CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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	o C/OII Instruction (Cuido ovaloino hoveto com	nlata thia faum	1 Filer ID		2 Total pages f	iled:
11	ie C/OH instruction (Guide explains how to com	piete this form.	(Ethics Comm 0000059			21
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
	OFFICEHOLDER	Mr.	Ivan				
	NAME					Date Received	
						ELECTRONIC	ALLY FILED
		NICKNAME	LAST		SUFFIX	12/06/2024	
			Niño				
4	CANDIDATE /	ADDRESS / PO BOX; AF	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
	OFFICEHOLDER	3620 Tierra Alba					
	MAILING ADDRESS					Receipt #	Amount
	Change of Address	El Dogo TV 70020					
	Change of Address	El Paso, TX 79938				Date Processed	•
						Date Imaged	
5	CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
	NAME		Alejandra				
		NICKNAME	LAST		SUFFIX		
			Valdez				
6	CAMPAIGN	STREET ADDRESS (NO P	O BOX PLEASE);	AP	T / SUITE #; CITY	; ST	ATE; ZIP CODE
	TREASURER	1015 Magoffin Ave	,		·		·
	ADDRESS	, and the second					
	(Residence or Business)	El Doco TV 70001					
		El Paso, TX 79901					
7	CAMPAIGN	AREA CODE PHO	NE NUMBER I	EXTENSION			
	TREASURER	(915) 255-1334					
	PHONE	(0-0) -00 -00 .					
8	REPORT						
	TYPE	January 15	30th day before	e election X	Runoff		ampaign treasurer
			—			appointment (off	
		July 15	8th day before	election	Exceeded modified reporting limit	Final Report (At	ach C/OH-FR)
L							
9	PERIOD COVERED	Month Day Year		IDOLIOI I	Month Day	Year	
	COVERED	10/27/2024	11	HROUGH	12/04/20	24	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
		Month Day Year	L ⁶	Primary	X Runoff	Other	
		12/14/2024		Seneral	Special		
					_		
11	OFFICE	OFFICE HELD (if any)	·		12 OFFICE SOUGH	T (if known)	
		None El Paso				ative District Distr	ict 5
\vdash					1		
			_				
			GO 1	TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 21

