CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers): 00000068

2 Total pages filed: 74

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 07/21/2026

Date Hand-delivered or Date Postmarked:

Receipt #: | Amount:

Date Processed:

Date Imaged:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR	FIRST	MI
Mr.	Arturo	
NICKNAME	**LAST**	**SUFFIX**
	Alluin	

4 ORIGINAL REPORT TYPE

- [ ] January 15
- [X] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded modified reporting limit
- [ ] 15th day after campaign treasurer appointment (officeholder only)
- [ ] Final Report (Attach C/OH-FR)
- [ ] Other (specify)

5 ORIGINAL PERIOD COVERED

Month	Day	Year		Month	Day	Year
01/01/2026			THROUGH	06/30/2026		

6 EXPLANATION OF CORRECTION

This amendment report updates the description of an in-kind contribution to more accurately reflect the campaign-related services provided. No changes were made to the contributor, amount, date, or report totals.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

- [X] **Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.
- [ ] **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Arturo Alluin

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers): 00000068

2 Total pages filed: 74

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 07/21/2026

Date Hand-delivered or Date Postmarked:

Receipt #: | Amount:

Date Processed:

Date Imaged:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR	FIRST	MI
Mr.	Arturo	

NICKNAME	LAST	SUFFIX
	Alluin	

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE

16 Silver Crest Dr.

El Paso, TX 79902

5 CAMPAIGN TREASURER NAME

MS / MRS / MR	FIRST	MI
Ms.	Rosa Linda	

NICKNAME	LAST	SUFFIX
Linda	Hernandez	

6 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

1245 Calle Lago

El Paso, TX 79912

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(915) 288-1953

8 REPORT TYPE

- ☐ January 15
- ☐ 30th day before election
- ☐ Runoff
- ☐ 15th day after campaign treasurer appointment (officeholder only)
- ☒ July 15
- ☐ 8th day before election
- ☐ Exceeded modified reporting limit
- ☐ Final Report (Attach C/OH-FR)

9 PERIOD COVERED

Month Day Year: 01/01/2026 THROUGH Month Day Year: 06/30/2026

10 ELECTION

ELECTION DATE: Month Day Year: 11/03/2026

ELECTION TYPE

- ☐ Primary
- ☐ Runoff
- ☐ Other
- ☒ General
- ☐ Special

11 OFFICE

OFFICE HELD (if any): Place El Paso, TX District District 8 El Paso

12 OFFICE SOUGHT (if known): Place El Paso, TX District District 8

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C / OH NAME	Alluin, Arturo (Mr.)	**14** Filer ID (Ethics Commission Filers)	00000068

15 NOTICE FROM POLITICAL COMMITTEE(S)

☐ Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	**$** 0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	**$** 30,241.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	**$** 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	**$** 37,199.89
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	**$** 8,518.99
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	**$** 35,000.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Arturo Alluin

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering | Printed name of officer administering | Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

18 FILER NAME	**19** Filer ID (Ethics Commission Filers)
Alluin, Arturo (Mr.)	00000068

20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	**$** 26,741.00
2.	[X]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	**$** 3,500.00
3.	[ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	**$**
4.	[X]	SCHEDULE E: LOANS	**$** 35,000.00
5.	[X]	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$** 19,960.26
6.	[ ]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	**$**
7.	[ ]	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	**$**
8.	[X]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	**$** 7,696.58
9.	[X]	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	**$** 9,543.05
10.	[ ]	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	**$**
11.	[ ]	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$**
12.	[ ]	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	**$**

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 1/10 Rpt: 5/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/22/2026	Alba, Karla G.	$1,000.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79924	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Self employed	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/04/2026	Alejandra, Nuno (Mrs.)	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79932	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/01/2026	Alluin, Arturo (Mr.)	$25.00
	Contributor address; City; State; Zip Code: El Paso, TX 79935	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Business owner	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/22/2026	Antonio, Beltran Cardenas (Mr.)	$1,000.00
	Contributor address; City; State; Zip Code: Tolleson, AZ 85353	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/22/2026	Bailey, Melanie	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79934	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 2/10 Rpt: 6/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/22/2026	Barraza, Tiffini (Mrs.)	$2,000.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79925	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Owner	Warrior Allegiance

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/25/2026	Barraza, Tiffini (Mrs.)	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79925	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Owner	Warrior Allegiance

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2026	Barron, Armando A. (Mr.)	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/01/2026	Barron, Hector (Mr.)	$500.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2026	Borrego, Elsa (Mrs.)	$500.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Self Employed	Culture First Consultant

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 3/10 Rpt: 7/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/22/2026	Connor, Luz Elena (Mrs.)	$400.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79912	
8 Principal occupation / Job title (See Instructions)		**9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/11/2026	Cuevas, Devin (Mr.)	$55.00
	Contributor address; City; State; Zip Code: El Paso, TX 79915	
Principal occupation / Job title (See Instructions): Business owner		Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/21/2026	DBA Mirza MRO & Safety Supplies	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79932	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/20/2026	De Santos, Richard (Mr.)	$500.00
	Contributor address; City; State; Zip Code: TX	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/20/2026	Dipp, Paul (Mr.)	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79940-0055	
Principal occupation / Job title (See Instructions): Owner		Employer (See Instructions): Plaza Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 4/10 Rpt: 8/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/11/2026	Dipp, Paul (Mr.)	$1,000.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79940-0055	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Owner	Plaza Properties

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2026	Dominguez, Nicolas (Mr.)	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79938	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
retired	Communty College

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/06/2026	Duran, Pablo (Mr.)	$2,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79932	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Owner	Field of Dreams

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/27/2026	Enriquez, Lisa (Ms.)	$55.00
	Contributor address; City; State; Zip Code: El Paso, TX	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/22/2026	Fernandez, Eduardo (Mr.)	$499.00
	Contributor address; City; State; Zip Code: El Paso, TX 79936	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Owner	Edwards Homes

