CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete	this form.	Filer ID (Ethics Commi		2 Total pages	filed: 25
3 CANDIDATE / OFFICEHOLDER		RST ynthia		MI	OFFICE	USE ONLY
NAME	J.	ymana			Date Received ELECTRONIC	CALLY FILED
	NICKNAME LA	 AST		SUFFIX	12/10/2024	
		oyar Trejo		301111		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SI	UITE#; CITY	;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 972864				Receipt #	Amount
Change of Address	El Paso, TX 79997				Date Processed	
					Date Flocesseu	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIF	RST		MI	-	
TREASURER NAME	Ma	argarita				
	NICKNAME LA	 \ST		SUFFIX		
		arcia		33.1.		
6 CAMPAIGN	CTREET ADDRESS (NO DO DO	Y DI FACEN	A.D.	T / CLUTE #: CITY	/ı C1	ATE; ZIP CODE
TREASURER ADDRESS	STREET ADDRESS (NO PO BO 4815 Salem	ox Please),	AP	Γ / SUITE #;	r, 51	ATE; ZIP CODE
(Residence or Business)						
	El Paso, TX 79924					
7 CAMPAIGN	AREA CODE PHONE N	NUMBER EX	(TENSION			
TREASURER PHONE	(915) 780-3587					
8 REPORT TYPE	January 15	30th day before e	election X	Runoff	15th day after c	ampaign treasurer
		our day before a		ranon	appointment (of	ficeholder only)
	July 15	8th day before ele	ection	Exceeded modified reporting limit	Final Report (At	tach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	10/27/2024	THE	ROUGH	12/04/20)24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year 12/14/2024	Prir	mary	X Runoff	Other	
	12/14/2024	Ger	neral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	IT (if known)	
				City Represent	ative Place El Pa	so District District 4
	1			1		
	GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 25

