# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT The C/OH Instruction Guide explains how to complete this form.

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comp	plete this form.	1 Filer ID (Ethics Commiss 00000055	sion Filers)	2 Total pages fil 1	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
NAME	Mr.	Christopher			Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025	
	Chris	Hernandez		301117		
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	r Date Postmarked
MAILING	565 Riverdale				Receipt #	Amount
ADDRESS						
Change of Address	El Paso, TX 79907				Date Processed	-
					Date Imaged	
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mr.	D.E.				
	NICKNAME	LAST		SUFFIX		
		Saucedo II				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO P	O BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
ADDRESS	711 N. Copia St.					
(Residence or Business)						
	El Paso, TX 79903					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER	(915) 549-3166					
PHONE						
8 REPORT						
TYPE	X January 15	30th day before	election I	Runoff	15th day after car appointment (office	
	July 15	8th day before 6	election	Exceeded modified	Final Report (Atta	
				reporting limit		ion Grotti ity
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	12/05/2024		IROUGH	12/31/202		
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	X Runoff	Other	
	12/14/2024	lПG	eneral	Special		
				ш.		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	YISD Trustee District 6 E	El Paso		City Representat		
	1					
		CO T	O DACE 2			
		GU I	O PAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 15

13 C / OH NAME	Hernandez, Christop	her (Mr.)	<b>14</b> Filer ID (E 00000055	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	ROM candidate / officeholder. These expenditures may have been made without the candidate's or of consent. Candidates and officeholders are required to report this information only if they receive			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS .	
16 CONTRIBUTION	1 TOTAL LINUTENA	IZED DOLITICAL CONTRIBUTIONS (OTLIED THAN	NI DI EDCES I OANS	_
TOTALS	OR GUARANTE	IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	3)	\$ 1,050.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		<b>\$</b> 11,147.97
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 1,360.20
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ETING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Mr. Chr	istopher Hernandez	
			Candidate or Officehold	er
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

## **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

			C	OVER SHEET	3 of 15
l	ER NAN	(Ethics Commission	Filers)		
l		E SUBTOTALS SCHEDULE		SUBTOTAL AM	IOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,050.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	10,950.76
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	197.21
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1		
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/15		
2	FILER NAME Hernandez, Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00000055		
4	Date 12/06/2024  5 Full name of contributor out-of-state PAC (ID#:) Garcia, Albert  6 Contributor address; City; State; Zip Code 1064 Lariat St  El Paso, TX 79915	7 Amount of Contribution (\$) \$50.0		
8	Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)	ons)		
	Date  Full name of contributor out-of-state PAC (ID#:)  12/08/2024  Garcia, Javier  Contributor address; City; State; Zip Code  10957 Gary Player Dr  El Paso, TX 79935	Amount of Contribution (\$) \$1,000.0		
	Principal occupation / Job title (See Instructions)  Employer (See Instructions)	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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to cor	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/10 Rpt: 5/15	Hernandez, Christopher (Mr.)		00000055
4	Date	5 Payee name		<b>'</b>
	12/09/2024	Airport Printing Services		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
l	\$5,341.00	7 Leigh Fisher Blvd		
l				
		El Paso, TX 79906		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  Mailer
				ivialiei
9	Complete ONLY if direct	Candidate/Officeholder name Office sout	aht	Office held
ľ	expenditure to benefit C/O		giit	Office field
H	Date	Payee name		
l	12/09/2024	Amazon		
┝	Amount (\$)	Payee address; City; State; Zip Coo	da	
l	\$43.77	440 Terry Ave N	ue	
	Ψ+3.11	440 Telly Ave IV		
l		South WA 09100		
L	DUDD005	Seattle, WA 98109	<i>a</i> >	
	PURPOSE OF	2 (	(a)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
				Office Supplies
L				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
L	experialitate to beliefit C/O	1		
l	Date	Payee name		
	12/10/2024	Amazon		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
l	\$10.81	440 Terry Ave N		
l		Seattle, WA 98109		
	PURPOSE	,	(b)	Description
l	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l				Office Supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O			
H				

