Amount (\$) \$443.89	7 Payee address; City; State; Zip Code  TX
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense door hangers
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/08/2024	Airport Printing
	Amount (\$) \$555.14	Payee address; City; State; Zip Code  TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Printing Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense door hangers
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/29/2024	Airport Printing
	Amount (\$) \$221.39	Payee address; City; State; Zip Code
		тх
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Printing Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense push cards
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

	Credit Card Payment	The Instruction Guide explains how to comp	plete thi	is form.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 2/22 Rpt: 29/49	Chávez, Alejandra (Mrs.)			00000047	
4	Date	5 Payee name		<u> </u>		
l	09/04/2024	Airport Printing				
6	Amount (\$)	7 Payee address; City; State; Zip Code	e			
l	\$7,269.00					
l						
		TX				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>b)</b> Desc	cription		
l	OF EXPENDITURE	Printing Expense		Check if travel outside	e of Texas. Com	plete Schedule T.
l	LAFLINDITORL			Check if Austin, TX, o	officeholder living	expense
l			mail	iers		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt .		Office he	old.
"	expenditure to benefit C/OI		IL		Office fie	au
┝	Data					
l	Date 10/01/2024	Payee name Airport Printing				
L			_			
l	Amount (\$)	Payee address; City; State; Zip Code	Э			
l	\$7,499.00					
		TV				
L		TX				
	PURPOSE OF	2 (	Desc	•	o of Toyon Com	plata Sahadula T
l	EXPENDITURE	Printing Expense		Check if travel outside Check if Austin, TX, o		
			ш mail			
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/OI	1				
Г	Date	Payee name				
	10/03/2024	All Print of El Paso				
Г	Amount (\$)	Payee address; City; State; Zip Code	е			
	\$1,212.40					
l		TX				
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	<b>b)</b> Desc	cription		
l	OF EXPENDITURE	Printing Expense		Check if travel outside		
l				Check if Austin, TX, on the control of the control	officeholder living	expense
			Dail	iici3		
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/OI				Cilico He	J. G.
H						

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:						
	Sch: 3/22 Rpt: 30/49	Chávez, Alejandra (Mrs.) 00000047					
4	Date	5 Payee name					
	10/04/2024	All Print of El Paso					
6	Amount (\$) \$714.45	7 Payee address; City; State; Zip Code					
		тх					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense large signs					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	10/06/2024	Anedot					
	Amount (\$) \$1,647.40	Payee address; City; State; Zip Code					
		TX					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  online contribution fees					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	08/16/2024	Carmona, Mario					
	Amount (\$) \$1,600.00	Payee address; City; State; Zip Code					
		TX					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canvassing					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	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: 4/22 Rpt: 31/49	Chávez, Alejandra (Mrs.) 00000047	
4	Date	5 Payee name	
	08/28/2024	Carmona, Mario	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$2,000.00		
		TX	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Canvassing	
		Canvassing	
_	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold	_
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	· 		_
	Date	Payee name	
	09/11/2024	Carmona, Mario	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00		
		TX	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Canvassing	
		Canvassing	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
	·		=
	Date	Payee name	
	09/26/2024	Carmona, Mario	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00		
		тх	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Canvassing	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	H	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Cı	Candidate/Officeholder/Politica redit Card Payment	al Committee Legal Services Salarie  The Instruction Guide explains how to		s/Contract Labor ete this form.	OTHER (enter a	category not listed above)
<b>1</b> Tot	tal pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
S	ch: 5/22 Rpt: 32/49	Chávez, Alejandra (Mrs.)			00000047	
<b>4</b> Da	te	5 Payee name				
08	/16/2024	Carmona, Mario				
6 Am	nount (\$) \$59.75	7 Payee address; City; State; Zip  TX	Code			
8	PURPOSE		(b)	Description		
	OF XPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		Check if travel outsid		
	mplete <u>ONLY</u> if direct penditure to benefit C/OI	Candidate/Officeholder name Office s H	ought		Office he	ld
Da	te	Payee name				
09	/26/2024	Castaneda, Oscar				
Am	nount (\$) \$735.00	Payee address; City; State; Zip	Code			
		TX				
E	PURPOSE OF XPENDITURE	(a) Category (See Categories listed at the top of this schedule) graphic deisgner	(b)	Description Check if travel outsid Check if Austin, TX, graphic designs		
	mplete <u>ONLY</u> if direct penditure to benefit C/OI	Candidate/Officeholder name Office s	ought		Office he	ld
Da	te	Payee name				
08	/14/2024	Castaneda, Oscar				
Am	s400.00	Payee address; City; State; Zip	Code			
		TX				
E	PURPOSE OF XPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Logo graphic design	(b)	Description Check if travel outsid Check if Austin, TX, second logo grap	officeholder living	
	mplete <u>ONLY</u> if direct penditure to benefit C/OI	Candidate/Officeholder name Office s	ought		Office he	ld