13 C / OH NAME	Boyar Trejo, Cynthia			14 Filer ID 0000045	(Ethics Com	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	oolitical contributions accep These expenditures may h officeholders are required	ave been made without ti	he candidate's or of	ficeholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN	I TREASURER NAME			
		COMMITTEE CAMPAIGN	I TREASURER ADDRES	S		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRI ES OF LOANS, OR CONT			S, \$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GU	JARANTEES OF LOANS)	\$	23,080.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPEND	ITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES			\$	16,901.47
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAI RIOD	NTAINED AS OF THE LA	AST DAY OF THE	\$	12,470.98
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUT TING PERIOD	STANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		true ar	r, or affirm, under penalty Id correct and includes all Title 15, Election Code.			
			Cynt	thia Boyar Trejo		
			Signature of	Candidate or Office	holder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subso	cribed before me, by the s	aid ertify which, witness my ha	nd and seal of office	, this the		day
	cer administering			Title of offi	icer administer	ing oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 25
18 FILER I	NAME Trejo, Cynthia	19 Filer ID 0000045	(Ethics Commiss	ion Filers)
	ULE SUBTOTALS OF SCHEDULE		SUBTOTAL	AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	23,080.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE E: LOANS		\$	0.00
5. 🔾	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	;	\$	16,901.47
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS O	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	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: 1/6 Rpt: 4/25	
2	FILER NAME Boyar Trejo,			3	Filer ID (Ethics Commission 00000045	on Filers)
4	Date 11/26/2024	6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Arriola, Benjamin (Mr.) 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			
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See instructions	,		
	Date 11/27/2024	Full name of contributor out-of-state PAC (ID#:_ Arriola, Benjamin (Mr.) 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 11/20/2024	Full name of contributor out-of-state PAC (ID#:_ Betts, Cordia (Mrs.) Contributor address; City; State; Zip Code El Paso, TX 79934			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_ Douglas Anderson, Blake 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	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/25	
2	FILER NAME Boyar Trejo,			3	Filer ID (Ethics Commission 00000045	on Filers)
4	Date 11/20/2024	6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	El Paso, TX 79902 upation / Job title (See Instructions)	9 Employer (See Instructions)		
_	Businessma		Unknown	,		
	Date Full name of contributor out-of-state PAC (ID#:) 11/26/2024 Evelina Ortega Campaign Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00	
		El Paso, TX 79902				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ Fernandez, Miguel (Mr.) 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 11/22/2024	Full name of contributor out-of-state PAC (ID#:_ Fox, Paige (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_Frank, Adam (Mr.) 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	MONETARY POLITICAL CONTRIBUTIONS					LE A1
	The Instruc	ction Guide explains how t	o complete this fo	m.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/25	
2	FILER NAME Boyar Trejo,	Cynthia			3	Filer ID (Ethics Commission 00000045	on Filers)
4	Date 11/05/2024	6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$10.00
_	5	El Paso, TX		5 1 (0 1 1 1	_		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/20/2024	Full name of contributor Houghton, IV, Edward C. (Note: Contributor address; City; States))	•	Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79901	1		<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/22/2024	Full name of contributor Hunt, Josh (Mr.) Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)	•	Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79902					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/28/2024	Full name of contributor Hunt, Woody (Mr.) Contributor address; City; State)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Businessma	El Paso, TX pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 11/14/2024	Full name of contributor Hunt, Woody (Mr.) Contributor address; City; State El Paso, TX 79913				Amount of Contribution (\$)	\$2,500.00
	Principal occu Businessmar	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/25	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Boyar Trejo,	Cynthia			00000045	
4	Date 11/19/2024	 Full name of contributor out-of-state PAC (ID#:_Lowenfield, Ronald (Mr.) Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79922				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/18/2024	Melendez, Susan (Ms.)				\$100.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	10/28/2024	Ortega, Lina (Mrs.) Contributor address; City; State; Zip Code				\$200.00
		El Paso, TX				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/21/2024	Porras, Gary (Mr.)				\$500.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/20/2024	Robison, J Kirk (Mr.)				\$200.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79902				
	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: 5/6 Rpt: 8/25	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Boyar Trejo,	Cynthia			00000045	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/07/2024	Rodriguez, Andrew (Mr.)				\$20.00
		6 Contributor address; City; State; Zip Code				
		El Paso, TX 79924				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/19/2024	Rubin, Gerald (Mr.)				\$1,250.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/02/2024	Sanders, William (Mr.)				\$1,250.00
		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#:_)		Amount of Contribution (\$)	
	11/26/2024	Snap Partners				\$2,000.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79935				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	11/23/2024	Tawney, Andrea (Mrs.)				\$100.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/25	
2	FILER NAME Boyar Trejo,	Cynthia		3	Filer ID (Ethics Commission 00000045	on Filers)
4	Date 11/14/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
		El Paso, TX 79901				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/11/2024	Full name of contributor out-of-state PAC (ID#: Wilson , Joyce (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		El Paso, TX 79912				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/10/2024	Full name of contributor out-of-state PAC (ID#:_Yellen, Tracy (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		El Paso, TX				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

PLE	DGED CONTRIBU	TIONS			SCHED	ULE B
Т	he Instruction Guide ex	plains how to comp	lete this form.	1	Total pages Schedule B: Sch: 1/1 Rpt: 10/25	
2 FILER N.	AME rejo, Cynthia			3	Filer ID (Ethics Commission File 00000045	rs)
<u></u>	. OF UNITEMIZED PLED	 GES			\$	0.00
5 Date	6 Full name of pledgor	out-of-state PAC (ID	#:) 8	Amount of 9 In-kind descr	iption
	7 Pledgor Address;	City; State; Zip Cod	de		pledge (\$) (If applicat	ole)
					Check if travel outside of Texas. Comp	ete Schedule T
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See In	struction	ons)	

L	OANS					SCHEDU	LE E
Т	he Instructio	n Guide explains how	to complete this f	orm.	1	ages Schedule E: /1 Rpt: 11/25	
	ILER NAME oyar Trejo, Cyr	nthia			3 Filer ID 00000	(Ethics Commission 045	Filers)
4 T	OTAL OF UN	IITEMIZED LOANS			•	\$	0.00
5 D	ate of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
fir	lender a nancial stitution?	8 Lender address; C	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 P	rincipal occupatio	on / Job title (See Instructions)		13 Employer (See Instruction	s)	•	
14 D	escription of Coll	ateral		15 Check if personal funds w	ere deposite	d into political account (See Instructions)	
	UARANTOR IFORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)
	not applicable	18 Guarantor address; C	City; State;	Zip Code			
20 P	rincipal occupation	on		21 Employer (See Instruction	s)	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 Committe