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 5/10 Rpt: 9/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
06/09/2026	Fernandez, Eduardo (Mr.)	$499.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79936	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Owner	Edwards Homes

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
05/30/2026	Gallardo, Carlos (Mr.)	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/16/2026	Gonzalez, Marcela (Ms.)	$75.00
	Contributor address; City; State; Zip Code: El Paso, TX 79922	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
05/05/2026	Griffin, Keli	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79907-4410	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
05/30/2026	Holguin, Yvette (Mrs.)	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79903	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 6/10 Rpt: 10/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
06/11/2026	Kallman, Rebecca Elisa (Ms.)	$150.00
	6 Contributor address; City; State; Zip Code: El Paso , TX 79922-2107	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/23/2026	Levy, Michael (Mr.)	$25.00
	Contributor address; City; State; Zip Code: El Paso, TX	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/22/2026	Ludeman, Marchelle (Ms.)	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	
Principal occupation / Job title (See Instructions): assistant	Employer (See Instructions): Dr. Hermann	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
05/20/2026	Lyle Todd, James Arthur (Mr.)	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902-4402	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/21/2026	Mares, Elia (Mrs.)	$500.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 7/10 Rpt: 11/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/14/2026	Marin, Raul Ricardo (Mr.)	$1,000.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79912-1800	
8 Principal occupation / Job title (See Instructions): Self employee	**9** Employer (See Instructions): Sushiitto	
Date: 05/30/2026	Full name of contributor / out-of-state PAC (ID#:_____): Martinez, Sergio (Mr.)	Amount of Contribution ($): $150.00
	Contributor address; City; State; Zip Code: Canutillo, TX 79835-8949	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Date: 04/22/2026	Full name of contributor / out-of-state PAC (ID#:_____): Miner, Sylvia B. (Mrs.)	Amount of Contribution ($): $1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79936	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Date: 06/11/2026	Full name of contributor / out-of-state PAC (ID#:_____): Moreno, Monica (Ms.)	Amount of Contribution ($): $200.00
	Contributor address; City; State; Zip Code: El Paso, TX 79930	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Date: 04/23/2026	Full name of contributor / out-of-state PAC (ID#:_____): Moreno, Taylor (Ms.)	Amount of Contribution ($): $250.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 8/10 Rpt: 12/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/22/2026	Perez Lara, Ana Laura	$1,000.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79911	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
	self-employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2026	Peña, Adrian (Mr.)	$499.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
COO	Edward's Homes

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2026	Ponce Canales, Marilola (Ms.)	$50.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/21/2026	Quiñonez Gomez, Patricia (Mrs.)	$1,000.00
	Contributor address; City; State; Zip Code: El Paso , TX 79936	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Self employed	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2026	Salas, Rafael	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Lawyer	Law Offices of Rafael Salas, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 9/10 Rpt: 13/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/11/2026	Saldana, Hugo (Mr.)	$100.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79902	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Architect	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/01/2026	Sanchez, Mario (Mr.)	$55.00
	Contributor address; City; State; Zip Code: El Paso, TX	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/04/2026	Sanchez Muñoz, Richard Zooel (Mr.)	$1,000.00
	Contributor address; City; State; Zip Code: El Paso, TX 79924	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
self employed	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/22/2026	Sayklay, Joseph (Mr.)	$250.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/16/2026	Thurmond-Bengston, Elizabeth (Mrs.)	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 10/10 Rpt: 14/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
05/30/2026	Valles, Javier (Mr.) **6** Contributor address; City; State; Zip Code El Paso, TX 79912	$55.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Realtor	One Realty Group

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2026	Villalobos, Ricardo (Mr.) Contributor address; City; State; Zip Code El Paso, TX 79912	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
realtor	Home Pros Real Estate Group

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/25/2026	Wendy, Lanski (Mrs.) Contributor address; City; State; Zip Code El Paso, TX 79912	$50.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
servpro agent	Servpro

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2026	Wong, Francisco J. (Mr.) Contributor address; City; State; Zip Code El Paso, TX 79902-1925	$499.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/27/2026	Wright, Geoffrey C. (Mr.) Contributor address; City; State; Zip Code El Paso, TX 79902	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS — **$**

5 Date	**6** Full name of contributor / **7** Contributor address; City; State; Zip Code	**8** Amount of contribution ($)	**9** In-kind contribution description
06/11/2026	Algos, Nadim El Paso, TX 79901	$2,500.00	Media Production Services

☐ out-of-state PAC (ID#:_____) ☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	**11** Employer (FOR NON-JUDICIAL) (See instructions)
Owner	P.R.A Marketing
12 Contributor's principal occupation (FOR JUDICIAL)	**13** Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	**15** Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description
06/11/2026	Calvo, Jairo El Paso, TX 79912	$1,000.00	haircut services; 2x month for 9 months ($50/cut)

☐ out-of-state PAC (ID#:_____) ☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)
Hair stylist	Mix Salon
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: Sch: 1/1 Rpt: 16/74

2 FILER NAME: Alluin, Arturo (Mr.)

3 Filer ID (Ethics Commission Filers): 00000068

4 TOTAL OF UNITEMIZED LOANS — **$**

5 Date of loan	**7** Name of lender	**9** Loan Amount ($)
03/01/2026	Alluin, Arturo (Mr.) ☐ out-of-state PAC (ID#:_____)	$20,000.00

6 Is lender a financial institution?	**8** Lender address; City; State; Zip Code	**10** Interest Rate / **11** Maturity Date
No	El Paso, TX 79935	11/01/2026

12 Principal occupation / Job title (See Instructions)	**13** Employer (See Instructions)
Business owner	

14 Description of Collateral	**15** Check if personal funds were deposited into political account (See Instructions)
☒ None	☐

16 GUARANTOR INFORMATION	**17** Name of guarantor	**19** Amount Guaranteed ($)
☐ not applicable	Alluin, Arturo (Mr.)	$20,000.00
	18 Guarantor address; City; State; Zip Code: El Paso, TX 79935	