13 C / OH NAME	Niño, Ivan (Mr.)		14 Filer ID (I	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures may have been made without to difficeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		EAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 27,610.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 31,711.09
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 11,929.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 5,000.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		N	Mr. Ivan Niño	
		Signature of	Candidate or Officehold	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 21 **18** FILER NAME 19 Filer ID (Ethics Commission Filers) 00000059 Niño, Ivan (Mr.) **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 27,610.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 31,711.09 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 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 A		
	The Instruc	etion Guide explains how to complete th	is for	·m.	1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/21	
2	FILER NAME Niño, Ivan (Mr.)		3	Filer ID (Ethics Commission 00000059	on Filers)		
4			7	Amount of Contribution (\$)	\$250.00		
8	Principal occu	El Paso, TX 79936 pation / Job title (See Instructions)	9	Employer (See Instructions El Paso County	 s)		
	Date 12/02/2024	Full name of contributor out-of-state PAC (Alpern, Louis Contributor address; City; State; Zip Code 4171 N. Mesa St., Suite D205 El Paso, TX 79902	ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Ophthalmolo	pation / Job title (See Instructions) gist		Employer (See Instructions Self	s)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (Anderson, Blake Contributor address; City; State; Zip Code 509 Linda	ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	El Paso, TX 79922 pation / Job title (See Instructions)		Employer (See Instructions Healthcare	<u> </u> s)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (Anderson, Sue Contributor address; City; State; Zip Code 4750 River Creek PI El Paso, TX 79922	ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 11/27/2024	Full name of contributor out-of-state PAC (Arriola, Benjamin Contributor address; City; State; Zip Code 701 Gary Lane El Paso, TX 79922	ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Southwest University	s)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/7 Rpt: 5/21		
2	FILER NAME Niño, Ivan (M	1r.)			3	Filer ID (Ethics Commission 00000059	on Filers)
4			7	Amount of Contribution (\$)	\$1,000.00		
8	Principal occu Business Ow	El Paso, TX 79912 pation / Job title (See Instructions) /ner	9	Employer (See Instructions Self employed	<u> </u> ;)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (II Bowling IV, Robert L. Contributor address; City; State; Zip Code 457 San Clemente El Paso, TX 79912	D#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Business Ow	pation / Job title (See Instructions) ner		Employer (See Instructions Self employed	5)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (II El Paso Municipal Police Officers, PAC Contributor address; City; State; Zip Code 747 E. San Antonio Suite 100 El Paso, TX 79901	D#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (II Escobar, Enrique Contributor address; City; State; Zip Code 337 E. Borderland Rd #7 El Paso, TX 79932	D#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Self employed	5)		
	Date 11/23/2024	Full name of contributor out-of-state PAC (II Fernandez, Miguel Contributor address; City; State; Zip Code 411 Rim Rd El Paso, TX 79902	D#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Executive	pation / Job title (See Instructions)		Employer (See Instructions Transtelco	5)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 3/7 Rpt: 6/21		
2	FILER NAME Niño, Ivan (M	۱۲.)			3	Filer ID (Ethics Commission 00000059	on Filers)
4	Date 11/22/2024 5 Full name of contributor out-of-state PAC (ID#:) Fox, Paige 6 Contributor address; City; State; Zip Code 765 Meadowlark Dr		7	Amount of Contribution (\$)	\$1,000.00		
8	Principal occu Sales	El Paso, TX 79922 pation / Job title (See Instructions)	9	Employer (See Instructions Fox Auto Team)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/22/2024 Francis, L. Frederick Contributor address; City; State; Zip Code 601 N Mesa, Suite 1200 El Paso, TX 79901			Amount of Contribution (\$)	\$2,500.00		
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Weststar Bank)		
	Date 11/19/2024	Full name of contributor Frank, Adam Contributor address; City; State 801 River Oaks Dr	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Real Estate I	El Paso, TX 79912 pation / Job title (See Instructions) Developer		Employer (See Instructions River Oaks Properties)		
	Date 11/06/2024	Full name of contributor Houghton, Ted Contributor address; City; State 210 N Campbell El Paso, TX 79901	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Principal	pation / Job title (See Instructions)		Employer (See Instructions Houghton Financial)		
	Date 10/31/2024	Full name of contributor Hunt, Woody L. & Gayle Contributor address; City; State 601 N Mesa El Paso, TX 79901	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
		pation / Job title (See Instructions) of the Board of Directors		Employer (See Instructions Hunt Companies)		

	MONEI	ARY POLITICAL CO	JNTRIBUTIO	INS		SCHEDUI	_E A1
	The Instru	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/21	
2	FILER NAME Niño, Ivan (N				3	Filer ID (Ethics Commission 00000059	on Filers)
4	Date 11/15/2024			7	Amount of Contribution (\$)	\$2,500.00	
8	Dringinal occu	El Paso, TX 79901 upation / Job title (See Instructions)		9 Employer (See Instructions	.) 		
0		n of the Board of Directors		Hunt Companies	')		
	Date Full name of contributor out-of-state PAC (ID#:) 10/30/2024 Kotys, Jody L. Contributor address; City; State; Zip Code 3412 Running Deer Drive El Paso, TX 79936			Amount of Contribution (\$)	\$10.00		
	Principal occu Retired	ipation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 11/22/2024	Full name of contributor Lopez, Rogelio Contributor address; City; State 736 Colchester Dr	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
_	Principal occu	El Paso, TX 79912 upation / Job title (See Instructions)		Employer (See Instructions	.) 		
	Teacher			El Paso Independent Sc		ol	
	Date 11/19/2024	Full name of contributor Lowenfield, Ronald Contributor address; City; State 530 Woodland Avenue El Paso, TX 79922	out-of-state PAC (ID#: ie; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Casa Automotive Group			
	Date 11/18/2024	Full name of contributor Palacios, Raymond & Kathy Contributor address; City; State 5025 Meadowlark Dr El Paso, TX 79922	·)		Amount of Contribution (\$)	\$1,500.00
	Principal occu CEO	upation / Job title (See Instructions)		Employer (See Instructions Self employed	()		
			,				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/21		
2	FILER NAME Niño, Ivan (M	ir.)			3	Filer ID (Ethics Commission 00000059	on Filers)	
4	1 Date 11/04/2024 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00			
8	Principal occur Teacher	El Paso, TX 79932 pation / Job title (See Instructions)	9	Employer (See Instructions EPISD)			
	Date Full name of contributor out-of-state PAC (ID#:) 11/22/2024 Porras, Gary & Cecilia Contributor address; City; State; Zip Code 805 Wingfoot El Paso, TX 79912			Amount of Contribution (\$)	\$500.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 11/20/2024	Full name of contributor out-of-state F Robison, Kirk Contributor address; City; State; Zip Code 4445 N Mesa Ste 100	PAC (ID#:)		Amount of Contribution (\$)	\$250.00	
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)		Employer (See Instructions)			
	Chairman			Pizza Properties Inc	,			
	Date 11/19/2024	Full name of contributor out-of-state F Rubin, Gerald Contributor address; City; State; Zip Code 538 Laurel Canyon El Paso, TX 79912	PAC (ID#:			Amount of Contribution (\$)	\$1,250.00	
	Principal occu Executive Ch	pation / Job title (See Instructions) nairman		Employer (See Instructions River Oaks Properties)			
	Date 12/04/2024	Full name of contributor out-of-state FTREPAC - Texas REALTORS PAC Contributor address; City; State; Zip Code PO Box 2246 Austin, TX 78768	PAC (ID#:			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
			l					