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/14 Rpt: 12/25	Boyar Trejo, Cynthia 00000045
4	Date	5 Payee name
	11/18/2024	AllPrint of El Paso LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$303.09	7230 Gateway E Suite D
		El Paso, TX 79915
8	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
		Push Cards
		T don earde
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
L		
	Date	Payee name
	12/02/2024	Ardivinos
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.55	11100 Sean Haggerty Dr
		El Paso, TX 79934
	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
		Food for Block Walking Volunteers
		1 Journal Proof Walking Volunteers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/09/2024	Burrito House
	Amount (\$)	Payee address; City; State; Zip Code
	\$76.13	9844 Dyer St
		El Paso, TX 79924
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	

SCHEDULE F1

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

Fees Office Overhead/fr
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Lenal Services Salaries/Wages/C

	Credit Card Payment	The Instruction Guide explains how to cor	-	ete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·		3 Filer ID (Ethics Commission Filers)
	Sch: 2/14 Rpt: 13/25	Boyar Trejo, Cynthia		0000045
4	Date	5 Payee name		•
	11/18/2024	Circle K		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$10.12	10616 Mccombs St		
		El Paso, TX 79924		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	-		Check if Austin, TX, officeholder living expense
				Drinks for Block Wakers
_				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
	Date	Payee name		
	12/04/2024	Denny's		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$5.89	4690 WOODROW BEAN TRANSMOUNTAIN F	RD	
		EL PASO, TX 79924		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	ZXI ZXIDITOXZ			Check if Austin, TX, officeholder living expense
				Food for Block Walking Volunteer
	Complete ONLY if direct	Candidate/Officeholder name Office soug	nht.	Office held
	expenditure to benefit C/OI		JIII	Office field
	<u> </u>			
	Date	Payee name		
	11/25/2024	Dunkin Donuts		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$58.97	9114 Dyer St		
		El Paso, TX 79924		
	PURPOSE OF	, ,	(b)	Description
	EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Food for Block Walking Volunteers
	Complete ONLY if direct	Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/OI		t	S55 Hold

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

	The Instruction Guide explains how to co	mplete th	nis form.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 3/14 Rpt: 14/25	Boyar Trejo, Cynthia			00000045	
4 Date	5 Payee name		I		
11/30/2024	Dunkin Donuts				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$12.99	9114 Dyer St				
	El Paso, TX 79924				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des	scription		
OF EXPENDITURE	Food/Beverage Expense		Check if travel outs		
EXI ENDITORE		. —	Check if Austin, TX		
		F00	od for Block \	waiking voic	inteers
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office he	nld
expenditure to benefit C/O		Jynt .		Office fit	eiu
	T				
Date	Payee name				
10/28/2024	El Paso Mail and Print Service				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$5,024.25	1144 Vista De Oro				
	Ste. A				
	El Paso, TX 79935				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Des			
EXPENDITURE	Advertising Expense		Check if travel outsi Check if Austin, TX		
			ilers	, cinconcider num	, expense
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office he	eld
expenditure to benefit C/O	Н				
Date	Payee name				
11/27/2024	El Paso Mail and Print Service				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$4,660.10	1144 Vista De Oro				
. ,	Ste. A				
	El Paso, TX 79935				
		(b) Des	cerintion		
DURDOSE	(a) Category (See Categories listed at the top of this schedule)	· —	Check if travel outs	ide of Texas. Com	plete Schedule T.
PURPOSE OF	Advertising Expense	1 1 1			
	Advertising Expense		Check if Austin, TX	, officeholder living	j expense
OF	Advertising Expense		Check if Austin, TX .ilers	, officeholder livinç	expense
OF	Advertising Expense			, officeholder living	g expense
OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office sou	Ma		, officeholder living	
OF EXPENDITURE	Candidate/Officeholder name Office sou	Ma			
OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office sou	Ma			

SCHEDULE F1

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

Fees Office
Food/Beverage Expense Pollir
Gift/Awards/Memorials Expense Printi
Legal Services Salar

