FORM C/OH **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 10 MS/MRS/MR CANDIDATE / **FIRST** MI OFFICE USE ONLY **OFFICEHOLDER** Jose NAME **NICKNAME** LAST **SUFFIX** Cabeza de Vaca CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered or Date Postmarked **OFFICEHOLDER** P.O. Box 4111 MAILING Receipt # Amount **ADDRESS** Change of Address McAllen, TX 78501 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI **TREASURER** NAME Mrs. Brandy NICKNAME LAST SUFFIX Voss CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER ADDRESS** P.O. Box 4111, McAllen, Texas 78501 (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 342-6720 PHONE 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 Final Report (Attach C/OH-FR) X reporting limit PERIOD Month Day Year Month Day Year COVERED 01/01/2024 **THROUGH** 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other Runoff General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) McAllen City Commissioner Place 6 Place City Pl. 6 McAllen City Commissioner Place 6 Place City Pl. 6 District McAllen Hidalgo District McAllen

CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM C/OH **COVER SHEET PG 2**

				2 of 10	
13 C / OH NAME	Cabeza de Vaca, Jos	e	14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without the I officeholders are required to report this information	ne candidate's or officet	holder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
Ш	GENERAL				
		COMMITTEE ADDRESS			
-	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	3		
16 CONTRIBUTION TOTALS	TOTAL UNITEM OR GUARANTE	I IZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC'	PLEDGES, LOANS, TRONICALLY)	\$ 0.0	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.0	
	4. TOTAL POLITICAL EXPENDITURES				
CONTRIBUTION BALANCE					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS O TING PERIOD	F THE LAST DAY	\$ 15.0	
17 AFFIDAVIT		We will be a second of the sec			
		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.			
			7/-5		
		Signature of C	andidate or Officeholde	er	
AFFIX NO	TARY STAMP / SEAL ABO	OVE			
Sworn to and subso	cribed before me, by the sa	nid	, this the	day	
of, 20, to certify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer a	administering oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 10

18 FIL	ER NAM	1E	19 Filer ID		8			
Ca	Cabeza de Vaca, Jose							
20 SC	HEDUL	SUBTOTALS		CURTOTAL AMOUNT				
NA	ME OF	SCHEDULE			SUBTOTAL AMOUNT			
1.	х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	, ,	\$	0.00			
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4.	X	SCHEDULE E: LOANS		\$	0.00			
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	2,362.98			
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	15.03			
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
12.	П	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				
			-	•				

LOANS				SCHEDULE E
The Instruction	ges Schedule E: 1 Rpt: 4/10			
2 FILER NAME Cabeza de Vaca	a, Jose	-	3 Filer ID	
4 TOTAL OF UN	IITEMIZED LOANS			\$ 0.00
5 Date of loan	7 Name of lender out-of-sta	ate PAC (ID#:		9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; Sta	te; Zip Code		10 Interest Rate
				11 Maturity Date
12 Principal occupati	on / Job title (See Instructions)	13 Employer (See Instruct	ions)	
14 Description of Col None	lateral	15 Check if personal funds	were deposited	l into political account (See Instructions)
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
not applicable	18 Guarantor address; City; Sta			
20 Principal occupati	on	21 Employer (See Instruction	ions)	L
Forms provided by	Texas Ethics Commission www.e	ethics.state.tx.us		Version V4.1.0.d378aba

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Political Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 1/5 Rpt: 5/10	Cabeza de Vaca, Jose
4 Date	
02/19/2024	5 Payee name 7-Eleven
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50.00	2400 S. McColl Rd.
	McAllen, TX 78503
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gasoline
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/01/2024	Circle K
Amount (\$) \$50.00	Payee address; City; State; Zip Code 3912 N. McColl
	McAllen, TX 78501
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gasoline
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/20/2024	Circle K
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	3912 N. McColl
	McAllen, TX 78501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gasoline
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense I Committee Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Frinting Expense Travel Out of District Travel Out of 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
Sch: 2/5 Rpt: 6/10	Cabeza de Vaca, Jose
4 Date	5 Payee name
03/21/2024	David Fuentes Campaign
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 505 S. Texas Weslaco, TX 78596
8 PURPOSE	<u> </u>
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Donation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/14/2024	Exxon CornerMart
Amount (\$)	Payee address; City; State; Zip Code
\$57.31	3113 S. 10th St. McAllen, TX 78503
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gasoline
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/20/2024	Exxon CornerMart
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	3113 S. 10th St.
	McAllen, TX 78503
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gasoline
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking **Event Expense** Loan Repayment/Reimbursement Office Overhead/Rental Expense Consulting Expens Food/Beverage Expense Polling Expense Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/5 Rpt: 7/10 Cabeza de Vaca, Jose Date Payee name 01/11/2024 Microsoft 6 Amount (\$) Payee address; City; State; Zip Code \$75.76 One Microsoft Way Redmond, WA 98052 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Software Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/12/2024 Mighty Mavericks Amount (\$) Payee address; City; State; Zip Code \$100.00 5114 Hudson St. Edinburg, TX 78542 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsorship for football team Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/01/2024 Murphy Express City; Amount (\$) Payee address; State; Zip Code \$50.00 1107 Jackson Rd. Pharr, TX 78577 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Gasoline Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
_		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 4/5 Rpt: 8/10	Cabeza de Vaca, Jose
4	Date 05/19/2024	5 Payee name South 2nd Street H-E-B
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.26	200 U.S. Expressway 83
		McAllen, TX 78501
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gasoline
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/11/2024	Stripes
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.65	201 W. Nolana St.
		McAllen, TX 78504
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gasoline
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	05/05/2024	Stripes
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1816 S. 10th St.
		McAllen, TX 78503
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gasoline
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

	CONTRIBOTIO	10						
			EXPENDITUR	E CATEGORIES	FOR B	OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Loar Offic e Polli Expense Print Sala	Repayme e Overhea ng Expens ing Expen ries/Wage	ent/Reimbursement ad/Rental Expense se ise is/Contract Labor	Solicitation/Fundraising Expe Transportation Equipment & Travel in District Travel Out of District OTHER (enter a category no	Related Expense
1	Total pages Schedule F1:	2 FILER NAM	ΛE				3 Filer ID	
	Sch: 5/5 Rpt: 9/10		e Vaca, Jose				, 5	
4	Date 05/28/2024	5 Payee nam Tamez, A		-			r	
6	Amount (\$) \$175.00	7 Payee addi 1412 Kee McAllen,	ton #5	State; Zip	Code			
8	PURPOSE OF EXPENDITURE	(a) Category Event Exp	(See Categories listed at the	ue top of this schedule)	(b)	Check if Austin,	outside of Texas. Complete Schedo , TX, officeholder living expense McAllen Memorial Foot	
9	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office	sought		Office held	
	Date	Payee nam	ie					
	01/11/2024	Valero						
	Amount (\$) \$50.00	Payee addi 1005 N Te Weslaco,	exas Blvd	State; Zip	Code		,	
	PURPOSE OF EXPENDITURE	(a) Category Travel In I	(See Categories listed at the District	e top of this schedule)	(b)		outside of Texas. Complete Schedi , TX, officeholder living expense	ule T.
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office	sought		Office held	
								-

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Polling Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Printing Expense Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 1/1 Rpt: 10/10 Cabeza de Vaca, Jose 4 Date Payee name 02/26/2024 Sam's Club Amount (\$) Payee address; City; State; Zip Code \$15.03 1400 E. Jackson Ave. Reimbursement from x political contributions intended McAllen, TX 78503 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Travel In District **EXPENDITURE** Gasoline Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH