FORM C/OH **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR **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 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** 208 W. Cano St., Edinburg TX 78539 **ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** PHONE 956-342-6720 REPORT TYPF 15th day after campaign treasurer appointment (officeholder only) January 15 ΙxΙ 30th day before election Runoff July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit **PERIOD** Month Day Year Month Day Year COVERED 07/01/2023 **THROUGH** 12/31/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Other Primary Runoff General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) McAllen City Commission Place 6 Place 6 District McAllen Hidalgo **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 9

				2019				
13 C / OH NAME	Cabeza de Vaca, Jos	14 Filer ID						
15 NOTICE FROM POLITICAL COMMITTEE(S)	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.							
Additional Pages	COMMITTEE TYPE							
	GENERAL	COMMITTEE ADDRESS						
,	SPECIFIC							
=		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00				
	AND	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEMI	\$ 0.00						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 6,678.00				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 32,21							
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$							
17 AFFIDAVIT				•				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code. Signature of	of perjury, that the acco	mpanying report is be exported by me				
AFFIX NOT	FARY STAMP / SEAL ABO	DVE	7					
Sworn to and subsc	ribed before me, by the sa	aid	, this the	day				
of	, 20, to ce	rtify which, witness my hand and seal of office.						
Signature of offic	er administering	Printed name of officer administering	Title of officer a	dministering oath				
				, v. 2 r_ r_ jp				