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

Sch: 4/14 Rpt: 15/25 Boyar Trejo, Cynthia 00000045 4 Date		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.
4 Date 11/19/2024 5 Payee name Hamashi Sushi 6 Amount (S) 7 Payee address: City: State: Zip Code 9861 Dyer St #24 El Paso, TX 79924 8 PURPOSE OF EXPENDITURE (a) Category (see Categores listed at the top of this schedular) (b) Description Cincot # flavoid audition of Toxas. Complete Schedule T. Consect # flavoid and the top of this schedular Consect # flavoid audition of Toxas. Complete Schedule T. Consect # flavoid a	1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
11/19/2024		Sch: 4/14 Rpt: 15/25	Boyar Trejo, Cynthia 00000045
Amount (\$) 7 Payee address; City; State; Zip Code 9861 Dyer St #24	4	Date	5 Payee name
\$48.19 9861 Dyer St #24 El Paso, TX 79924 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if Interial custode of Treats. Complete Schedule T. Check if Austin, TX, officientoder Interior expense Food for Block. Walking Volunteers 9 Complete ONLY if direct expenditure to benefit C/OH Date 10/27/2024 Payee name 10/27/2024 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description (b) Description (c) Description (d) Description (e) Check if Austin, TX, officientoder Interior expense Schedule T. Check if Austin, TX, officientoder Interior expense Schedule T. Check if Austin, TX, officientoder Interior expense Schedule T. Check if Austin, TX, officientoder Interior expense Schedule T. Check if Austin, TX, officientoder Interior expense Schedule T. Check if Austin, TX, officientoder Interior expense Schedule T. Check if Austin, TX, officientoder Interior expense Schedule T. Check if Austin, TX, officientoder Interior expense Schedule T. Check if Austin, TX, officientoder Interior expense Schedule T. Check if Taver Categories Categories Check if Taver Categories Check if Taver Categories C		11/19/2024	Hamashi Sushi
El Paso, TX 79924 8	6	Amount (\$)	7 Payee address; City; State; Zip Code
Complete QNLY if direct expenditure to benefit C/OH Category (see Categories listed at the top of this schedule) (b) Description Check if Austin, TX, officeholder living expense Complete QNLY if direct Candidate/Officeholder name Office sought Office held		\$48.19	9861 Dyer St #24
Complete QNLY if direct expenditure to benefit C/OH Category (see Categories listed at the top of this schedule) (b) Description Check if Austin, TX, officeholder living expense Complete QNLY if direct Candidate/Officeholder name Office sought Office held			
Creck if invel outside of Texas. Complete Schedule T. Creck if Austin, TX, officeholder fiving expense Food for Block Walking Volunteers			El Paso, TX 79924
Complete ONLY if direct expenditure to benefit C/OH	8		
Candidate/Officeholder name Office sought Office held			1 Ood/Develage Experior
9 Complete ONLY if direct expenditure to benefit C/OH Date			l — — — — — — — — — — — — — — — — — — —
Date 10/27/2024			1 ood for Block walking volunteers
Date 10/27/2024	0	Complete ONLV if direct	Candidate/Officeholder name Office sought Office hold
Amount (\$)	9		
Amount (\$)	_	<u> </u>	
Amount (\$) Payee address; City; State; Zip Code \$20.00 \$20.00 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct expenditure to benefit C/OH Date 10/27/2024 Amount (\$) Payee name Lowe's Amount (\$) Payee address; City; State; Zip Code 4531 Woodrow Bean Transmountain El Paso, TX 79924 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 Towas Outside of Texas. Complete Schedule T. (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
### Section of the property of		10/27/2024	Harbor Freight
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		Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Shovel, Black Cable Ties Complete ONLY if direct expenditure to benefit C/OH Date 10/27/2024 Amount (\$) Payee name Lowe's Amount (\$) Payee address; City; State; Zip Code \$23.77 Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$20.00	10060 Dyer St
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Shovel, Black Cable Ties Complete ONLY if direct expenditure to benefit C/OH Date 10/27/2024 Amount (\$) Payee name Lowe's Amount (\$) Payee address; City; State; Zip Code \$23.77 Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Advertising Expense Advertising Expense Advertising Expense Complete ONLY if direct expenditure to benefit C/OH Date 10/27/2024 Amount (\$) Payee address; City; State; Zip Code 4531 Woodrow Bean Transmountain El Paso, TX 79924 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder Iving expense Green Posts Complete ONLY if direct Candidate/Officeholder name Office sought Office held			El Paso, TX 79924
Complete ONLY if direct expenditure to benefit C/OH			
Complete ONLY if direct expenditure to benefit C/OH Date			Advertising Expense
Complete ONLY if direct expenditure to benefit C/OH Date			
Date 10/27/2024 Amount (\$) Payee address; City; State; Zip Code 4531 Woodrow Bean Transmountain El Paso, TX 79924 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Shovel, black cable ries
Date 10/27/2024 Amount (\$) Payee address; City; State; Zip Code 4531 Woodrow Bean Transmountain El Paso, TX 79924 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held	_	Complete ONLV if direct	Candidate/Officeholder name Office sought Office held
Amount (\$) Payee address; City; State; Zip Code 4531 Woodrow Bean Transmountain El Paso, TX 79924 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 Green Posts Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
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Amount (\$) Payee address; City; State; Zip Code 4531 Woodrow Bean Transmountain El Paso, TX 79924 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 Green Posts Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
\$23.77 4531 Woodrow Bean Transmountain El Paso, TX 79924 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 Green Posts Complete ONLY if direct Candidate/Officeholder name Office sought Office held		10/27/2024	Lowe's
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 Green Posts Complete ONLY if direct Candidate/Officeholder name Office sought Office held		` '	Payee address; City; State; Zip Code
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 Green Posts Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$23.77	4531 Woodrow Bean Transmountain
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 Green Posts Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
OF EXPENDITURE Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Green Posts Complete ONLY if direct Candidate/Officeholder name Office sought Office held			El Paso, TX 79924
Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Green Posts Check if Austin, TX, officeholder living expense Green Posts Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Check if Austin, TX, officeholder living expense Che			(a) Category (See Categories listed at the top of this schedule) (b) Description
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Advertising Expense
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		ZA ZADITORZ	
			Green Posis
	_	Operation ONE V. C. F.	On didn't lotter had a many
		,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Food/Beverage Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ers)
•	Sch: 5/14 Rpt: 16/25	Boyar Trejo, Cynthia 00000045	.13)
4	Date	5 Payee name	
	10/27/2024	MSquared Media	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	1389Vista Granada Dr	
		El Paso, TX 79936	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Digital Marketing	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experialitire to benefit C/Oi		
	Date	Payee name	
	12/02/2024	MSquared Media	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	1389Vista Granada Dr	
		El Paso, TX 79936	
	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	
		Digital Marketing	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	11/16/2024	Macias, Elizabeth	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$98.68		
		El Paso, TX	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Reimbursement for Donuts and Coffee	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