20 Principal occupation	**21** Employer (See Instructions)
Business Owner	Guadalupe Mountains Foods & Distributors Inc

Date of loan	Name of lender	Loan Amount ($)
05/01/2026	Arturo, Alluin (Mr.) ☐ out-of-state PAC (ID#:_____)	$15,000.00

Is lender a financial institution?	Lender address; City; State; Zip Code	Interest Rate / Maturity Date
No	El Paso, TX 79935	11/03/2026

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Business owner	Sushiitto

Description of Collateral	Check if personal funds were deposited into political account (See Instructions)
☒ None	☒

GUARANTOR INFORMATION	Name of guarantor	Amount Guaranteed ($)
☐ not applicable	Alluin, Arturo (Mr.)	$15,000.00
	Guarantor address; City; State; Zip Code: El Paso, TX 79935	

Principal occupation	Employer (See Instructions)
Business owner	Sushiitto

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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: 1/9 Rpt: 17/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
05/19/2026	Cabrera , Nathalia (Ms.)

6 Amount ($)	7 Payee address; City; State; Zip Code
$200.00	200 N Mesa Hills Dr Apt 706 El Paso, TX 79912

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Coordinator	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event Coordination for campaign volunteer/community event.

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/04/2026	Cabrera , Nathalia (Ms.)

Amount ($)	Payee address; City; State; Zip Code
$500.00	200 N Mesa Hills Dr Apt 706 El Paso, TX 79912

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Campaign Coordinator	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Coordinator

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/08/2026	Cabrera , Nathalia (Ms.)

Amount ($)	Payee address; City; State; Zip Code
$500.00	200 N Mesa Hills Dr Apt 706 El Paso, TX 79912

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Campaign Coordinator	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Coordinator

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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: 2/9 Rpt: 18/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
05/30/2026	Campos, Robert (Mr.)

6 Amount ($)	7 Payee address; City; State; Zip Code
$100.00	1725 Vista Real Dr El Paso, TX 79935

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Rental of tables for campaign fundraising event.

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/30/2026	Delgado, Christian

Amount ($)	Payee address; City; State; Zip Code
$150.00	1320 Calle Del Oro El Paso, TX 79912

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Bartender for event

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/30/2026	Delgado, Christian

Amount ($)	Payee address; City; State; Zip Code
$256.50	1320 Calle del Oro El Paso, TX 79912

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Food supplies for campaign fundraising/community event

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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: 3/9 Rpt: 19/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
05/21/2026	Delgado, Christian

6 Amount ($)	7 Payee address; City; State; Zip Code
$749.48	1320 Calle Del Oro El Paso, TX 79912

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event planner manager

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
06/04/2026	EMAJJ

Amount ($)	Payee address; City; State; Zip Code
$600.00	4120 Rio Bravo Suite 110 El Paso, TX 79902

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Public Relations & Marketing	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Public Relations & Marketing

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/07/2026	EMAJJ

Amount ($)	Payee address; City; State; Zip Code
$900.00	4120 Rio Bravo Suite 110 El Paso, TX 79902

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Public Relations & Marketing	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Public Relations & Marketing

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/9 Rpt: 20/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/08/2026	EMAJJ

6 Amount ($)	7 Payee address; City; State; Zip Code
$600.00	4120 Rio Bravo Suite 110 El Paso, TX 79902

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Public relations and marketing

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/30/2026	Esquivel, Juan (Mr.)

Amount ($)	Payee address; City; State; Zip Code
$450.00	1050 Sunldand Park Dr Ste A-700 El Paso, TX 79922

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Catering La Taqueria Tradicional Inc.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
06/23/2026	LiNeon

Amount ($)	Payee address; City; State; Zip Code
$219.25	515 Hague Dr. El Paso, TX 79902

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printed banners

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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: 5/9 Rpt: 21/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
06/04/2026	Nathalia, Cabrera (Ms.)

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00	200 N Mesa hills Dr #706 El Paso, TX 79912-7538

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Campaign Coordinator	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign coordination and volunteer management services

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/27/2026	Ortega, Edgar (Mr.)

Amount ($)	Payee address; City; State; Zip Code
$90.00	615 Lomaland Dr. El Paso, TX 79907

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Waiter

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/17/2026	Pearl Divers

Amount ($)	Payee address; City; State; Zip Code
$604.03	115 Durango St Ste C El Paso, TX 79901

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Paid for white wine and food

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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: 6/9 Rpt: 22/74	Alluin, Arturo (Mr.)	00000068

4 Date: 04/27/2026

5 Payee name: Puentes, Jose

6 Amount ($): $135.00

7 Payee address; City; State; Zip Code: 917 Wyoming Ave Apt 14, El Paso, TX 79902

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Event Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Waiter

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date: 04/27/2026

Payee name: Reyes, Natalia Sarah (Ms.)

Amount ($): $135.00

Payee address; City; State; Zip Code: 12554 Paseo Rosannie Ave, El Paso, TX 79928

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Event Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Waitress

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

---

Date: 04/10/2026

Payee name: Rios, Natalya

Amount ($): $350.00

Payee address; City; State; Zip Code: 11837 Jim Thorpe Dr., El Paso, TX 89936

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Event Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Website design

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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: 7/9 Rpt: 23/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/27/2026	Rodriguez, Alonso

6 Amount ($)	7 Payee address; City; State; Zip Code
$90.00	718 S El Paso St #641 El Paso, TX 79901

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Waiter

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/04/2026	Salcido, Isabelle (Ms.)

Amount ($)	Payee address; City; State; Zip Code
$5,000.00	4012 Tierra Morena Dr El Paso, TX 79938

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Consulting Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Advisor

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/07/2026	Salcido, Isabelle (Ms.)

Amount ($)	Payee address; City; State; Zip Code
$5,301.00	4012 Tierra Morena Dr El Paso, TX 79938

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Marketing Material

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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: 8/9 Rpt: 24/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/27/2026	Sarah , Rios (Ms.)