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

l	Credit Card Payment  The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
l	Sch: 6/22 Rpt: 33/49	Chávez, Alejandra (Mrs.)	0000047			
4	Date	5 Payee name		<b>'</b>		
	08/30/2024	Castaneda, Oscar				
6	Amount (\$) \$330.00	7 Payee address; City; State; Zip Co	ode			
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 graphic designs for campaign publicity		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held		
F	Date	Payee name				
	09/10/2024	Castaneda, Oscar				
	Amount (\$) \$810.00	Payee address; City; State; Zip Co	ode			
		TX				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense stickers		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held		
	Date 08/14/2024	Payee name City of El Paso				
	Amount (\$) \$250.00	Payee address; City; State; Zip Co 300 N. Campbell	ode			
		El Paso, TX 79901				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Registration Fee	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  City Political Registration Fees		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politice Credit Card Payment					OTHER (enter a	category not listed above)				
1	Total pages Schedule F1:	2 FILER NAM	1E				3	Filer ID	(Ethics Commission F	-ilers)
	Sch: 7/22 Rpt: 34/49	Chávez, A	lejandra (Mrs.)					00000047		
4	Date	5 Payee name	е							
	08/20/2024	Constant (	Contact							
6	Amount (\$) \$37.31	7 Payee addr	ess; City;	State; Zip C	ode					
8	PURPOSE	(a) Category (	See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertisin					, TX	ide of Texas. Com , officeholder livinç S		
9	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office so	ught			Office he	eld	
	Date	Payee nam	e							
	08/26/2024	Drury, Nice	ole							
	Amount (\$) \$340.00	Payee addr	ess; City;	State; Zip C	ode					
L	DUDDOCE				1/63					
	PURPOSE OF EXPENDITURE	1	See Categories listed at the /ages/Contract Lab		(a)	<b>=</b>		ide of Texas. Com , officeholder livinç		
	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office so	ught			Office he	eld	
	Date	Payee nam	e							
	09/04/2024	Drury, Nice	ole							
	Amount (\$) \$340.00	Payee addr	ess; City;	State; Zip C	ode					
		TX								
	PURPOSE OF EXPENDITURE	1	See Categories listed at the /ages/Contract Lab		(b)	<b>=</b>		ide of Texas. Com , officeholder livinç		
	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office so	ught			Office he	eld	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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
OTHER (on the partners) and instead above)

	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: 8/22 Rpt: 35/49	Chávez, Alejandra (Mrs.) 00000047
4	Date	5 Payee name
	09/19/2024	Drury, Nicole
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$289.00	
		TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  Canvassing
		Carivassing
_	Compulate ONLY if direct	Condidate/Office helder name Office accords
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	09/19/2024	Drury, Nicole
	Amount (\$)	Payee address; City; State; Zip Code
	\$340.00	
		TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Conversing
		Canvassing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	D :	
	Date	Payee name
	10/02/2024	Drury, Nicole
	Amount (\$)	Payee address; City; State; Zip Code
	\$340.00	
		TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Canvassing
		Carivassing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