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 9/21	
2	FILER NAME Niño, Ivan (N	Λr.)		3	Filer ID (Ethics Commission 00000059	on Filers)
4	Date 11/13/2024	 5 Full name of contributor out-of-state PAC (ID#:_ The El Paso Association of Fire Fighters Local 5 6 Contributor address; City; State; Zip Code 3112 Forney Dr El Paso, TX 79935 		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/04/2024 Uribe, Fabian Contributor address; City; State; Zip Code 3224 N Stanton El Paso, TX 79902			Amount of Contribution (\$)	\$500.00	
	Principal occu Real Estate	pation / Job title (See Instructions) Agent	Employer (See Instructions Self Employed / Broker		an Uribe	
	Date 11/27/2024	Full name of contributor out-of-state PAC (ID#:_ Uribe, Juan Contributor address; City; State; Zip Code 6350 Escondido Dr Ste A-13 El Paso, TX 79912			Amount of Contribution (\$)	\$250.00
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions Team Juan Uribe LLC	<u> </u> s)		
	Date 11/29/2024	Full name of contributor out-of-state PAC (ID#:_ Valdez, Dora A Contributor address; City; State; Zip Code 415 W Hathaway Dr San Antonio, TX 78209)		Amount of Contribution (\$)	\$100.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions D.A.V.	s)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Valdez, Dora A (CEO) Contributor address; City; State; Zip Code 415 W Hathaway Dr San Antonio, TX 78209)		Amount of Contribution (\$)	\$100.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions D.A.V.	s)		
		•				

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/21
2	FILER NAME Niño, Ivan (Mr.)	3 Filer ID (Ethics Commission Filers) 00000059
4		7 Amount of Contribution (\$) \$100.0
8		ons)
	Date Full name of contributor out-of-state PAC (ID#:) Yancey, Garrett Contributor address; City; State; Zip Code 6489 Calle Placido Dr El Paso, TX 79912	Amount of Contribution (\$)
	Principal occupation / Job title (See Instructions) Assistant General Counsel Employer (See Instructions) Jobe Materials, LP	ons)

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

Travel in District

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

Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule E1: 2 EII ED NAME 2 Eiler ID (Ethics Commission Filors)