SUBTOTALS - C/OH

FORM **C/OH**COVER SHEET PG 3

			3 of 9
18 FILER NA	ME	19 Filer ID	
Cabeza d	de Vaca, Jose		
20 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS		\$
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 6,678.00
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.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$
2			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Gift/Awards/Memoria Legal Services The Instruction (lls Expense		pens ages	e /Contract Labor		Travel Out of District OTHER (enter a category not liste	d above)		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	
	Sch: 1/6 Rpt: 4/9	1	Cabeza de								
4	Date	5	Payee name						_		
l	08/29/2023		7-Eleven								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de				
	\$45.00		2400 S. Mc	Coll Rd.							
l											
			McAllen, T≻	78503							
8	PURPOSE	(a)	Category (Se	ee Categories listed a	t the top of this sch	nedule)	(b)	Description			
l	OF EXPENDITURE		Travel In Di	strict				므		ide of Texas. Complete Schedule T.	
								Gasoline Check if Austin	n, TX,	, officeholder living expense	
l								Casoniic			
9	Complete ONLY if direct	<u>_</u>	`andidate/Offi	ceholder name		Office sou	aht			Office held	
Ľ	expenditure to benefit C/Ol		zandidate/Om	centitie name		Office sour	gnt			Office field	
Г	Date		Payee name								
l	08/26/2023	l	Benavides,	Abigail							
Г	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de				
l	\$400.00		12205 Suar	ez St.							
l											
l			Donna, TX	78537							
Г	PURPOSE	(a)	Category (Se	ee Categories listed a	t the top of this sch	nedule)	(b)	Description			
l	OF EXPENDITURE			ages/Contract						ide of Texas. Complete Schedule T.	
l										officeholder living expense	
ı								Community of	Juli	each	
⊢	Complete ONII V if direct	Щ	`andidata/Offi	achaldar nama		Office cour	~b+			Office hold	
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offi	ceholder name		Office sou	gnt			Office held	
Г	Date	Π	Payee name								
	08/01/2023		Benavides,	Abigail							
Г	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de				
ı	\$535.00		12205 Suar	ez St.							
l		1									
			Donna, TX	78537							
l	PURPOSE OF	(a)	Category (Se	ee Categories listed a	t the top of this sch	nedule)	(b)	Description			
l	EXPENDITURE	l	Salaries/Wa	ages/Contract	Labor					ide of Texas. Complete Schedule T., , officeholder living expense	
l								Community			
\vdash	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office held	
	expenditure to benefit C/OI										
\vdash											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		ttee L	Gift/Awards/Memoria Legal Services The Instruction C	ls Expense		pens ages	e /Contract Labor		Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1: 2 FILER NAM								3	Filer ID	
	Sch: 2/6 Rpt: 5/9	Ca	abeza de V	aca, Jose							
4	Date	5 Pa	yee name								
l	11/12/2023	Ве	est Buy								
6	Amount (\$)	7 Pa	yee address	s; City;	State;	; Zip Co	de				
l	\$55.20	70	0 S. Jacks	on Rd.							
		М	cAllen, TX	78503							
8	PURPOSE	(a) Ca	ategory (See	e Categories listed at	the top of this sch	edule)	(b)	Description			
l	OF EXPENDITURE			ead/Rental Ex				므		le of Texas. Complete Schedule T.	
l						1		_		officeholder living expense	
l								Computer Ke	ybc	naru	
Ļ							_				
9	Complete ONLY if direct expenditure to benefit C/O		ididate/Offic	eholder name		Office sou	ght			Office held	
Г	Date	Pa	yee name								
l	07/23/2023	Ca	abeza de V	/aca, Pepe							
H	Amount (\$)	Pa	yee address	s; City;	State;	; Zip Co	de				
	\$3,966.41	60	00 Wichita	#503							
l											
l		M	cAllen, TX	78503							
⊢	DUDDOCE						<i>(</i> 1)				
l	PURPOSE OF			Categories listed at		edule)	(a)	Description Check if travel	outeir	de of Texas. Complete Schedule T.	
l	EXPENDITURE	LO	ап керауг	ment/Reimbur	sement	1		므		officeholder living expense	
l	П					1		Loan Reimbu	ırse	ment	
l											
一	Complete ONLY if direct	Can	didate/Offic	eholder name		Office sough	ght			Office held	
l	expenditure to benefit C/OI	Н									
F	Date	Pa	yee name				_				
l	12/19/2023		rcle K								
┝				0.1	0	7: 0					
l	Amount (\$)	l	yee addres		State;	; Zip Co	ae				
	\$50.00	39	12 N. McC	, 011							
l											
		Mo	cAllen, TX	78501							
Г	PURPOSE	(a) Ca	ategory (See	e Categories listed a	the top of this sch	nedule)	(b)	Description			
l	OF EXPENDITURE		avel In Dis			1		므		de of Texas. Complete Schedule T.	
l								Check if Austin Gasoline	ı, TX,	officeholder living expense	
١								Gasonite			
\vdash	0	<u> </u>	11.1.4.1000	- b - l d		246	1.			0.00	
1	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ididate/Offic	eholder name	C	Office sou	ght			Office held	
L	7										
1											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 3/6 Rpt: 6/9	Cabeza de Vaca, Jose
4 Date	5 Payee name
11/16/2023	David Fuentes Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	3619 S. Border