l	Credit Card Payment  The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
l	Sch: 9/22 Rpt: 36/49	Chávez, Alejandra (Mrs.)		0000047	
4	Date	5 Payee name			
	08/08/2024	El Camino 18, LLC			
6	Amount (\$) \$1,800.00	7 Payee address; City; State; Zip Co	ode		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign Consultant	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	ught	Office held	
	Date	Payee name			
	08/20/2024	El Camino 18, LLC			
	Amount (\$) \$1,800.00	Payee address; City; State; Zip Co	ode		
		TX			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign consultant	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held	
Г	Date	Payee name			
	09/16/2024	El Paso Mail & Print			
	Amount (\$) \$649.50	Payee address; City; State; Zip Co	ode		
		TX			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  door hangers	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 Salaries/Wages/Contract Labor

l	Credit Card Payment	The Instruction Guide explains how to co	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
l	Sch: 10/22 Rpt: 37/49	Chávez, Alejandra (Mrs.)		0000047
4	Date	5 Payee name		
	09/06/2024	El Paso Mail & Print		
6	Amount (\$) \$649.50	7 Payee address; City; State; Zip Co	ode	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense door hangers
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	ught	Office held
	Date	Payee name		
	09/18/2024	El Paso Mail & Print		
	Amount (\$) \$866.00	Payee address; City; State; Zip Co	ode	
		TX		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense door hangers
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held
	Date 10/04/2024	Payee name El Paso Matters		
	Amount (\$) \$500.00	Payee address; City; State; Zip Co	ode	
		TX		
	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 digital advertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this	s form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 11/22 Rpt: 38/49	Chávez, Alejandra (Mrs.)	00000047
4	Date	5 Payee name	
	07/31/2024	Evite, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$73.53		
		TX	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	ription
	OF EXPENDITURE		neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	I — I —	neck if Austin, TX, officeholder living expense
		Digit	al Invite
Ļ	0 1: 0.11.7.7.1.		000
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
_	·		
	Date	Payee name	
	08/08/2024	Ghostlight Creative LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,263.74		
		TX	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	•
	OF EXPENDITURE	Website development	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
		, , , , , , , , , , , , , , , , , , ,	al Marketing
		Jigit	an marketing
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	08/08/2024	Ghostlight Creative LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$840.00	- Layou and 1950, 1979,	
		TX	
	PURPOSE		rintion
	OF		neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		neck if Austin, TX, officeholder living expense
		logo	design
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientale to beliefft C/OI		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1: Sch: 12/22 Rpt: 39/49	2 FILER NAME Chávez, Alejandra (Mrs.)	3 Filer ID (Ethics Commission Filers) 00000047
4	Date 08/08/2024	5 Payee name Ghostlight Creative LLC	
	Amount (\$) \$480.00	7 Payee address; City; State; Zip Code  TX	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) graphic design	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  graphic design for door hangers
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 08/08/2024	Payee name Ghostlight Creative LLC	
	Amount (\$) \$265.87	Payee address; City; State; Zip Code	
	PURPOSE OF EXPENDITURE	TX  (a) Category (See Categories listed at the top of this schedule) sales tax for work done  (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense sales tax for graphic design and website development
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 09/03/2024	Payee name Ghostlight Creative LLC	
	Amount (\$) \$53.94	Payee address; City; State; Zip Code	
		TX	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense car magnets
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