6 Amount ($)	7 Payee address; City; State; Zip Code
$90.00	11045 Bob Stone Dr. El Paso, TX 79936

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Waitress

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
06/04/2026	Tena, Vanessa (Ms.)

Amount ($)	Payee address; City; State; Zip Code
$500.00	1712 Breeder Cup Way El Paso, TX 79928

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Coordinator	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event Coordinator

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/07/2026	Tena, Vanessa (Ms.)

Amount ($)	Payee address; City; State; Zip Code
$500.00	1712 Breeder Cup Way El Paso, TX 79928

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign event organizer

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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: 9/9 Rpt: 25/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/13/2026	Tena, Vanessa (Ms.)

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00	1712 Breeder Cup Way El Paso, TX 79928

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign organizer

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/27/2026	Uribe, Isabelle (Ms.)

Amount ($)	Payee address; City; State; Zip Code
$90.00	409 Caney Way El Paso, TX 79915

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Waitress

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/05/2026	Valverde, Miguel

Amount ($)	Payee address; City; State; Zip Code
$850.00	El Paso, TX

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Media Digital Marketing	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Media Digital Marketing

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/28 Rpt: 26/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
03/30/2026	Julio's

7 Amount ($)	8 Payee address; City; State; Zip Code
$45.34	3630 Joe Battle Blvd El Paso, TX 79938

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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
Community outreach meeting.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

Date	Payee name
03/26/2026	Hotel Paso Del Norte

Amount ($)	Payee address; City; State; Zip Code
$211.62	10n Henry Trost CT. El Paso, TX 79901

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Constituent meeting

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/28 Rpt: 27/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
04/19/2026	Ambar

7 Amount ($)	8 Payee address; City; State; Zip Code
$216.73	106 W Mills Ave El Paso, TX 79901

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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
Meeting for campaign.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

Date	Payee name
04/21/2026	Alon

Amount ($)	Payee address; City; State; Zip Code
$61.75	4140 N Mesa St El Paso, TX 79902

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Gasoline for campaign purposes.

(b) Description
[ ] Check if travel outside of Texas. Complete Schedule T.
[ ] Check if Austin, TX, officeholder living expense
Gasoline for campaign purposes. Picking up items for events: tables, linens, food, beverages, signs.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/28 Rpt: 28/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
05/01/2026	The Podium

7 Amount ($)	8 Payee address; City; State; Zip Code
$68.09	1400 Texas Ave El Paso, TX 79901

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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
Community outreach meeting.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

Date	Payee name
05/06/2026	Hotel Paso Del Norte

Amount ($)	Payee address; City; State; Zip Code
$273.89	10n Henry Trost CT. El Paso, TX 79901

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Campaign strategy meeting.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/28 Rpt: 29/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 05/06/2026

6 Payee name: Los 3 Gallegos

7 Amount ($): $53.12

8 Payee address; City; State; Zip Code: 10801 Pebble Hills, El Paso, TX 79935

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 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. Fundraising planning meeting.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date: 02/26/2026

Payee name: Mamacitas

Amount ($): $90.23

Payee address; City; State; Zip Code: 325 N Kansas, El Paso, TX 79901

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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. Campaign kickoff planning meeting.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/28 Rpt: 30/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
02/18/2026	Great American Juarez

7 Amount ($)	8 Payee address; City; State; Zip Code
$105.46	AV DEL CHARRO 215 L-1 SICOMOROS Juarez Chihuahua 32349 Mexico

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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

Constituent engagement meeting.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

Date	Payee name
02/24/2026	Doka Brunch

Amount ($)	Payee address; City; State; Zip Code
$36.81	6006 North Mesa St STE 106 El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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

Volunteer recruitment meeting.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/28 Rpt: 31/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
03/04/2026	Meduza

7 Amount ($)	8 Payee address; City; State; Zip Code
$98.72	5411 North Mesa Street, Ste 1 El Paso, TX 79912

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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
Fundraising planning meeting.

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

Date	Payee name
02/17/2026	Corner Bakery Cafe

Amount ($)	Payee address; City; State; Zip Code
$20.33	655 Sunland Park Drive El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Volunteer recruitment meeting.

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/28 Rpt: 32/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 04/14/2026

6 Payee name: Alon

7 Amount ($): $65.78

8 Payee address; City; State; Zip Code: 4140 N Mesa St, El Paso, TX 79902

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Gasoline for campaign puroposes.

(b) Description: [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

Gasoline for campaign purposes. For example, buying items for events, food, beverages, signs,

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name | Office sought | Office held

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Date: 03/13/2026

Payee name: Meduza

Amount ($): $105.59

Payee address; City; State; Zip Code: 5411 North Mesa Street, Ste 1, El Paso, TX 79912

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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

Fundraising planning meeting.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo	City council Place El Paso	None Place El Paso District

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/28 Rpt: 33/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
04/30/2026	Sushiitto

7 Amount ($)	8 Payee address; City; State; Zip Code
$105.64	601 North Mesa Street Suite 120 El Paso, TX 79901

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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
Fundraising planning meeting.

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

Date	Payee name
03/23/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$46.59	5411 North Mesa Street, Ste 1 El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Fundraising planning meeting

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/28 Rpt: 34/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
05/07/2026	Oak and Antler

7 Amount ($)	8 Payee address; City; State; Zip Code
$115.37	317 E Mills Ave El Paso, TX 79901

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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
Fundraising planning meeting

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

Date	Payee name
04/09/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$74.18	5411 North Mesa Street, Ste 1 El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Fundraising event

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Arturo, Arturo	city council Place El Paso District	None Place El Paso District

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/28 Rpt: 35/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
05/13/2026	T Mobile

7 Amount ($)	8 Payee address; City; State; Zip Code
$570.64	2720 N Mesa St Ste A El Paso, TX 79902

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Phone for campaign

(b) Description
[ ] Check if travel outside of Texas. Complete Schedule T.
[ ] Check if Austin, TX, officeholder living expense
Celular phone for campaign