ΙŤ	Total pages Scriedule F1.	Z FILER NAIVIE		FIREI ID (EUIICS COITIITISSIOTI FIREIS)
	Sch: 1/11 Rpt: 11/21	Niño, Ivan (Mr.)		00000059
4	Date	5 Payee name		
	11/25/2024	787 Coffee East		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
	\$39.00	2120 N Zaragoza Rd Ste 2A		
		El Dago, TV 70020		
L		El Paso, TX 79938		
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
				Coffee and snacks for volunteers.
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		
Г	Date	Payee name		
	11/29/2024	ActBlue Technical Services		
Н	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$452.69	366 Summer Street		
		Compreille MA 02144		
L		Somerville, MA 02144		
	PURPOSE OF		(b)	Description
	EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Fundraising fees
				Turidialing lees
⊢	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		Jiic	Office field
⊨				
	Date	Payee name		
	10/28/2024	Airport Printing Service		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$3,140.04	7 Leigh Fisher Blvd.		
		Ste A.		
		El Paso, TX 79906		
L	PURPOSE		(b)	Description
	OF	, (, , , , , , , , , , , , , , , , , ,	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Printing Expense		Check if Austin, TX, officeholder living expense
				Print Expenses
				•
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		,,,,	Cinc neu
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l				

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	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: 2/11 Rpt: 12/21	Niño, Ivan (Mr.) 00000059
4	Date	5 Payee name
	11/21/2024	Airport Printing Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,876.75	7 Leigh Fisher Blvd.
		Ste A.
		El Paso, TX 79906
8	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
		Printing expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	11/29/2024	Airport Printing Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$8,300.00	7 Leigh Fisher Blvd.
		Ste A.
		El Paso, TX 79906
	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
		Print expense and postage.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Payee name
	12/04/2024	Airport Printing Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$6,799.60	7 Leigh Fisher Blvd.
		Ste A.
		El Paso, TX 79906
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Print & Postage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct 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 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 c	ompl	ete this form.
1	Total pages Schedule F1: Sch: 3/11 Rpt: 13/21	2 FILER NAME Niño, Ivan (Mr.)		3 Filer ID (Ethics Commission Filers) 00000059
4	Date 11/13/2024	5 Payee name Civitech		
6	Amount (\$) \$761.92	7 Payee address; City; State; Zip C 21750 Hardy Oak Blvd Ste 104 San Antonio, TX 78258	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 Voter outreach
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office so	ught	Office held
	Date 11/13/2024	Payee name Civitech		
	Amount (\$) \$1,689.06	Payee address; City; State; Zip C 21750 Hardy Oak Blvd Ste 104 San Antonio, TX 78258	ode	
	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 Voter outreach
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
	Date 12/04/2024	Payee name Civitech		
	Amount (\$) \$730.36	Payee address; City; State; Zip C 21750 Hardy Oak Blvd Ste 104	ode	
		San Antonio, TX 78258		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter outreach	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Voter outreach
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	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 Committ

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 14/21	Niño, Ivan (Mr.) 00000059
4	Date	5 Payee name
	11/30/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$45.44	6101 Gateway Blvd W SUITE #1
		El Paso, TX 79925
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Pens and paper supplies. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Pens and paper supplies.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	4
	Date	Payee name
	11/29/2024	El Paso Print & Mail Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$519.60	1144 Vista De Oro
		Ste A.
		El Paso, TX 79935
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Print Expense
		1 mil 2 Apondo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/21/2024	El Paso Print & Mail Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$486.04	1144 Vista De Oro
	,	Ste A.
		El Paso, TX 79935
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Printing expense
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiditure to benefit C/Or	1