#### 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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials E Legal Services  The Instruction Gui	xpense		pens ages	se s/Contract Labor		Travel Out of Dis OTHER (enter a	trict category not listed	above)
1	Total pages Schedule F1:	2 FILER NAM	E					3	Filer ID	(Ethics Commi	ssion Filers)
	Sch: 13/22 Rpt: 40/49		lejandra (Mrs.)						00000047		
4	Date	5 Payee name	е								
	09/12/2024	Ghostlight	Creative LLC								
6	Amount (\$)	7 Payee addr	ess; City;	State;	Zip Coc	de					
	\$411.35										
		TX									
8	PURPOSE	(a) Category «			1	(h)	Description				
ľ	OF	Advertising	See Categories listed at the	top of this sched	dule)	(~)	_	outsi	de of Texas. Com	olete Schedule T.	
	EXPENDITURE	/ tavertioning	LAPONIC				Check if Austin,	, TX,	officeholder living	expense	
							business card	ds			
9	Complete ONLY if direct		ficeholder name	Of	ffice soug	ght			Office he	eld	
	expenditure to benefit C/OI	H									
F	Date	Payee name	<del></del>								
	08/08/2024	l ´	Creative LLC								
Н	Amount (\$)	Payee addr	ess; City;	State:	Zip Cod	de					
	\$91.71		, ,,	,	·						
	***										
		l <sub>TX</sub>									
L					1.						
	PURPOSE OF		See Categories listed at the	top of this sched	dule)	(b)	Description	outoi.	do of Toyon Com	alata Cabadula T	
	EXPENDITURE	Printing Ex	pense				<b>=</b>		de of Texas. Comp officeholder living		
							banner		<b>.</b>		
Н	Complete ONLY if direct	Candidate/Of	ficeholder name	Of	ffice soug	ht			Office he	eld	
	expenditure to benefit C/O	Н									
F	Date	Payee name									
	08/07/2024	Harland Cl									
	Amount (\$)			Ctoto	Zin Cos	40					
	\$33.50	Payee addr	ess; City;	State,	Zip Cod	Je					
	φ33.50										
		TX									
	PURPOSE OF		See Categories listed at the	top of this sched	dule)	(b)	Description				
	EXPENDITURE	Printing Ex	pense				_		de of Texas. Comp		
							bank checks	, ΙΧ,	officeholder living	expense	
							DUIN CHECKS				
$\vdash$	Complete ONLY if direct	Candidate/Of	ficeholder name	Of.	ffice soug	ıht			Office he	ıld	
	expenditure to benefit C/O		ncentiuei Haitle	Oi	nice soug	jiil			Office He	au	
$\vdash$											
L						_					
$\Box$	rme provided by Tayas E	thice Commice	100 1444	MI Athice et	ata ty uc	-			,	Varcian V// 1	0.4379

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense 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	Il 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: 14/22 Rpt: 41/49	Chávez, Alejandra (Mrs.) 00000047
4	Date	5 Payee name
	09/30/2024	Los Jarrones
6	Amount (\$) \$36.23	7 Payee address; City; State; Zip Code
L		TX
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Cake
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/30/2024	Lowes
	Amount (\$) \$32.45	Payee address; City; State; Zip Code
	DUDDOG	TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  zip ties for banners  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  zip ties
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/14/2024	Meza, Jovany
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code
		тх
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Data Analyst
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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: 15/22 Rpt: 42/49	Chávez, Alejandra (Mrs.) 00000047
4	Date	5 Payee name
	09/08/2024	Meza, Jovany
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	
		TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  Data analyst
		Data analyst
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	<u> </u>
	Date	Payee name
	09/16/2024	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.76	
		TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
		Check if Austin, TX, officeholder living expense
		letter printed
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	B
	Date 09/06/2024	Payee name Outreach Circle Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	
		TX
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  text messaging
		text messaging
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/22 Rpt: 43/49	Chávez, Alejandra (Mrs.) 00000047
4	Date	5 Payee name
	09/16/2024	Outreach Circle Inc.
6	Amount (\$) \$577.24	7 Payee address; City; State; Zip Code  TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  text messaging
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/28/2024	Perea, Berenice
	Amount (\$) \$200.00	Payee address; City; State; Zip Code
		TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense promotional product
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 09/15/2024	Payee name Perea, Berenice
	Amount (\$) \$80.00	Payee address; City; State; Zip Code
		TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense promotional product
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/22 Rpt: 44/49	Chávez, Alejandra (Mrs.) 00000047
4	Date	5 Payee name
l	10/01/2024	Perea, Berenice
6	Amount (\$) \$340.00	7 Payee address; City; State; Zip Code  TX
Ļ	DUDD 0.05	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense promotional product
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
l	08/16/2024	Regency Printing
	Amount (\$) \$90.00	Payee address; City; State; Zip Code
		TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Printing Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense business cards
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	08/19/2024	Rodirguez, Armando
	Amount (\$) \$68.00	Payee address; City; State; Zip Code
		TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Canvassing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

