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): 00000008

2 Total pages filed: 16

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 10/26/2026

Date Hand-delivered or Date Postmarked:

Receipt #:

Amount:

Date Processed:

Date Imaged:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR:

FIRST: Jorge

MI:

NICKNAME: Chris

LAST: Canales

SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

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

604 Castile Ave

El Paso, TX 79912

5 CAMPAIGN TREASURER NAME

MS / MRS / MR:

FIRST: Adrianne

MI:

NICKNAME:

LAST: Moody

SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or Business)

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

7344 Golden Sage Dr

El Paso, TX 79911

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(915) 920-7200

8 REPORT TYPE

- ☐ January 15
- ☐ 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)

9 PERIOD COVERED

Month Day Year: 09/25/2026 THROUGH Month Day Year: 10/24/2026

10 ELECTION

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

ELECTION TYPE

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

11 OFFICE

OFFICE HELD (if any): El Paso City Council District District 8 El Paso

12 OFFICE SOUGHT (if known): El Paso City Council District District 8

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C / OH NAME	Canales, Jorge	**14** Filer ID (Ethics Commission Filers)	00000008

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)	**$** 0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	**$** 3,785.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	**$** 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	**$** 18,654.20
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	**$** 4,731.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	**$** 0.00

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.

Jorge Canales

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)
Canales, Jorge	00000008

20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	**$** 3,785.00
2.	[ ]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	**$**
3.	[ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	**$**
4.	[ ]	SCHEDULE E: LOANS	**$**
5.	[ ]	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$**
6.	[ ]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	**$**
7.	[ ]	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	**$**
8.	[X]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	**$** 9,327.10
9.	[X]	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	**$** 9,327.10
10.	[ ]	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	**$**
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: 1/6 Rpt: 4/16

2 FILER NAME: Canales, Jorge

3 Filer ID (Ethics Commission Filers): 00000008

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/16/2026	Ambler, Gloria	$200.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79902	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/11/2026	Bahmueller, Carol	$10.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Clinical Social Worker	Las Cruces Public Schools

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/14/2026	Carter-Tripp, Marshall (Dr.)	$200.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/22/2026	Castillo, Eduardo	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79935	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Private Practice

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/07/2026	Chew, Linda Y.	$200.00
	Contributor address; City; State; Zip Code: El Paso, TX 79930	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired District Court Judge	Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/16

2 FILER NAME: Canales, Jorge

3 Filer ID (Ethics Commission Filers): 00000008

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/15/2026	Cohen, Henry	$100.00
	6 Contributor address; City; State; Zip Code: Roslindale, MA 02131	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Labor Organizer	1199SEIU United Healthcare Workers

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/22/2026	Cummings, Chris	$50.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Executive VP	CIC Limited, Inc.

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/15/2026	DeLeon, Tomas B. & Margaret A. Forbes	$250.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Chief Financial Officer	Novamex

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/15/2026	Diaz, Eduardo	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Director, Ret.	Smithsonian Latino Center

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/23/2026	Dobrowolski, James	$50.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Business Administrator	Prickly Pear Dental Care

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/16

2 FILER NAME: Canales, Jorge

3 Filer ID (Ethics Commission Filers): 00000008

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
10/18/2026	Ezparza, Antonio	$250.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79930	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Owner	Sabores de Mexico

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/23/2026	Gonzalez, B.L. (Mrs.)	$50.00
	Contributor address; City; State; Zip Code: El Paso, TX 79925	

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

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/04/2026	Humphreys, Carlos	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79930	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Librarian	El Paso Community College

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/02/2026	Ito, Victor	$50.00
	Contributor address; City; State; Zip Code: El Paso , TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Market Development Director	ONE Gas

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/19/2026	Kelley, Brian	$50.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Vice President	Hunt Companies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/16

2 FILER NAME: Canales, Jorge

3 Filer ID (Ethics Commission Filers): 00000008

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
10/02/2026	Kelso, Christine	$100.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79902	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Principal Attorney	Christine W. Kelso Attorney

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/18/2026	Kirby, Brian	$50.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Dean of Arts, Communications, CTE, and Social Sciences	El Paso Community College