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

Date	Payee name
03/23/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$46.59	5411 North Mesa Street, Ste 1 El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Fundraising planning meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo	city council Place El Paso District	None Place El Paso District

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/28 Rpt: 36/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
03/07/2026	Rocco Cafe

7 Amount ($)	8 Payee address; City; State; Zip Code
$39.33	Av Del Charro 215 INT 1A Juarez Chihuahua 32349 Mexico

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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

Campaign strategy meeting

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/13/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$133.42	5411 North Mesa Street, Ste 1 El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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

Community outreach meeting

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 12/28 Rpt: 37/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 03/26/2026

6 Payee name: Hotel Paso Del Norte

7 Amount ($): $23.82

8 Payee address; City; State; Zip Code: 10n Henry Trost CT.

El Paso, TX 79901

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Transportation Equipment & Related Expense

(b) Description
[ ] Check if travel outside of Texas. Complete Schedule T.
[ ] Check if Austin, TX, officeholder living expense
Parking charges for event at Hotel PDN for community outreach.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name; Office sought; Office held

---

Date: 04/01/2026

Payee name: Sushiitto

Amount ($): $2,116.12

Payee address; City; State; Zip Code: 601 North Mesa Street Suite 120

El Paso, TX 79901

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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
Campaign kickoff event

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District None Place El Paso District	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 13/28 Rpt: 38/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 03/05/2026

6 Payee name: Los Arcos

7 Amount ($): $208.99

8 Payee address; City; State; Zip Code: AV PASEO TRIUNFO DE LA REPUBLICA 2220 PARTIDO ROMERO

Juarez Chihuahua 32030 Mexico

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 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
Campaign meeting

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

---

Date: 03/03/2026

Payee name: Meduza

Amount ($): $57.89

Payee address; City; State; Zip Code: 5411 North Mesa Street, Ste 1

El Paso, TX 79912

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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
Campaign fundraising meeting

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name: Alluin, Arturo — Office sought: city council Place El Paso District — Office held: None Place El Paso District

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/28 Rpt: 39/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 05/11/2026

6 Payee name: Ardovinos

7 Amount ($): $55.55

8 Payee address; City; State; Zip Code: 206 Cincinnati, El Paso, TX 79902

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 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. Meeting for campaign fundraising.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

---

Date: 03/08/2026

Payee name: Great American Juarez

Amount ($): $160.50

Payee address; City; State; Zip Code: AV DEL CHARRO 215 L-1 SICOMOROS, Juarez Chihuahua 32349 Mexico

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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. Campaing meeting

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 15/28 Rpt: 40/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
02/27/2026	Sushiitto

7 Amount ($)	8 Payee address; City; State; Zip Code
$80.55	601 North Mesa Street Suite 120 El Paso, TX 79901

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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

Campaign kickoff strategy meeting.

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

Date	Payee name
02/21/2026	APLPAY Light Haus PR

Amount ($)	Payee address; City; State; Zip Code
$490.00	14192 Rattler PT DR El Paso, TX 79938

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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

Headshots

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 16/28 Rpt: 41/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
05/12/2026	Meduza

7 Amount ($)	8 Payee address; City; State; Zip Code
$129.94	5411 North Mesa Street, Ste 1 El Paso, TX 79912

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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

Campaign event fundraising meeting.

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

Date	Payee name
06/23/2026	Sushiitto

Amount ($)	Payee address; City; State; Zip Code
$47.98	601 North Mesa Street Suite 120 El Paso, TX 79901

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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

Campaign fundraising meeting.

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 17/28 Rpt: 42/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 02/10/2026

6 Payee name: DNH* GODADDY

7 Amount ($): $13.19

8 Payee address; City; State; Zip Code: 100 South ML AVE, Tempe, AZ 85281

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 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

Campaign website domain registration and hosting.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date: 04/14/2026

Payee name: Cafe Central

Amount ($): $57.63

Payee address; City; State; Zip Code: 109 N Oregon, El Paso, TX 79901

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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

Campaign strategy meeting.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 18/28 Rpt: 43/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 06/15/2026

6 Payee name: Ali Baba Mediterranean K

7 Amount ($): $32.34

8 Payee address; City; State; Zip Code: 7411 Remcon CIR STE A8, ste a8, El Paso, TX 79912

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 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. Constituent engagement meeting.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date: 05/13/2026

Payee name: 2Ten Coffee

Amount ($): $26.16

Payee address; City; State; Zip Code: 4935 N Mesa Suite 4, El Paso, TX 79912

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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. Donor cultivation meeting.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 19/28 Rpt: 44/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
04/03/2026	Sushiitto

7 Amount ($)	8 Payee address; City; State; Zip Code
$24.25	601 North Mesa Street Suite 120 El Paso, TX 79901

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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

Campaign operations meeting.

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

Date	Payee name
03/13/2026	Grove Brunch Cafe

Amount ($)	Payee address; City; State; Zip Code
$30.53	7470 Cimarron Market Ave Bldg 7 Suite 200 El Paso, TX 79911

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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

Campaign strategy meeting

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 20/28 Rpt: 45/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 04/01/2026

6 Payee name: Sushiitto

7 Amount ($): $20.84

8 Payee address; City; State; Zip Code: 601 North Mesa Street Suite 120, El Paso, TX 79901

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 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. Fundraiser event

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District	None Place El Paso District

Date: 03/13/2026

Payee name: Corner Bakery Cafe

Amount ($): $30.28

Payee address; City; State; Zip Code: 655 Sunland Park Drive, El Paso, TX 79912

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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. Event planning meeting

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/28 Rpt: 46/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
04/08/2026	Amazon

7 Amount ($)	8 Payee address; City; State; Zip Code
$107.17	410 Terry Avenue North Seattle, WA 98109

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Event Expense

(b) Description

[ ] Check if travel outside of Texas. Complete Schedule T.

[ ] Check if Austin, TX, officeholder living expense

Audio for videos and marketing

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/25/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$96.20	5411 North Mesa Street, Ste 1 El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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

Volunteer appreciation meeting.