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 Gu	ide explains how to com	olete this form.		
1	Total pages Schedule F1:	FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 6/14 Rpt: 17/25	Boyar Trejo, Cynthia			00000045	
4	Date	Payee name		<u> </u>		
	11/11/2024	Martinez, Guadalupe				
6	Amount (\$)	Payee address; City;	State; Zip Code	9		
	\$200.00		•			
		El Paso, TX				
8	PURPOSE		10	N Description		
ľ	OF	Category (See Categories listed at th Salaries/Wages/Contract La		DescriptionCheck if travel outs	ide of Texas. Con	nplete Schedule T.
	EXPENDITURE	balanes/wages/contract La	.001	Check if Austin, TX		
				Contract Work		
9	Complete ONLY if direct	andidate/Officeholder name	Office sough	nt	Office h	eld
	expenditure to benefit C/OI					
	Date	Payee name				
	11/22/2024	Martinez, Guadalupe				
	Amount (\$)	Payee address; City;	State; Zip Code	2		
	\$100.00	,				
	¥-20000					
		El Paso, TX				
	DUDDOCE		La			
	PURPOSE OF	Category (See Categories listed at th		DescriptionCheck if travel outs	ide of Texas. Con	nplete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract La	.001	Check if Austin, TX		
				Contract Work		
	Complete ONLY if direct	andidate/Officeholder name	Office sough	nt	Office h	eld
	expenditure to benefit C/OI					
	Date	Payee name				
	11/18/2024	McDonald's				
	Amount (\$)	Payee address; City;	State; Zip Code	9		
	\$18.81	L1390 Gateway North				
		•				
		El Paso, TX 79934				
	PURPOSE			D) Description		
	OF	Category (See Categories listed at the Food/Beverage Expense	e top of this schedule)	Check if travel outs	ide of Texas. Con	nplete Schedule T.
	EXPENDITURE	oourbeverage Expense		Check if Austin, TX	, officeholder livin	g expense
				Food for Block \	Walking Volu	unteers
	Complete ONLY if direct	andidate/Officeholder name	Office sough	nt	Office h	eld
	expenditure to benefit C/OI					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 7/14 Rpt: 18/25	Boyar Trejo, Cynthia 00000045
4	Date	5 Payee name
	11/14/2024	Office Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$136.36	
		El Paso, 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 Labels and Envelopes
		Labels and Livelopes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/14/2024	Price, Sylvia (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	
		El Paso, 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
		Contract Work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/21/2024	Regency Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$268.46	2313 N Piedras
		El Paso, TX 79930
	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 Push Cards
		r usii Caius
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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:	
	Sch: 8/14 Rpt: 19/25	Boyar Trejo, Cynthia 00000045
4	Date	5 Payee name
	11/21/2024	Regency Printing
6	Amount (\$) \$268.46	7 Payee address; City; State; Zip Code 2313 N Piedras
		El Paso, TX 79930
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 Push Cards
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/26/2024	Regency Printing
	Amount (\$) \$268.46	Payee address; City; State; Zip Code 2313 N Piedras
		El Paso, TX 79930
	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 Push Cards
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/25/2024	Sam's Club
	Amount (\$) \$31.96	Payee address; City; State; Zip Code 9498 Gateway Blvd N
		El Paso, TX 79924
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Snacks for Volunteers
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee L	Gift/Awards/Memorials egal Services The Instruction G	•		ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
-	Sch: 9/14 Rpt: 20/25		Boyar Trejo,	Cynthia						00000045	(
Ļ	·	_								00000043	
4	Date	5	Payee name								
	11/27/2024		Sonic Drive I	n							
6	Amount (\$)	7	Payee address	s; City;	State;	Zip Cod	de				
	\$9.30		4800 Hondo	Pass Dr							
			El Doco TV	70004							
			El Paso, TX	79904							
8	PURPOSE OF	(a)	Category (See	Categories listed at	the top of this sche	edule)	(b)	Description			
	EXPENDITURE		Food/Bevera	ge Expense						de of Texas. Com	
								—		officeholder living	
								Food for Bloc	κv	vaiking void	inteers
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	eholder name	0	Office souç	ght			Office he	eld
L	experioliture to beriefit C/OF	П									
	Date		Payee name								
	11/30/2024		Starbucks								
\vdash	Amount (\$)	\vdash	Payee address	s; City;	State:	Zip Cod	de				
	\$21.65		4535 Woodr	•	Siale,	2.p C00	uc				
	\$∠1.05		4333 WUUUI	JW DEall							
			El Paso, TX	79924							
	PURPOSE	(a)	Category (See	Categories listed at	the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Food/Bevera			,		Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE									officeholder living	j expense
								Coffee for Vo	lun	teers	
	Complete ONLY if direct		Candidate/Offic	eholder name	0	Office souç	ght			Office he	eld
	expenditure to benefit C/O	Н									
	Date		Payee name								
	11/05/2024		Subway								
<u> </u>		\vdash		O:+ ::	Ctata	Zin C	de				
	Amount (\$)		Payee address		State;	Zip Co	ue				
	\$39.92		5140 Fairbar	IKS #1							
			El Paso, TX	79924							
	PURPOSE	(a)	Category (See	Categories listed at	the top of this sche	edule)	(b)	Description			
	OF		Food/Bevera		5. 5.10 55110	/	•		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE			G						officeholder living	
								Food for Bloc	k V	Valking Volu	inteers
	Complete ONLY if direct		Candidate/Offic	eholder name	0	Office soug	ght			Office he	eld
	expenditure to benefit C/OI	Н									