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/15/2026	Loveridge, Jack	$200.00
	Contributor address; City; State; Zip Code: El Paso, TX 79930	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
CEO and CoFounder	Panoculum

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/15/2026	Negron, Luis	$50.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Deputy Director of Communications	Every Texan

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/21/2026	Ochoa, Edith	$75.00
	Contributor address; City; State; Zip Code: El Paso, TX 79912	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Loan Processor	Raiz Federal Credit Union

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/16

2 FILER NAME: Canales, Jorge

3 Filer ID (Ethics Commission Filers): 00000008

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
10/03/2026	Reynolds, Jakob M.	$25.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79912	
8 Principal occupation / Job title (See Instructions): Senior Trial Attorney	**9** Employer (See Instructions): El Paso County	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/14/2026	Rodriguez, Carmen E. & Jose R. (Sen.)	$250.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	
Principal occupation / Job title (See Instructions): Attorneys	Employer (See Instructions): Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/12/2026	Scherr, James F.	$500.00
	Contributor address; City; State; Zip Code: El Paso, TX 79936	
Principal occupation / Job title (See Instructions): Founding Partner	Employer (See Instructions): Scherr Legate PLLC	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/15/2026	Spalding, Emma C. "Kitty"	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	
Principal occupation / Job title (See Instructions): Librarian	Employer (See Instructions): Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
09/27/2026	Spalding, Mary	$200.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	
Principal occupation / Job title (See Instructions): Director	Employer (See Instructions): El Paso Public Library Foundation	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/16

2 FILER NAME: Canales, Jorge

3 Filer ID (Ethics Commission Filers): 00000008

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
10/15/2026	Sutton, Mindy (The Honorable)	$25.00
	6 Contributor address; City; State; Zip Code: El Paso, TX 79904	

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

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/06/2026	Taggart, Kevin	$150.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Digital Library Services Specialist	OCLC, Inc.

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/08/2026	Tures, Stephen	$100.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Software Engineer	Google

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/06/2026	Urbieta, Susan	$150.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Private Practice

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/15/2026	Vasquez, Esteban	$50.00
	Contributor address; City; State; Zip Code: El Paso, TX 79902	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
President	La Colonial Tortilla Factory, Inc.

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: 1/4 Rpt: 10/16	**2** FILER NAME Canales, Jorge		**3** Filer ID (Ethics Commission Filers) 00000008
4 CREDIT CARD ISSUER	Name of financial institution Chase Bank	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT

(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
$140.44	10/22/2026	10/24/2026

7 PAYEE

(a) Payee name: El Paso Mail and Print

(b) Payee address; City, State, Zip Code: 1144 Vista de Oro Dr, El Paso, TX 79935

8 PURPOSE OF EXPENDITURE

[X] Political
[ ] Non-Political

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

(b) Description: Printing of campaign materials

(c) [ ] 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

PAYMENT

(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
$300.00	10/15/2026	10/24/2026

PAYEE

(a) Payee name: Tibors Craft Cocktails

(b) Payee address; City, State, Zip Code: 115 S Durango St, El Paso, TX 79901

PURPOSE OF EXPENDITURE

[X] Political
[ ] Non-Political

(a) Category (See Categories listed at the top of this schedule): Food/Beverage Expense

(b) Description: Food/beverage for campaign fundraiser event

(c) [ ] 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

PAYMENT

(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
$7,016.53	10/15/2026	10/24/2026

PAYEE

(a) Payee name: El Paso Mail and Print

(b) Payee address; City, State, Zip Code: 1144 Vista de Oro Dr, El Paso, TX 79935

PURPOSE OF EXPENDITURE

[X] Political
[ ] Non-Political

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

(b) Description: Print and direct mail services

(c) [ ] 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

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: 2/4 Rpt: 11/16	Canales, Jorge		00000008
4 CREDIT CARD ISSUER	Name of financial institution: see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT

(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
$35.77	10/15/2026	10/24/2026

7 PAYEE

(a) Payee name: Walmart

(b) Payee address; City, State, Zip Code: 1110 Sunland Park Dr, El Paso, TX 79922

8 PURPOSE OF EXPENDITURE

[X] Political
[ ] Non-Political

(a) Category (See Categories listed at the top of this schedule): Food/Beverage Expense