	Weslaco, TX 78596
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/11/2023	Exxon CornerMart
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	3113 S. 10th St.
	McAllen, TX 78503
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
	Gasonie
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	JH Control of the con
Date	Payee name
07/30/2023	Exxon CornerMart
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	3113 S. 10th St.
	McAllen, TX 78503
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Gasoline
Complete CNU V St. III	Condidate/Officebolder research
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commi	Food/Beverage Expense Gift/Awards/Memorials Expense ttee Legal Services	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains	how to complete this form.	
1 Total pages Schedule F1: 2 FI	LER NAME		3 Filer ID
Sch: 4/6 Rpt: 7/9 Ca	abeza de Vaca, Jose		
4 Date 5 Pa	ayee name		1
NOTE OF THE PROPERTY OF THE PR	xxon CornerMart		
6 Amount (\$) 7 Pa	ayee address; City; State	e; Zip Code	
	ayee address;	e, Zip Code	
\$30.93	.13 3. 1001 31.		
М	cAllen, TX 78503		
8 PURPOSE (a) Ca	ategory (See Categories listed at the top of this sci	hedule) (b) Description	
OF T,	ravel In District	· · · · ·	l outside of Texas. Complete Schedule T.
EXPENDITURE ''		Check if Austi	n, TX, officeholder living expense
		Gasoline	
Complete ONLY if direct Car expenditure to benefit C/OH	ndidate/Officeholder name	Office sought	Office held
Date Pa			
	ayee name		
	xxon CornerMart		
		e; Zip Code	
\$50.00 31	113 S. 10th St.		
М	cAllen, TX 78503		
PURPOSE (a) Ca	ategory (See Categories listed at the top of this sci	hedule) (b) Description	
OF _{Tr}	avel In District		outside of Texas. Complete Schedule T.
EXPENDITURE ''		Check if Austi	n, TX, officeholder living expense
		Gasoline	
	ndidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OH			
Date Pa	ayee name		
	uerrero, Jessica		
		7:- C-d-	
		e; Zip Code	
\$200.00 50	00 W. Dallas Ave.		
M	cAllen, TX 78501		
PURPOSE (a) Ca	ategory (See Categories listed at the top of this sci	hedule) (b) Description	
1 05 1	vent Expense		outside of Texas. Complete Schedule T.
EXPENDITORE			n, TX, officeholder living expense
*		Sponsorship	Fields Elementary Toy Drive
	ndidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees
Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee Le	egal Services	emorials Expense tion Guide explain		Vages/	/Contract Labor		Travel Out of District OTHER (enter a category not listed above))
1	Total pages Cahadula E1:	12					,		٦,	Filas ID	
	Total pages Schedule F1: Sch: 5/6 Rpt: 8/9		Cabeza de V	aca, Jose	€				3	Filer ID	
4	Date	5	Payee name								
Ļ	11/14/2023		Murphy Expre								
6	Amount (\$) \$50.00	7	Payee address 1107 Jackson		Stat	te; Zip Co	de				
		L	Pharr, TX 78								
8	PURPOSE	(a)	Category (See	Categories lis	sted at the top of this s	schedule)	(b)	Description			
	OF EXPENDITURE		Travel In Dist	rict						de of Texas. Complete Schedule T. officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Office	eholder na	me	Office sou	ght			Office held	
	Date	Г	Payee name								
	09/24/2023		Murphy Expre	ess							
	Amount (\$)	\vdash	Payee address	s; City;	; Stat	te; Zip Co	de				
	\$50.00		1107 Jackson								
L		L	Pharr, TX 78	577							
	PURPOSE OF	(a)			sted at the top of this s	schedule)	(b)	Description	·····	1 Carres Constant Cabadala T	
	EXPENDITURE		Travel In Dist	trict				므		de of Texas. Complete Schedule T. officeholder living expense	
								Gasoline	,		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	eholder na	me	Office sou	ght			Office held	
F	Date	$\overline{}$	Dayoo namo								
	12/08/2023		Payee name Stripes								
	Amount (\$)	\vdash	Payee address	s; City	Stat	te; Zip Co	de				
	\$44.81		201 W. Nolar								
			McAllen, TX	78504							
	PURPOSE	(a)	Category (See	Categories li	sted at the top of this s	schedule)	(b)	Description			
	OF EXPENDITURE		Travel In Dist							de of Texas. Complete Schedule T.	
								Check if Austin. Gasoline	ı, TX,	, officeholder living expense	
								Gasonne			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Office	eholder na	me	Office sou	ght			Office held	

POLITICAL EXPENDITURES FROM POLITICAL

SCHEDULE F1

	CONTRIBUTIO	NS SOMEDOLE 1 -
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 6/6 Rpt: 9/9	2 FILER NAME Cabeza de Vaca, Jose 3 Filer ID
4	Date 10/20/2023	5 Payee name Stripes
6	Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 201 W. Nolana Loop McAllen, TX 78504
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 ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/24/2023	Payee name Sweet Temptations
	Amount (\$) \$42.65	Payee address; City; State; Zip Code 5401 N. 10th St. Suite 111 McAllen, TX 78504
	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 with campaign manager
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held