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	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: 10/14 Rpt: 21/25	Boyar Trejo, Cynthia 00000045
4	Date	5 Payee name
	11/05/2024	Subway
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9.68	5140 Fairbanks #1
		El Paso, TX 79924
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food for Block Walking Volunteers
		1 ood for block walking volunteers
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Date	Daysa nama
	11/25/2024	Payee name Taco Cabana
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.28	4810 Hondo Pass Dr
		El Paso, TX 79904
	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 Burritos for Volunteers
		Burntos for Volunteers
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	11/05/2024	Text to Survey
	Amount (\$)	-
	\$466.56	Payee address; City; State; Zip Code 1527 S. Cooper Street
	φ400.50	1027 O. Cooper Street
		Adjusted TV 70010
		Arlington, TX 76010
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		P2P Text Service
	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: 11/14 Rpt: 22/25	Boyar Trejo, Cynthia		0000045		
4	Date	5 Payee name		•		
	11/07/2024	Text to Survey				
6	Amount (\$)	7 Payee address; City; State; Zip Co	de			
	\$452.79	1527 S. Cooper Street				
		Arlington, TX 76010				
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.		
	EXPENDITURE			Check if Austin, TX, officeholder living expense		
				P2P Text Service		
_	0 1: 0 1: 0	0.51.40%		0.00		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held		
	Date	Payee name				
	11/25/2024	The Podium				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$42.85	1400 Texas Ave				
		El Paso, TX 79901				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.		
				Check if Austin, TX, officeholder living expense Lunch with Volunteers		
				Zanon war voluntoore		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held		
	expenditure to benefit C/OI		3			
	Date	Payee name				
	11/05/2024	The Shack Bar and Grill				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$275.97	4726 Woodrow Bean Transmountain	uc			
	Ψ210.31	4720 Woodiow Beati Transmountain				
		El Paso, TX 79924				
	DUDDOCE		(h)			
	PURPOSE 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	Eveni Expense		Check if Austin, TX, officeholder living expense		
				Food and Drinks for Election Results Party		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	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: 12/14 Rpt: 23/25	Boyar Trejo, Cynthia 00000045
4	Date	5 Payee name
	12/04/2024	Trejo, Cynthia (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$261.75	
		El Paso, TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement
		Check if Austin, TX, officeholder living expense
		Payment to Volunteers
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/20/2024	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$657.00	8401 Boeing Dr
		El Paso, TX 79910
	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
		Stamps for Letters
	0 1: 0: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1:	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/28/2024	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.11	4530 Woodrow Bean
		El Paso, TX 79924
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		Flashlights for signs
	0 1. 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

