CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Image: Constraint of the second seco						
OFFICEHOLDER NAME Mrs. Deanna Date Received ELECTRONICALLY FILED NICKNAME LAST Maldonado-Rocha 10/08/2024 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; 10700 Ira Way ZIP CODE Date Hand-delivered or Date Postmarked Change of Address EI Paso, TX 79935 EI Paso, TX 79935 Date Processed 5 CAMPAIGN NAME MS / MRS / MR FIRST MI NICKNAME LAST Klaes SUFFIX Date Imaged 6 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); Residence or Business) APT / SUITE #; CITY; STATE; ZIP CO						
NAME Date Received NICKNAME LAST NICKNAME LAST SUFFIX 10/08/2024 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; 10700 Ira Way ZIP CODE Date Hand-delivered or Date Postmarked Change of Address EI Paso, TX 79935 Date Processed Date Processed Date Imaged MS / MRS / MR FIRST MI NRS / MRS / MR FIRST MI NAME NICKNAME LAST SUFFIX NICKNAME LAST NAME SUFFIX SUFFIX 6 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); ADDRESS APT / SUITE #; CITY; STATE; (residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;						
Image: NICKNAME LAST SUFFIX 10/08/2024 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; 10700 Ira Way ZIP CODE Date Hand-delivered or Date Postmarked Image: Image of Address Image of Address EI Paso, TX 79935 Image of Address EI Paso, TX 79935 Image: Image of Address EI Paso, TX 79935 Image of Address Image of Address Image of Address 5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Image of Address 6 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CO 8 00 Hopewell BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CO						
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4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; 10700 Ira Way Date Hand-delivered or Date Postmarked ^{Change of Address} ^{Change of Address} EI Paso, TX 79935 Date Processed ^{Change of Address} ^{Change of Address} ^{MS / MRS / MR ^{FIRST} ^{MI} ^S ^{CAMPAIGN} ^{MS / MRS / MR ^{FIRST} ^{MI} ^{NICKNAME} ^{MS / MRS / MR ^{FIRST} ^{MI} ^S ^{CAMPAIGN} ^{MRS / MRS / MR ^{FIRST} ^{MI} ^{MRS / MRE ^{MS / MRS / MR ^{FIRST} ^{MI} ^{MRS / MRE ^{MRS / MRE ^{LAST ^{SUFFIX ^{MRS / MRE ^{MRS / MRE ^{LAST ^{SUFFIX ^{SS / MRE ^{MRS / MRE ^{LAST ^{SUFFIX ^{SS / MRE ^{STREET ADDRESS (NO PO}}}}}}}}}}}}}}}}}}}}						
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MAILING ADDRESS ID/00 Ifa Way Receipt # Amount Change of Address EI Paso, TX 79935 Date Processed 5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX NICKNAME LAST SUFFIX 6 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CO 8300 Hopewell (Residence or Business) STATE; ZIP CO						
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Change of Address El Paso, TX 79935 Date Processed Date Imaged S CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Mrs. Christina NICKNAME LAST Klaes SUFFIX Klaes STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CO STATE; ZIP CO STATE; STATE; ZIP CO STATE; ZIP						
Image: Date Processed Date Processed Date Imaged 5 CAMPAIGN TREASURER NAME Mrs. Christina Mickname LAST Klaes 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) 8 STREET ADDRESS (NO PO BOX PLEASE); Residence or Business)						
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5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Mrs. Christina NICKNAME LAST Klaes SUFFIX SUFFIX Rason 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); 8300 Hopewell APT / SUITE #; CITY; STATE; ZIP CO						
TREASURER NAME Mrs. Christina NICKNAME LAST Klaes SUFFIX SUFFIX Raes 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); 8300 Hopewell APT / SUITE #; CITY; STATE; ZIP CO						
TREASURER NAME Mrs. Christina NICKNAME LAST Klaes SUFFIX SUFFIX Raes 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); 8300 Hopewell APT / SUITE #; CITY; STATE; ZIP CO						
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TREASURER 8300 Hopewell (Residence or Business) 6						
TREASURER ADDRESS (Residence or Business)						
ADDRESS (Residence or Business)	DE					
El Paso, TX 79925						
7 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION						
TREASURER (915) 269-8058						
PHONE (913) 203-8038						
8 REPORT						
January 15 X 30th day before election Runoff I5th day after campaign treasurer appointment (officeholder only)						
July 15 Sth day before election Exceeded modified Final Report (Attach C/OH-FR)						
9 PERIOD Month Day Year Month Day Year						
COVERED 07/01/2024 THROUGH 09/26/2024						
10 ELECTION DATE ELECTION TYPE						
Month Day Year Primary Runoff Other						
11/05/2024 Special						
11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)						
City Representative Place El Paso District Distr	ct 3					
El Paso						
GO TO PAGE 2						
Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.d37						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 9