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	None Place El Paso District	None Place El Paso District

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 22/28 Rpt: 47/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
03/10/2026	IRS

7 Amount ($)	8 Payee address; City; State; Zip Code
$9.87	TX

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): IRS setup

(b) Description
[ ] Check if travel outside of Texas. Complete Schedule T.
[ ] Check if Austin, TX, officeholder living expense
IRS setup

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

Date	Payee name
05/07/2026	Intuit Quickbooks

Amount ($)	Payee address; City; State; Zip Code
$215.00	314 Highland Boulevard Austin, TX 78752

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Democratic party van access.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 23/28 Rpt: 48/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
04/07/2026	Campaign Verify, Inc.

7 Amount ($)	8 Payee address; City; State; Zip Code
$95.00	1215 31st Street NW PO BOX 3554 Washington, DC 20007-9998

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Arturo for El Paso verification	[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense Campaign verify

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/25/2026	Dunkin Donuts

Amount ($)	Payee address; City; State; Zip Code
$49.51	5401 N Mesa St El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense Donuts and coffee for community people at park meeting.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 24/28 Rpt: 49/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 05/25/2026

6 Payee name: Bravo Coffee House, LLC

7 Amount ($): $45.25

8 Payee address; City; State; Zip Code: 2323 Alameda Ave, El Paso, TX 79901

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 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. Campaing fundraisng meeting

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

---

Date: 03/13/2026

Payee name: Great American Steakhouse

Amount ($): $30.53

Payee address; City; State; Zip Code: 9800 Gateway N. Blvd, El Paso, TX 79924

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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. Campaign volunteer meeting

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 25/28 Rpt: 50/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
04/02/2026	Corner Bakery Cafe

7 Amount ($)	8 Payee address; City; State; Zip Code
$30.06	655 Sunland Park Drive El Paso, TX 79912

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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
Event planning meeting and meeting with a district 8 neighbor

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/01/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$203.28	5411 North Mesa Street, Ste 1 El Paso, TX 79912

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Community engagement meeting.

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	city council Place El Paso District None Place El Paso District	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 26/28 Rpt: 51/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 Date	6 Payee name
04/21/2026	Meduza

7 Amount ($)	8 Payee address; City; State; Zip Code
$169.94	5411 North Mesa Street, Ste 1 El Paso, TX 79912

9 TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

10 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
Community outreach meeting

11 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held
Alluin, Arturo	City Council Place El Paso	None Place El Paso District

Date	Payee name
04/14/2026	Cafe Central

Amount ($)	Payee address; City; State; Zip Code
$359.84	109 N Oregon El Paso, TX 79901

TYPE OF EXPENDITURE

[X] Political [ ] Non-Political

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
Campaign strategy meeting.

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 27/28 Rpt: 52/74	Alluin, Arturo (Mr.)	00000068

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD — **$**

5 Date: 03/12/2026

6 Payee name: Harland Clarke

7 Amount ($): $48.82

8 Payee address; City; State; Zip Code: 15955 La Cantera Pkwy, San Antonio, TX 78256

9 TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Checks

(b) Description: [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense — Checks

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name | Office sought | Office held

---

Date: 05/01/2026

Payee name: Corner Bakery Cafe

Amount ($): $30.28

Payee address; City; State; Zip Code: 655 Sunland Park Drive, El Paso, TX 79912

TYPE OF EXPENDITURE: [X] Political [ ] Non-Political

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 — Campaign meeting

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name | Office sought | Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4: Sch: 28/28 Rpt: 53/74	**2** FILER NAME Alluin, Arturo (Mr.)	**3** Filer ID (Ethics Commission Filers) 00000068
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		**$**
5 Date 06/03/2026	**6** Payee name Corner Bakery Cafe	
7 Amount ($) $14.05	**8** Payee address; City; State; Zip Code 655 Sunland Park Drive El Paso, TX 79912	
9 TYPE OF EXPENDITURE	[X] Political [ ] Non-Political	
10 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 Community outreach meeting.
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought / Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/21 Rpt: 54/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
05/13/2026	2Ten Coffee

6 Amount ($)	7 Payee address; City; State; Zip Code
$26.16	4935 N Mesa Suite 4 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/11/2026	AIA El Paso

Amount ($)	Payee address; City; State; Zip Code
$65.00	311 Montana Ave Suite A2-11 El Paso, TX 79902
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense 5K run and fun walk

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/21/2026	APLPAY Light Haus PR

Amount ($)	Payee address; City; State; Zip Code
$490.00	14192 Rattler PT DR El Paso, TX 79938
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Printing Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense printing and publishing

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/21 Rpt: 55/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/09/2026	Albertsons

6 Amount ($)	7 Payee address; City; State; Zip Code
$27.59 ☐ Reimbursement from political contributions intended	3100 Mesa Street El Paso , TX 79902

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	Event Expense	food for event

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/30/2026	Albertsons

Amount ($)	Payee address; City; State; Zip Code
$49.97 ☐ Reimbursement from political contributions intended	3100 Mesa Street El Paso , TX 79902

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	Event Expense	food for event

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
06/15/2026	Ali Baba Mediterranean K

Amount ($)	Payee address; City; State; Zip Code
$32.34 ☐ Reimbursement from political contributions intended	7411 Remcon CIR STE A8, ste a8 El Paso, TX 79912

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	Food/Beverage Expense	Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/21 Rpt: 56/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/14/2026	Alon

6 Amount ($)	7 Payee address; City; State; Zip Code
$65.78	4140 N Mesa St El Paso, TX 79902
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	gasoline	Gasoline for campaign purposes. For example, buying items for events, food, beverages, signs, tables

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/21/2026	Alon

Amount ($)	Payee address; City; State; Zip Code
$61.75	4140 N Mesa St El Paso, TX 79902
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	Gasoline for campaign purposes.	Gasoline for campaign purposes. Picking up items for events: tables, linens, food, beverages, signs.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/08/2026	Amazon

Amount ($)	Payee address; City; State; Zip Code
$107.17	410 Terry Avenue North Seattle, WA 98109
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	Microphone purchase for videos/marketing	Microphone purchase for videos/marketing

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/21 Rpt: 57/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/19/2026	Ambar

6 Amount ($)	7 Payee address; City; State; Zip Code
$216.73 ☐ Reimbursement from political contributions intended	106 W Mills Ave El Paso, TX 79901

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting for campaign.