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		Legal Services The Instruction Guide	Salaries	Wages	/Contract Labor		OTHER (enter a	category not listed abo	ove)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commissi	ion Filers)
	Sch: 5/11 Rpt: 15/21	Niño, Ivan						00000059		
4	Date	5 Payee name	e							
	11/27/2024	El Paso Pr	int & Mail Services							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode					
	\$486.04	1144 Vista	De Oro							
		Ste A.								
		El Paso, T	X 79935							
8	PURPOSE	(a) Category (s	See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Printing Ex	pense					ide of Texas. Com		
						Printing expe		, officeholder livinç a	j expense	
						T Tilling Expe	113	•		
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	<u>l</u> ught			Office he	eld	
F	Date	Payee name								
	11/20/2024	Emajj, PR								
H	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode					
	\$500.00	4120 Rio E								
	*******	Suite 110								
		El Paso, T	V 70002							
L	DUDDOGE				14.5					
	PURPOSE OF	I	See Categories listed at the to	op of this schedule)	(a)	Description Check if travel	nuts	ide of Texas. Com	inlete Schedule T	
	EXPENDITURE	Social med	lia outreach			=		, officeholder living		
						Social media	ou	treach		
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ught			Office he	eld	
F	Date	Payee name								
	11/08/2024	Lerma, De								
H	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode					
	\$642.00	2195 Lisa								
	Ψ012.00	2200 2.000	O.1.011							
		El Paso, T	X 79938							
	PURPOSE	(a) Category (See Categories listed at the to	pp of this schedule)	(b)	Description				
	OF EXPENDITURE	Salaries/W	ages/Contract Labo	or				ide of Texas. Com		
	2/11/2/10/12						, TX	, officeholder living	g expense	
						Canvassing				
\vdash	Complete ONLY if direct	Candidata/Of	ficabolder name	Office	licht			Office	ald	
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ugni			Office he	ziu	
\vdash	•									
L										

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

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

l	Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
L	Sch: 6/11 Rpt: 16/21	Niño, Ivan (Mr.)	00000059
4	Date	5 Payee name	
	11/08/2024	Maciel, Victor	
6	Amount (\$)	7 Payee address; City; State; Zip Code	е
l	\$150.00	900 N Carolina	
l			
l		El Paso, TX 79915	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Canvassing
			Carryassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
	expenditure to benefit C/OI		it Office field
⊨	Data		
l	Date 10/28/2024	Payee name	
L		Marin, Olivia	
l	Amount (\$)	Payee address; City; State; Zip Code	9
l	\$90.00	301 NW Camp St	
		Fabens, TX 79838	
l	PURPOSE OF	,	Description
l	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Canvassing
			•
Н	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
l	expenditure to benefit C/OI	1	
F	Date	Payee name	
	10/29/2024	Marin, Olivia	
H	Amount (\$)	Payee address; City; State; Zip Code	9
l	\$540.00	301 NW Camp St	
l		'	
l		Fabens, TX 79838	
⊢	PURPOSE		b) Description
l	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Salarios, Wagos, Sorialast Labor	Check if Austin, TX, officeholder living expense
l			Canvassing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt Office held
	experiulture to beliefit C/OI	1	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense 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

	Candidate/Officeholder/Politica							OTHER (enter a category not listed above)					
	Credit Card Payment			The Instruction	Guide explains	how to co	mple	te this form.					
1	Total pages Schedule F1:	2 FI	ILER NAME						3	Filer ID	(Ethic	s Commission Filers	3)
	Sch: 7/11 Rpt: 17/21	N	liño, Ivan (N	Лr.)						0000005	59		
4	Date	5 P	ayee name										
	11/01/2024	M	1arin, Olivia										
6	Amount (\$)	7 Pa	ayee addres	s; City;	State	e; Zip Co	de						
	\$350.00	l	01 NW Car										
		l _E	abens, TX	79838									
8	PURPOSE	-					(h)	Description					
Ü	OF OF			e Categories listed a ges/Contract		hedule)	(5)	Check if travel of	outsi	de of Texas.	Complete Sc	hedule T.	
	EXPENDITURE		alarics/ vva	ges/Contract	Laboi			Check if Austin,					
								Canvassing					
9	Complete ONLY if direct		ndidate/Offic	eholder name	(Office sou	ght			Office	e held		
	expenditure to benefit C/O	Н											
	Date	Pi	ayee name										
	11/01/2024	М	1arin, Olivia	Į.									
	Amount (\$)	Pi	ayee addres	s; City;	State	e; Zip Co	de						
	\$430.00	30	01 NW Car	np St									
		l _E	abens, TX	79838									
	PURPOSE						(h)	Description					
	OF	1		e Categories listed a ges/Contract		nedule)	(~)	Check if travel of	outsi	de of Texas.	Complete Sc	hedule T.	
	EXPENDITURE		alarics/ vva	gcs/contract	Labor			Check if Austin,	, TX,	officeholder l	iving expens	e	
								Canvassing					
	Complete ONLY if direct		ndidate/Offic	eholder name	(Office sou	ght			Office	e held		
	expenditure to benefit C/Ol	П											
	Date	Pi	ayee name										
	11/09/2024	M	1arin, Olivia										
	Amount (\$)	Pi	ayee addres	s; City;	State	; Zip Co	de						
	\$900.00	30	01 NW Car	np St									
		l F	abens, TX	79838									
	PURPOSE	(a) C	ategory (so	e Categories listed a	t the ten of this set	hodulo)	(b)	Description					
	OF			ges/Contract		neddie)	` ′	Check if travel of	outsi	de of Texas.	Complete Sc	hedule T.	
	EXPENDITURE			9				Check if Austin,	, TX,	officeholder l	iving expens	e	
								Canvassing					
	Complete ONLY if direct expenditure to benefit C/O		ndidate/Offic	eholder name	(Office sou	ght			Office	e held		
	experiulture to beliefft C/OI												
							-						