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/Political Credit Card Payment	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: 18/22 Rpt: 45/49	Chávez, Alejandra (Mrs.) 00000047	
4 Date	5 Payee name	
08/19/2024	Rodriguez, Armando	
6 Amount (\$) \$270.63	7 Payee address; City; State; Zip Code  TX	
OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense photography	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
07/25/2024	Sales Texas Democratic	
Amount (\$) \$650.00	Payee address; City; State; Zip Code	
	тх	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  VAN software purchase  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Purchase for MiniVan software to obtain voter information.	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/01/2024	Sams Club	
Amount (\$) \$32.02	Payee address; City; State; Zip Code	
	TX	
OF	(a) Category (See Categories listed at the top of this schedule)  supplies for canvassing  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense pens, markers for canvassing	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

#### 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

l	Credit Cara r ayment	The Instruction Guide explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 19/22 Rpt: 46/49	Chávez, Alejandra (Mrs.)		00000047
4	Date	5 Payee name		•
	08/20/2024	Svarzbein, Peter		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$34.64			
		тх		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	) Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE			Check if Austin, TX, officeholder living expense
				balloons
9	Complete ONII V if direct	Condidate/Officeholder sees		• Office held
ľ	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ignt	t Office held
┝	Data			
	Date 10/04/2024	Payee name The Podium		
L				
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$950.11			
		TX		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	) Description
	EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				fundraiser
Г	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	t Office held
	expenditure to benefit C/OI	1		
Г	Date	Payee name		
	09/27/2024	Torres, Ivan		
Г	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$57.02			
		тх		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	) Description
	OF EXPENDITURE	home depot reimbursement		Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE			Check if Austin, TX, officeholder living expense
				material for hanging banners
L	Complete ONLY if direct	Candidate/Officeholder name Office sou	abt	t Office held
	expenditure to benefit C/OI		yııı	Conice neiu
$\vdash$				

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

l	Credit Card Payment	The Instruction Guide explains how to co	omple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
l	Sch: 20/22 Rpt: 47/49	Chávez, Alejandra (Mrs.)		0000047
4	Date	5 Payee name		
	08/21/2024	Tovar Printing		
6	Amount (\$) \$59.62	7 Payee address; City; State; Zip Co	ode	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense posters
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	ught	Office held
	Date	Payee name		
	08/21/2024	Tovar Printing		
	Amount (\$) \$82.27	Payee address; City; State; Zip Co	ode	
		тх		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense thank you cards
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held
Г	Date	Payee name		
	09/12/2024	Townquare Media		
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Co	ode	
		TX		
	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 digital marketing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/22 Rpt: 48/49	Chávez, Alejandra (Mrs.)		0000047
4	Date	5 Payee name		
	09/26/2024	USPS		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$73.00			
		TX		
8	PURPOSE	(a) Category (a. a	(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) postage and mailing	(~)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	pootage and maining		Check if Austin, TX, officeholder living expense
				postage stamps
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	10/03/2024	Walmart		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$19.88			
		TX		
	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule)  Event Expense	(D)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense
				promotional product
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	08/30/2024	West Star Bank		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$2.00	425 Redd Rd.		
		El Paso, TX 79912		
	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking	(D)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking		Check if Austin, TX, officeholder living expense
				Monthly Service Fee
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		

#### 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

	Credit Card Payment	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 22/22 Rpt: 49/49	Chávez, Alejandra (Mrs.)		00000047	
4	Date	5 Payee name			
	09/30/2024	West Star Bank			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$2.50	425 Redd Rd.			
		El Paso, TX 79912			
8	PURPOSE				
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if tra	vel outs	ide of Texas. Com	plete Schedule T.
l	EXPENDITURE	/ tooodinang/Dantang		, officeholder living	
l		Monthly Se	ervice	Fees	
l					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O	4			
	Date	Payee name			
l	08/08/2024	West Texas Chophouse LLC			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$450.00				
l		TX			
⊢	PURPOSE				
	OF	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if tra	vel outs	ide of Texas. Com	plete Schedule T.
l	EXPENDITURE	Event Expense		, officeholder living	
l		campaign	kickot	ff	
l					
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
expenditure to benefit C/OH					
Г					