T

13 C / OH NAME	Maldonado-Rocha, D)eanna (Mrs.)		14 Filer ID	(Ethics Com	mission Filers)
				00000046		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures I	accepted or political expendit may have been made without quired to report this informatic	the candidate's or offi	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	Ξ			
	GENERAL	COMMITTEE ADDF	RESS			
	SPECIFIC					
		COMMITTEE CAMP	PAIGN TREASURER NAME			
		COMMITTEE CAMP	PAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS			NTRIBUTIONS (OTHER THA CONTRIBUTIONS MADE ELE		s, \$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS, C	I S DR GUARANTEES OF LOAN	S)	\$	8,600.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IIZED POLITICAL EX	PENDITURES		\$	0.00
	4. TOTAL POLITIC		3		\$	5,971.41
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		S MAINTAINED AS OF THE I	LAST DAY OF THE	\$	14,100.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIE OF THE REPOR		L OUTSTANDING LOANS AS	S OF THE LAST DAY	\$	10,000.00
17 AFFIDAVIT	-					
		tr	swear, or affirm, under penal rue and correct and includes a inder Title 15, Election Code.	ty of perjury, that the a all information required	ccompanying I to be reporte	report is d by me
			Mrs. Dea	unna Maldonado-Ro	cha	
		-		of Candidate or Officeh		<u> </u>
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 n	ny hand and seal of office.			
Signature of offi	cer administering	Printed name o	f officer administering	Title of offic	er administer	ng oath
Forms provided by Te	xas Ethics Commission	n www.e	thics.state.tx.us		Version V4	.1.0.d378aba(

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 9 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00000046 Maldonado-Rocha, Deanna (Mrs.) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 8,600.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. X SCHEDULE E: LOANS \$ 12,000.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5,911.41 \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ Х SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 60.00 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Ins	struction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/9	
2 FILER N	AME	3 Filer ID (Ethics Commission File	ers)	
Maldona	ado-Rocha, Deanna (Mrs.)		00000046	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/23/20	24 Edward , Escudero		\$1,0	000.00
	 6 Contributor address; City; State; Zip Code 34 Goodwin 			
	El Paso, TX 79902			
8 Principal CEO	occupation / Job title (See Instructions)	9 Employer (See Instructions High Desert Capital	<u></u>	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/24/20			\$2,5	500.00
	Contributor address; City; State; Zip Code 601 S Mesa			
	El Paso, TX 79901			
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	l;)	
CEO		Weststar Bank		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/23/20			\$2,5	500.00
	Contributor address; City; State; Zip Code 601 N Mesa			
	El Paso, TX 79901			
	occupation / Job title (See Instructions)	Employer (See Instructions	;)	
	man of the Board of Directors	Hunt Companies	1	
Date 09/23/20	Jobe, Stanley)	Amount of Contribution (\$) \$1,0	000.00
	Contributor address; City; State; Zip Code 1150 Southview			
	El Paso, TX 79928			
· ·	occupation / Job title (See Instructions) g Partner	Employer (See Instructions Jobe Materials	;) 	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/06/20	024 Klaes, Christina Contributor address; City; State; Zip Code 8708 Hopewell	\$2	200.00	
	El Paso, TX 79925			
-	occupation / Job title (See Instructions)	Employer (See Instructions	;)	
Retired				

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	The Instruc	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/9		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Rocha, Deanna (Mrs.)		00000046	,	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/20/2024	Martinez, Erin				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		2110 E Yandell				
		El Paso, TX 79903				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	attorney		Martinez & Martinez LL	С		
F	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	09/06/2024	Ortiz-Borge, Deborah				\$200.00
		Contributor address; City; State; Zip Code		1		
		1222 Ruby Ridge Rd				
		Buda, TX 78610				
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	09/21/2024	Rocha, Luis			/call of containation (+)	\$200.00
	Contributor address; City; State; Zip Code					+_00.00
		3013 Brady Pl				
		Solo Brady I I				
		El Paso, TX 79935				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	retired					
⊢						
1						
1						