(b) Description: Food and beverage for campaign fundraiser event

(c) [ ] 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

PAYMENT

(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
$68.44	10/15/2026	10/24/2026

PAYEE

(a) Payee name: Vista Market

(b) Payee address; City, State, Zip Code: 3920 Doniphan Dr, El Paso, TX 79922

PURPOSE OF EXPENDITURE

[X] Political
[ ] Non-Political

(a) Category (See Categories listed at the top of this schedule): Food/Beverage Expense

(b) Description: Food and beverage for campaign fundraiser event

(c) [ ] 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

PAYMENT

(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
$447.27	10/07/2026	10/24/2026

PAYEE

(a) Payee name: Tovar Printing Inc

(b) Payee address; City, State, Zip Code: 1230 Texas Ave, El Paso, TX 79901

PURPOSE OF EXPENDITURE

[X] Political
[ ] Non-Political

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

(b) Description: Printing of campaign materials

(c) [ ] 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

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: 3/4 Rpt: 12/16	**2** FILER NAME Canales, Jorge		**3** Filer ID (Ethics Commission Filers) 00000008
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $32.67	(b) Date of Charge 10/06/2026	(c) Date(s) Credit Card Issuer Paid 10/24/2026
7 PAYEE	(a) Payee name Weglot (Squarespace)		(b) Payee address; City, State, Zip Code 8 Clarkson Street New York, NY 10014
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Website expense		(b) Description Squarespace add-on tool for website translation
	(c) [ ] 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

PAYMENT	(a) Amount Charged $1,097.50	(b) Date of Charge 10/06/2026	(c) Date(s) Credit Card Issuer Paid 10/24/2026
PAYEE	(a) Payee name Yard Sign Plus		(b) Payee address; City, State, Zip Code 2801 Infinite Loop Richmond, TX 77469
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Campaign sign printing
	(c) [ ] 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

PAYMENT	(a) Amount Charged $136.89	(b) Date of Charge 10/01/2026	(c) Date(s) Credit Card Issuer Paid 10/24/2026
PAYEE	(a) Payee name Tovar Printing Inc		(b) Payee address; City, State, Zip Code 1230 Texas Ave El Paso, TX 79901
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Printing of campaign materials
	(c) [ ] 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

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: 4/4 Rpt: 13/16	**2** FILER NAME Canales, Jorge		**3** Filer ID (Ethics Commission Filers) 00000008
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**
6 PAYMENT	(a) Amount Charged $51.59 / (b) Date of Charge 09/26/2026	(c) Date(s) Credit Card Issuer Paid 10/24/2026	
7 PAYEE	(a) Payee name Squarespace	(b) Payee address; City, State, Zip Code 225 Varick St 12th Floor New York, NY 10014	
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Website expense	(b) Description Web hosting service for campaign website	
	(c) [ ] 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

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: Sch: 1/1 Rpt: 14/16	**2** FILER NAME Canales, Jorge	**3** Filer ID (Ethics Commission Filers) 00000008
4 Date 10/24/2026	**5** Payee name Chase Bank	
6 Amount ($) $9,327.10 [X] Reimbursement from political contributions intended	**7** Payee address; City; State; Zip Code 270 Park Avenue New York, NY 10017	
8 **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 Repayment of Balance from Expenditures by Credit Card
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought / Office held

TEXT ANNOTATION

Sch: 1/2 Rpt: 15/16

FILER NAME	Filer ID (Ethics Commission Filers)
Canales, Jorge	00000008

Schedule

Cover Sheet

Information entered by filer as a memo:

I have provided an updated form Appointment of a Campaign Treasurer by a Candidate (Form CTA), but the information has not been updated in this filing system. My treasurer is Dr. Kathleen Staudt, residing at 7289 Cactus Spine Ln El Paso TX 79912. Correct Form CTA is also on file with the El Paso City Clerk.

TEXT ANNOTATION

Sch: 2/2 Rpt: 16/16

FILER NAME	Filer ID (Ethics Commission Filers)
Canales, Jorge	00000008

Schedule

G

Information entered by filer as a memo:

This $9,327.10 is a repayment of expenditures made by credit card during the same reporting period. Expenses will appear double-counted on the cover sheet. The total campaign expenditures for the reporting period were $9,327.10.