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/11/2026	Ardovinos

Amount ($)	Payee address; City; State; Zip Code
$55.55 ☐ Reimbursement from political contributions intended	206 Cincinnati El Paso, TX 79902

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/25/2026	Bravo Coffee House, LLC

Amount ($)	Payee address; City; State; Zip Code
$45.25 ☐ Reimbursement from political contributions intended	2323 Alameda Ave El Paso, TX 79901

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/21 Rpt: 58/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/14/2026	Cafe Central

6 Amount ($)	7 Payee address; City; State; Zip Code
$47.63 ☐ Reimbursement from political contributions intended	109 N Oregon El Paso, TX 79901

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/14/2026	Cafe Central

Amount ($)	Payee address; City; State; Zip Code
$299.84 ☐ Reimbursement from political contributions intended	109 N Oregon El Paso, TX 79901

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/07/2026	Campaign Verify, Inc.

Amount ($)	Payee address; City; State; Zip Code
$95.00 ☐ Reimbursement from political contributions intended	1215 31st Street NW PO BOX 3554 Washington, DC 20007-9998

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	identity verification and fraud prevention services	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense identity verification and fraud prevention services

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/21 Rpt: 59/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
03/19/2026	Campos, Jorge Antonio

6 Amount ($)	7 Payee address; City; State; Zip Code
$850.00	15503 Vance Jackson Rd Apt 5205 San Antonio , TX 78249
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Photos	Photo Session ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
06/03/2026	Corner Bakery Cafe

Amount ($)	Payee address; City; State; Zip Code
$14.05	655 Sunland Park Drive El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	Meeting ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/01/2026	Corner Bakery Cafe

Amount ($)	Payee address; City; State; Zip Code
$30.28	655 Sunland Park Drive El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	Meeting ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/21 Rpt: 60/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
02/17/2026	Corner Bakery Cafe

6 Amount ($)	7 Payee address; City; State; Zip Code
$20.33	655 Sunland Park Drive El Paso, TX 79912
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/02/2026	Corner Bakery Cafe

Amount ($)	Payee address; City; State; Zip Code
$30.06	655 Sunland Park Drive El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/15/2026	Corner Bakery Cafe

Amount ($)	Payee address; City; State; Zip Code
$30.28	655 Sunland Park Drive El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/21 Rpt: 61/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
05/14/2026	Corner Bakery

6 Amount ($)	7 Payee address; City; State; Zip Code
$7.78 ☐ Reimbursement from political contributions intended	655 Sunland Park Drive El Paso, TX 79912

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/10/2026	DNH* GODADDY

Amount ($)	Payee address; City; State; Zip Code
$13.19 ☐ Reimbursement from political contributions intended	100 South ML AVE Tempe, AZ 85281

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign website domain registration and hosting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/24/2026	Doka Brunch

Amount ($)	Payee address; City; State; Zip Code
$36.81 ☐ Reimbursement from political contributions intended	6006 North Mesa St STE 106 El Paso, TX 79912

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/21 Rpt: 62/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/25/2026	Dunkin Donuts

6 Amount ($)	7 Payee address; City; State; Zip Code
$49.51 ☐ Reimbursement from political contributions intended	5401 N Mesa St El Paso, TX 79912

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event at park

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/28/2026	EMAJJ

Amount ($)	Payee address; City; State; Zip Code
$600.00 ☐ Reimbursement from political contributions intended	4120 Rio Bravo Suite 110 El Paso, TX 79902

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Public Relations and marketing

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/18/2026	Great American Juarez

Amount ($)	Payee address; City; State; Zip Code
$105.46 ☐ Reimbursement from political contributions intended	AV DEL CHARRO 215 L-1 SICOMOROS Juarez Chihuahua 32349 Mexico

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/21 Rpt: 63/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
03/08/2026	Great American Juarez

6 Amount ($)	7 Payee address; City; State; Zip Code
$160.50	AV DEL CHARRO 215 L-1 SICOMOROS
☐ Reimbursement from political contributions intended	Juarez Chihuahua 32349 Mexico

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/13/2026	Great American Steakhouse

Amount ($)	Payee address; City; State; Zip Code
$30.53	9800 Gateway N. Blvd
☐ Reimbursement from political contributions intended	El Paso, TX 79924

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/13/2026	Grove Brunch Cafe

Amount ($)	Payee address; City; State; Zip Code
$30.53	7470 Cimarron Market Ave Bldg 7 Suite 200
☐ Reimbursement from political contributions intended	El Paso, TX 79911

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/21 Rpt: 64/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
03/12/2026	Harland Clarke

6 Amount ($)	7 Payee address; City; State; Zip Code
$48.82	15955 La Cantera Pkwy San Antonio, TX 78256
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Checks	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Checks

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/06/2026	Hotel Paso Del Norte 1700 Steakhouse

Amount ($)	Payee address; City; State; Zip Code
$273.89	10n Henry Trost CT. El Paso, TX 79901
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign strategy meeting.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/26/2026	Hotel Paso Del Norte

Amount ($)	Payee address; City; State; Zip Code
$23.82	10n Henry Trost CT. El Paso, TX 79901
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Parking charges for event at Hotel PDN for community outreach.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 12/21 Rpt: 65/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
03/26/2026	Hotel Paso Del Norte

6 Amount ($)	7 Payee address; City; State; Zip Code
$211.62 ☐ Reimbursement from political contributions intended	10n Henry Trost CT. El Paso, TX 79901