SCHEDULE F1

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

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: 8/11 Rpt: 18/21	Niño, Ivan (Mr.) 00000059
4	Date	5 Payee name
	11/25/2024	Marquez, Camila
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.00	4120 Rio Bravo St
		Suite 110
		El Paso, TX 79902
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
		Carryassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/30/2024	Miranda, Victor E.
	Amount (\$)	Payee address; City; State; Zip Code
	\$280.00	13815 Rio Conchos Rd
		Clint, TX 79836
	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
		Gaint according
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/26/2024	Murphy, Joel
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	12361 Tierra Humeda
		El Paso, TX 79938
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Canvassing
		Carryassing
	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

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: 9/11 Rpt: 19/21	Niño, Ivan (Mr.) 00000059
4	Date	5 Payee name
	12/04/2024	Murphy, Joel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	12361 Tierra Humeda
		El Paso, TX 79938
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Canvassing
		Curivassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
<u> </u>	<u> </u>	
	Date	Payee name
	12/02/2024	Natalie, Ordonez
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	14049 Tierra Leona
		El Paso, TX 79938
	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
		Carrassing
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	11/23/2024	Rally Point Coffee - East
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.98	12801 Edgemere Blvd
		El Paso, TX 79938
	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.
		Ceffee and angele for yellunteers
		Coffee and snacks for volunteers.
	Complete ONLY if alice -	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	

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

	Credit Card Payment	The Instruction Guide explains how to d	-	ete this form.
1	Total pages Schedule F1:	•		3 Filer ID (Ethics Commission Filers)
	Sch: 10/11 Rpt: 20/21	Niño, Ivan (Mr.)		00000059
4	Date	5 Payee name		<u> </u>
	11/29/2024	Rally Point Coffee - East		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$29.79	12801 Edgemere Blvd		
		El Paso, TX 79938		
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
				Coffee and snacks for volunteers.
9	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	1		
Г	Date	Payee name		
	11/19/2024	Texas Democratic Party - VAN		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$380.00	314 Highland Blvd		
		Austin, TX 78752		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Voter data
Г	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	11/29/2024	Village Inn - East		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$114.61	3464 Joe Battle Blvd		
		El Paso, TX 79938		
	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 volunteers.
H	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	1		

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Coi	mmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		nse es/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
_	Total pages Schedule F1:	12			пис схрішно і			3	Filor ID	(Ethics Commission Fi	lore)
	Sch: 11/11 Rpt: 21/21		Niño, Ivan					3	Filer ID 0000059	(Ethics Commission Fi	eis)
4	Date	5	Payee name	e.							
	12/03/2024		Zapa Grap								
6	Amount (\$)	7	Payee addr	ess; City;	State;	Zip Code					
	\$422.17		3410 Wick	ham, Ave.							
l			Suite 100								
			El Paso, T	X 79904							
8	PURPOSE	(a)	Category (See Categories listed at th	ne top of this sch	edule) (b) Description				
l	OF EXPENDITURE		Printing Ex						ide of Texas. Comp		
l	LAFENDITORE								, officeholder living	expense	
							Printing exp	pens	es		
9	Complete ONLY if direct	<u> </u>		ficeholder name		Office sough	<u> </u>		Office he	ald.	
	expenditure to benefit C/O					ee eeug	•		GGG 11.0		