	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: 13/14 Rpt: 24/25	Boyar Trejo, Cynthia	0000045			
4	Date	5 Payee name				
	11/23/2024	Walmart				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$18.91	4530 Woodrow Bean				
		El Paso, TX 79924				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Onto Wards/Wemonals Expense	outside of Texas. Complete Schedule T.			
l			, TX, officeholder living expense hank You Card			
l		. dichacca ii	nam roa cara			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O					
F	Date	Payee name				
	11/30/2024	Wix.com				
_	Amount (\$)	Payee address; City; State; Zip Code				
	\$241.02	40 Namal Tel Aviv				
		6350671				
		Israel				
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
l	OF EXPENDITURE	,	outside of Texas. Complete Schedule T.			
l	EXPENDITURE		, TX, officeholder living expense			
l		November Pr	ocessing Fees			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O		Cinice Held			
-	Date	Payee name				
l	12/02/2024	Wix.com				
	Amount (\$)	Payee address; City; State; Zip Code				
l	\$14.80	40 Namal Tel Aviv				
l		6350671				
l		Israel				
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
l	OF		outside of Texas. Complete Schedule T.			
l	EXPENDITURE	Check if Austin	, TX, officeholder living expense			
l		12/2/24 Proce	essing Fees			
L	Complete ONII V if direct	Condidate/Officeholder name	Office hold			
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held			
\vdash						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Credit Card Payment	al Committee Legal Services Salaries/Wages/Contr The Instruction Guide explains how to complete th	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/14 Rpt: 25/25	Boyar Trejo, Cynthia	00000045
4 Date	5 Payee name	1
11/18/2024	Yaty Donuts	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$16.64	8400 North Loop Dr	
	El Paso, TX 79924	
8 PURPOSE OF EXPENDITURE		Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Od for Block Walking Volunteers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held