#### SCHEDULE F1

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

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

	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: 2/10 Rpt: 6/15	Hernandez, Christopher (Mr.) 00000055
4	Date	5 Payee name
	12/11/2024	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$29.85	440 Terry Ave N
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
		Cinice Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	12/14/2024	Circle K
H	Amount (\$)	Payee address; City; State; Zip Code
	\$28.13	8130 Alameda
		El Paso, TX 79907
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Gas for Canvassing
		Cus for Curivassing
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/14/2024	Circle K
H	Amount (\$)	Payee address; City; State; Zip Code
	\$38.40	8130 Alameda
		El Paso, TX 79907
	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
		Gas for Canvassing
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
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### 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			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	5)	
	Sch: 3/10 Rpt: 7/15	Hernandez, Christopher (Mr.) 00000055		
4	Date	5 Payee name		
	12/07/2024	Cuagliotti, Guadalupe		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$580.00	304 Texas Apt 1206		
		El Paso, TX 79901		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Canvassing		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	Н		
	Date	Payee name		
	12/16/2024	Cuagliotti, Guadalupe		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$560.00	304 Texas Apt 1206		
		El Paso, TX 79901		
	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		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	Н		
	Date	Payee name		
	12/07/2024	Flores, Jose Luis		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$290.00	600 Belvidere Apt 24		
		El Paso, TX 79912		
	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		
	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 - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/10 Rpt: 8/15 Hernandez, Christopher (Mr.) 00000055 4 Date Payee name 12/16/2024 Flores, Jose Luis 6 Amount (\$) Payee address; State; Zip Code \$370.00 600 Belvidere Apt 24 El Paso, TX 79912 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Canvassing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/07/2024 Garcia, Juan Amount (\$) Payee address; City; State; Zip Code \$240.00 608 Francis St El Paso, TX 79905 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Canvassing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/16/2024 Garcia, Juan Amount (\$) Payee address: City: State; Zip Code \$160.00 608 Francis St El Paso, TX 79905 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Canvassing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/10 Rpt: 9/15	Hernandez, Christopher (Mr.) 00000055
4	Date	5 Payee name
	12/16/2024	Jimenez, Felix
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$480.00	565 Riverdale
		El Paso, TX 79907
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
		Carryassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/16/2024	Jimenez, Margarita
H	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	565 Riverdale
		El Paso, TX 79907
	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  Election Night Party (catering)
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/14/2024	Juanito's Liquor Store
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$58.43	7810 North Loop Dr
		El Paso, TX 79915
	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
		Election Night Party
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
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### 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 (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 6/10 Rpt: 10/15	Hernandez, Christopher (Mr.) 00000055
4	Date	5 Payee name
	12/26/2024	MRBD Enterprises
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.00	522 W San Francisco Ave
		El Paso, TX 79901
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Website maintenance
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experionale to belief C/O	'
	Date	Payee name
	12/07/2024	Martinez, Jesus
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.00	173 Coronado Rd Bldg 2 Apt 3004
		El Paso, TX 79915
	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
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	D :	
	Date	Payee name
	12/16/2024	Martinez, Jesus
	Amount (\$)	Payee address; City; State; Zip Code
	\$130.00	173 Coronado Rd Bldg 2 Apt 3004
		El Paso, TX 79915
	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
		Carryassing
	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 -

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	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/10 Rpt: 11/15	Hernandez, Christopher (Mr.) 00000055
4	Date	5 Payee name
	12/07/2024	Molina, Jonathon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$180.00	1625 James Chisum
		El Paso, TX 79936
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
ľ	expenditure to benefit C/O	
H	Date	
	12/16/2024	Payee name  Moling Topothon
L		Molina, Jonathon
	Amount (\$)	Payee address; City; State; Zip Code
	\$270.00	1625 James Chisum
		El Paso, TX 79936
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Canvassing
		Canvassing
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	12/07/2024	Paz, Deborah
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.00	2631 Hamiltion B
	φου.υυ	2031 Hailiiliuoli D
		FI Page TV 70020
		El Paso , TX 79930
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Canvassing
一	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
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### 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/Officenoider/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: 8/10 Rpt: 12/15	Hernandez, Christopher (Mr.) 00000055	
4	Date	5 Payee name	_
	12/16/2024	Paz, Deborah	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$80.00	2631 Hamiltion B	
		El Paso , TX 79930	
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	
		Ganvassing	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Pavee name	=
	12/09/2024	Sam's Club	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$27.32	7001 Gateway Blvd W	
		El Paso, TX 79925	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Gas for Canvassing	
		Out to Carracomy	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	_
	12/07/2024	Sanchez, Kimberly	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$100.00	14698 Ava Leigh Ave	
		El Paso, TX 79938	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	EXI ENDITORE	Conversing	
		Canvassing	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_
l			