The Instruction Guide explains how to complete this form. 1 Total pages Schedule E: Sch: 1/1 Rpt: 6/9 2 FILER NAME Maldonado-Rocha, Deanna (Mrs.) 3 Filer ID (Ethics Commission Filers) 00000046 4 TOTAL OF UNITEMIZED LOANS \$ 5 Date of Ioan (Mrs.) 7 Name of lender Maldonado-Rocha, Deanna 9 Loan Amount (\$) 9 Loan Amount (\$) 9 Loan Amount (\$) 12 Principal occupation / Job title (See Instructions) 9 Loan Amount (\$) 11 Maturity Date 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 11 Maturity Date 14 Description of Collateral INFORMATION 17 Name of guarantor 19 Amount Guaranteed (\$) 13 Guarantor address; INFORMATION 17 Name of guarantor 19 Amount Guaranteed (\$) 20 Principal occupation 21 Employer (See Instructions) 12 Employer (See Instructions)
Maldonado-Rocha, Deanna (Mrs.) 0000046 4 TOTAL OF UNITEMIZED LOANS \$ 5 Date of Ioan 08/02/2024 7 Name of lender Maldonado-Rocha, Deanna out-of-state PAC (ID#:) 9 Loan Amount (\$) \$12,000.00 6 Is lender a financial institution? No 8 Lender address; 10700 Ira Way City; State; Zip Code 10 Interest Rate 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 11 Maturity Date 14 Description of Collateral X If Check if personal funds were deposited into political account X (See Instructions) 16 GUARANTOR INFORMATION 17 Name of guarantor State; Zip Code 19 Amount Guaranteed (\$) X not applicable 18 Guarantor address; City; State; Zip Code 19 Amount Guaranteed (\$)
TOTAL OF UNITEMIZED LOANS \$ 5 Date of loan 08/02/2024 7 Name of lender Maldonado-Rocha, Deanna out-of-state PAC (ID#:) 9 Loan Amount (\$) \$12,000.00 6 Is lender a financial institution? No 8 Lender address; 10700 Ira Way City; 10700 Ira Way State; 10700 Ira Way Zip Code 10 Interest Rate 11 Maturity Date EI Paso, TX 79935 13 Employer (See Instructions) 11 Maturity Date 14 Description of Collateral X None 15 Check if personal funds were deposited into political account (See Instructions) (See Instructions) 16 GUARANTOR INFORMATION X not applicable 17 Name of guarantor 19 Amount Guaranteed (\$)
08/02/2024 Maldonado-Rocha, Deanna \$12,000.00 6 Is lender a financial institution? 8 Lender address; City; State; Zip Code 10 Interest Rate 10 Interest Rate 11 Maturity Date 11 Maturity Date 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 14 14 Description of Collateral IS Check if personal funds were deposited into political account (See Instructions) 16 GUARANTOR INFORMATION 17 Name of guarantor Is Reploced 19 18 Guarantor address; City; State; Zip Code State; Zip Code 19 Amount Guaranteed (\$)
financial institution? No 10700 Ira Way 11 Maturity Date 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 13 Employer (See Instructions) 14 Description of Collateral X None 15 Check if personal funds were deposited into political account X None (See Instructions) 16 GUARANTOR INFORMATION 17 Name of guarantor 17 Name of guarantor 19 Amount Guaranteed (\$) 18 Guarantor address; City; State; Zip Code 2ip Code 14 Description of Collateral (\$)
El Paso, TX 79935 12 Principal occupation / Job title (See Instructions) 14 Description of Collateral X None 15 Check if personal funds were deposited into political account X None 16 GUARANTOR INFORMATION 17 Name of guarantor 18 Guarantor address; City; State; Zip Code
14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) 16 GUARANTOR INFORMATION 17 Name of guarantor 18 Guarantor address; City; State; Zip Code
X None X (See Instructions) 16 GUARANTOR INFORMATION 17 Name of guarantor 19 Amount Guaranteed (\$) X not applicable 18 Guarantor address; City; State; Zip Code 2ip Code
INFORMATION Image: Not applicable Image: Not applicable<
20 Principal occupation 21 Employer (See Instructions)
20 Principal occupation 21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex mittee Legal Services The Instruction Guid		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related	
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 1/2 Rpt: 7/9		Maldonado-Rocha, Deanna (Mrs.)					00000046		
4	Date 09/02/2024		Payee name AFL-CIO								
6	Amount (\$) \$40.00		Payee address; City; P.O. Box 971365 El Paso, TX 79997	State;	Zip Co	de					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Labor Day Breakfast	top of this sch	edule)			, TX,	de of Texas. Com officeholder living CIO to eat a	expense	preakfast.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name								
	09/04/2024		Campaign Verify								
	Amount (\$) \$95.00		Payee address; City; 1215 31st Street NW PO Box 3554 Washington DC, DC 20007	State;	; Zip Co	de					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Credit Card Payment	top of this sch	edule)			, TX,	de of Texas. Com officeholder living umpaign wel	expense	ice.
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght			Office he	eld	
	Date		Payee name								
	09/01/2024		Cognent								
	Amount (\$) \$275.00		Payee address; City; PO BOX 536421	State;	Zip Co	de					
			Orlando, FL 32853								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Credit Card Payment	top of this sch	edule)			, тх, and		expense e and standar	d design
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office he	eld	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials Expense Printing Ex	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District xpegs/Contract Labor Travel Out of District
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 8/9	Maldonado-Rocha, Deanna (Mrs.)	00000046
4 Date		
4 Date 08/29/2024	5 Payee name Hernandez, Chris	
6 Amount (\$) \$2,573.25	 Payee address; City; State; Zip Co 711 N Copia El Paso, TX 79903)de
8 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 Fee to purchase text messaging service and access to Bancuet (voter address and phone number)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held
Date	Payee name	
09/10/2024	Scorpion Sales	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$2,928.16	1501 Wyoming Ave El Paso, TX 79902	
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 This money was paid to a printing company for political t-shirts and yard signs with stakes.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reinbursement verhead/Rental Expense Expense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 1/1 Rpt: 9/9	 Piler NAME Maldonado-Rocha, Deanna (Mrs.) 		3 Filer ID (Ethics Commission Filers) 00000046		
	Date 09/05/2024	5 Payee name maldonado-rocha, deanna				
6	Amount (\$) \$60.00 Reimbursement from	7 Payee address; City; State; Zip C 10700 Ira Way	ode			
	political contributions intended	el paso, TX 79935				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description [[Attended Rosed	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ale Neighborhood Association fundraiser		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		