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Constituent meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/10/2026	IRS

Amount ($)	Payee address; City; State; Zip Code
$9.87 ☐ Reimbursement from political contributions intended	700 E San Antonio Ave El Paso, TX 79901

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	IRS setup payment	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense IRS setup payment

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/07/2026	Intuit Quickbooks

Amount ($)	Payee address; City; State; Zip Code
$215.00 ☐ Reimbursement from political contributions intended	314 Highland Boulevard Austin, TX 78752

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Standard VAN Access	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Standard VAN Access

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 13/21 Rpt: 66/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
03/30/2026	Julio's

6 Amount ($)	7 Payee address; City; State; Zip Code
$45.34	3630 Joe Battle Blvd
☐ Reimbursement from political contributions intended	El Paso, TX 79938

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/06/2026	Los 3 Gallegos

Amount ($)	Payee address; City; State; Zip Code
$53.12	10801 Pebble Hills
☐ Reimbursement from political contributions intended	El Paso, TX 79935

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/05/2026	Los Arcos

Amount ($)	Payee address; City; State; Zip Code
$208.99	AV PASEO TRIUNFO DE LA REPUBLICA 2220 PARTIDO ROMERO
☐ Reimbursement from political contributions intended	Juarez Chihuahua 32030 Mexico

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/21 Rpt: 67/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
02/26/2026	Mamacitas

6 Amount ($)	7 Payee address; City; State; Zip Code
$90.23	325 N Kansas El Paso, TX 79901
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/09/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$74.18	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso, TX

Date	Payee name
04/21/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$169.94	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo	City council Place El Paso	None Place El Paso

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 15/21 Rpt: 68/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
05/01/2026	Meduza

6 Amount ($)	7 Payee address; City; State; Zip Code
$203.28	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alliun, Arturo	City council Place El Paso	None Place El Paso

Date	Payee name
05/12/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$129.94	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

Date	Payee name
03/03/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$57.89	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 16/21 Rpt: 69/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
03/13/2026	Meduza

6 Amount ($)	7 Payee address; City; State; Zip Code
$133.42	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

Date	Payee name
03/23/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$46.59	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

Date	Payee name
03/13/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$105.59	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 17/21 Rpt: 70/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
03/04/2026	Meduza

6 Amount ($)	7 Payee address; City; State; Zip Code
$97.93 ☐ Reimbursement from political contributions intended	5411 North Mesa Street, Ste 1 El Paso, TX 79912

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alliun, Arturo	City Council Place El	None Place El Paso

Date	Payee name
03/04/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$98.72 ☐ Reimbursement from political contributions intended	5411 North Mesa Street, Ste 1 El Paso, TX 79912

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

Date	Payee name
03/23/2026	Meduza

Amount ($)	Payee address; City; State; Zip Code
$46.59 ☐ Reimbursement from political contributions intended	5411 North Mesa Street, Ste 1 El Paso, TX 79912

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 18/21 Rpt: 71/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
03/25/2026	Meduza

6 Amount ($)	7 Payee address; City; State; Zip Code
$96.20	5411 North Mesa Street, Ste 1 El Paso, TX 79912
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

Date	Payee name
05/07/2026	Oak and Antler

Amount ($)	Payee address; City; State; Zip Code
$115.37	317 E Mills Ave El Paso, TX 79901
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
03/07/2026	Rocco Cafe

Amount ($)	Payee address; City; State; Zip Code
$39.33	Av Del Charro 215 INT 1A Juarez Chihuahua 32349 Mexico
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 19/21 Rpt: 72/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
02/25/2026	Snake Agency

6 Amount ($)	7 Payee address; City; State; Zip Code
$235.00	Avenida Licenciado Adolfo Lopez Mateos 1925 Cordova Ame
☐ Reimbursement from political contributions intended	Juarez Chihuahua Mexico

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Logos

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
04/30/2026	Sushiitto

Amount ($)	Payee address; City; State; Zip Code
$105.64	601 North Mesa Street Suite 120
☐ Reimbursement from political contributions intended	El Paso, TX 79901

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo	City Council Place El	None Place El Paso

Date	Payee name
02/27/2026	Sushiitto

Amount ($)	Payee address; City; State; Zip Code
$80.55	601 North Mesa Street Suite 120
☐ Reimbursement from political contributions intended	El Paso, TX 79901

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
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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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 20/21 Rpt: 73/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/01/2026	Sushiitto

6 Amount ($)	7 Payee address; City; State; Zip Code
$2,116.12 ☐ Reimbursement from political contributions intended	601 North Mesa Street Suite 120 El Paso, TX 79901

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Launch event

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

Date	Payee name
06/23/2026	Sushiitto

Amount ($)	Payee address; City; State; Zip Code
$31.18 ☐ Reimbursement from political contributions intended	601 North Mesa Street Suite 120 El Paso, TX 79901

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	

Date	Payee name
04/01/2026	Sushiitto

Amount ($)	Payee address; City; State; Zip Code
$24.25 ☐ Reimbursement from political contributions intended	601 North Mesa Street Suite 120 El Paso, TX 79901

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Meeting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/21 Rpt: 74/74	Alluin, Arturo (Mr.)	00000068

4 Date	5 Payee name
04/01/2026	Sushiitto

6 Amount ($)	7 Payee address; City; State; Zip Code
$20.84	601 North Mesa Street Suite 120 El Paso, TX 79901
☐ Reimbursement from political contributions intended	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	Food/Beverage Expense	meeting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Alluin, Arturo (Mr.)	City Council Place El	None Place El Paso

Date	Payee name
05/13/2026	T Mobile

Amount ($)	Payee address; City; State; Zip Code
$570.64	2720 N Mesa St Ste A El Paso, TX 79902
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	phone for campaign	phone for campaign

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
05/01/2026	The Podium

Amount ($)	Payee address; City; State; Zip Code
$68.09	1400 Texas Ave El Paso, TX 79901
☐ Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
	Food/Beverage Expense	Community outreach meeting.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held