### SCHEDULE F1

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

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

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

	Candidate/Officenoider/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: 9/10 Rpt: 13/15	Hernandez, Christopher (Mr.) 00000055
4	Date	5 Payee name
	12/16/2024	Sanchez, Kimberly
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$490.00	14698 Ava Leigh Ave
	!	
		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
	!	Canvassing
	1	Carryassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	12/16/2024	Singleton, Rosalinda
	Amount (\$)	Payee address; City; State; Zip Code
	\$390.00	5001 Sean Haggerty
	!	
		El Paso, TX 79924
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
	!	Canvassing
	!	Gaintasonig
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/08/2024	Stripe Payments Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$279.11	354 Oyster Point Boulevard
	!	
		South San Francisco, CA 94080
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Fees
	1	rees
	0 1: 0 1: 0	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

12/07/2024 Torres, Angelique  6 Amount (\$)	l	Credit Card Payment	The Instruction Guide explains how to complete this form.	
4 Date 12/07/2024 5 Payee andress; City; State; Zip Code 13/08 Avalon El Paso, TX 79925  8 PURPOSE OF EXPENDITURE  (a) Category (See Categores Insted at the top of this schedule) Canvassing  9 Complete ONLY if direct, experiment to benefit C/OH Date 12/14/2024 Amount (\$) Payee address; City; State; Zip Code 24/4 Alameda El Paso, TX 79907  PURPOSE OF EXPENDITURE  (a) Category (See Categores Insted at the top of this schedule) Feyer diffusive to benefit C/OH  Date 12/14/2024 Amount (\$) Payee name 2/14/2024  S48.94  (a) Category (See Categores Insted at the top of this schedule) Food/Beverage Expense  (b) Description Greek if twent causate of Treas. Complete Schedule T. Greek if twent causa	1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
12/07/2024  Torres, Angelique  Amount (\$)  S240.00  Torres, Angelique  Torres, Carplete CNLT, if direct  Torres, Angelique  Torres, Carplete Control  Torres, Tangelique  Torres, Carplete Control  Torres, Tangelique  Torres, Carplete Control  Torres, Tangelique  Torres, Complete Control  Torres, Carplete Control  Torres, Tangelique  Torres, Complete Control  Torres, Carplete Control  T		Sch: 10/10 Rpt: 14/15	Hernandez, Christopher (Mr.) 00000055	
Amount (\$)	4	Date	5 Payee name	_
S240.00   1308 Avalon   El Paso, TX 79925		12/07/2024	Torres, Angelique	
El Paso, TX 79925   (a) Category (Size Categories listed at the top of this schedule)   Candidate/Office holder name   Office sought   Office held	6	Amount (\$)	7 Payee address; City; State; Zip Code	_
Second part   Complete CNLY   if direct expenditure to benefit C/OH	l	\$240.00	1308 Avalon	
Second part   Complete CNLY   if direct expenditure to benefit C/OH				
Salaries/Wages/Contract Labor    Check if arraw outside of Texas. Complete Schedule 7.   Check if arraw outside of Texas. Complete Schedule 7.   Check if Austin, TX. officeholder Inling expense Canvassing			El Paso, TX 79925	
Salaries/Wages/Contract Laudi    Check if Austin, TX, officeholder ining expense	8		(a) Category (See Categories listed at the top of this schedule) (b) Description	
Canvassing   Canvassing			Galaries/ Wages/ Goriff act Easor	
9 Complete ONLY if direct expenditure to benefit C/OH  Date 12/14/2024				
Date 12/14/2024			Ganvassing	
Date 12/14/2024	9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
12/14/2024   Walmart	ľ			
12/14/2024   Walmart	H	Date	Pavee name	=
\$48.94   9441 Alameda  El Paso, TX 79907  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if Tavael outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Inving expense Election Night Party  Complete QNLY if direct expenditure to benefit C/OH  Date 12/31/2024  Amount (\$) Payee name WestStar Bank  Amount (\$) Payee address; City; State; Zip Code 601 N Mesa St Suite 1100  El Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if Tavael outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Inving expense Service Fee  Complete QNLY if direct  Candidate/Officeholder name Office sought  Office beld			·	
\$48.94   9441 Alameda  El Paso, TX 79907  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if Tavael outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder Iving expense Election Night Party  Complete QNLY if direct expenditure to benefit C/OH  Date 12/31/2024  Amount (\$) Payee name WestStar Bank  Amount (\$) Payee address; City; State; Zip Code 601 N Mesa St Suite 1100  El Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if Tavael outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Service Fee  Complete QNLY if direct  Candidate/Officeholder name Office sought Office held	┝			_
EI Paso, TX 79907  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if Iravel outside of Texas. Complete Schedule T. Check if Auslin, TX, officeholder living expense Election Night Party  Complete ONLY if direct expenditure to benefit C/OH  Date 12/31/2024  Payee name WestStar Bank  Amount (\$) Payee address; City; State; Zip Code 601 N Mesa St Suite 1100  EI Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) ACCOUnting/Banking  (b) Description Check if Auslin, TX, officeholder Texas. Complete Schedule T. Check if Auslin, TX, officeholder Iving expense Service Fee  Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description   Check if ravel outside of Texas. Complete Schedule T.		,		
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description   Check if ravel outside of Texas. Complete Schedule T.			El Paso. TX 79907	
Food/Beverage Expense    Complete ONLY if direct expenditure to benefit C/OH    Date   Payee name   WestStar Bank	⊢	PURPOSE		_
Complete ONLY if direct expenditure to benefit C/OH  Date Payee name WestStar Bank  Amount (\$) Payee address; City; State; Zip Code 601 N Mesa St Suite 1100  El Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking  Check if Austin, TX, officeholder living expense Election Night Party  Office held  Office sought Office held		OF	l	
Complete ONLY if direct expenditure to benefit C/OH  Date	l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
Date 12/31/2024 Payee name WestStar Bank  Amount (\$) Payee address; City; State; Zip Code 601 N Mesa St Suite 1100  EI Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			Election Night Party	
Date 12/31/2024 Payee name WestStar Bank  Amount (\$) Payee address; City; State; Zip Code 601 N Mesa St Suite 1100  EI Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	┡	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold	_
12/31/2024 WestStar Bank  Amount (\$) Payee address; City; State; Zip Code  \$20.00 601 N Mesa St Suite 1100  El Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			<b>y</b>	
12/31/2024 WestStar Bank  Amount (\$) Payee address; City; State; Zip Code  \$20.00 601 N Mesa St Suite 1100  El Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	H	Data	Davies same	_
Amount (\$)  Payee address; City; State; Zip Code  601 N Mesa St Suite 1100  El Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Service Fee  Complete ONLY if direct Candidate/Officeholder name Office sought Office held	l			
\$20.00 601 N Mesa St Suite 1100  El Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	L			
El Paso, TX 79901  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	l			
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	l	Ψ20.00	001 N Wesa St Suite 1100	
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			El Paco, TV 70001	
OF EXPENDITURE  Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Service Fee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	L	DUDDOOF		
EXPENDITURE    Check if Austin, TX, officeholder living expense	l			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	l	EXPENDITURE	/ Accounting/Danking	
	l		Service Fee	
	L			
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	L	experiulture to beliefft C/OI	1	

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 15/15 Hernandez, Christopher (Mr.) 00000055 Date Payee name 12/14/2024 Fair Data LLC 6 Amount (\$) Payee address; City; State; Zip Code \$197.21 711 N Copia Reimbursement from political contributions intended El Paso, TX 79903 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Text Messaging** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH