

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)

2 Total pages filed: 11 ✓

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
 Jessica
 NICKNAME LAST SUFFIX
 Garza

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE
 301 S. Diana PO Box 2203
 Elsa, Tx. 78543
 Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
 (956) 393-1609

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
 Jessica
 NICKNAME LAST SUFFIX
 Garza

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE
 301 S. Diana St Elsa TX- 78543

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
 (956) 393-1609

9 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)

10 PERIOD COVERED

Month Day Year Month Day Year
 02 / 12 / 2026 THROUGH 03 / 24 / 2026

11 ELECTION

ELECTION DATE ELECTION TYPE
 Month Day Year Primary Runoff Other Description
 05 / 02 / 2026 General Special

12 OFFICE

OFFICE HELD (if any)

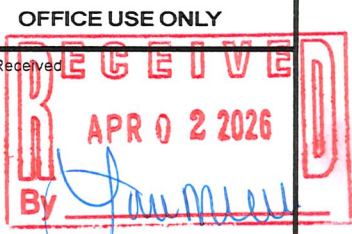
13 OFFICE SOUGHT (if known)
 Councilman P.1

14 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 COMMITTEE NAME
 GENERAL
 SPECIFIC
 COMMITTEE ADDRESS
 COMMITTEE CAMPAIGN TREASURER NAME
 COMMITTEE CAMPAIGN TREASURER ADDRESS



GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME <i>Jessica Garza</i>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>3,500</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>3,204.23</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <i>195.77</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE 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.

Jessica Garza
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is *Jessica Garza* and my date of birth is *7/26/78*
 My address is *301 S Diana* *ELSA* *TX* *78543* *USA*
(street) (city) (state) (zip code) (country)
 Executed in *Hidalgo* County, State of *Texas* on the *2* day of *April*, 20*20*
(month) (year)
Jessica Garza
 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,500.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,304.23
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2
2 FILER NAME Jessica Garza		3 Filer ID (Ethics Commission Filers)
4 Date 3/12/26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linearger Hogan Blair + Sampson, LLP 6 Contributor address; City; State; Zip Code PO Box 17428 Austin TX 78760	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 3/13/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ygriega Environmental Services LLC Contributor address; City; State; Zip Code 410 N 87th St. Edinburg, Tx. 78542	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions)
Date 3/22/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helm Properties, LLC Contributor address; City; State; Zip Code 1101 E Canton Rd Edinburg Tx. 78539	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Real-estate		Employer (See Instructions)
Date 3/22/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel A. Guzman Campaign Act Contributor address; City; State; Zip Code PO Box 896 Edinburg Tx. 78538	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) Right of Way Agent		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **2**

2 FILER NAME

Jessica Garza

3 Filer ID (Ethics Commission Filers)

4 Date

3/23/26

5 Full name of contributor out-of-state PAC (ID#: _____)

Rolando Noriega RN Air Conditioning

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

731 S Midway Rd Weslaco Tx 78596

8 Principal occupation / Job title (See Instructions)

HVAC Owner

9 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | 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 F1: 6	2 FILER NAME Jessica Garza	3 Filer ID (Ethics Commission Filers)
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4 Date 3/24/2024	5 Payee name Robocent
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6 Amount (\$) 1166.67	7 Payee address; 2129 General Booth Blvd Ste 103	City; Virginia Beach, VA	State; VA	Zip Code 23454
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Texting System
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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Date 3/13/2026	Payee name Poli-Signs R&U
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Amount (\$) 810.14	Payee address; 305 S Illinois Ave	City; Weslaco	State; Tx.	Zip Code 78899
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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Date 3/13/2026	Payee name Giouvana Zamorano
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Amount (\$) 75.00	Payee address; 413 N Iowa Ave	City; Weslaco	State; Tx.	Zip Code 78596
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Graphic Design
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: <u>6</u>	2 FILER NAME <u>Jessica Garza</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>3/24/26</u>	5 Payee name <u>Meliza Bazan</u>	
6 Amount (\$) <u>1166.67</u>	7 Payee address: <u>PO Box 208</u>	City: <u>Elisa</u> State: <u>TX</u> Zip Code: <u>78543</u>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>	
	(b) Description <u>GOTV</u>	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name: <u>Jessica Garza</u> Office sought: <u>Councilman P11</u> Office held:	
Date <u>3/24/26</u>	Payee name <u>Amanela Anzaldua</u>	
Amount (\$) <u>1166.67</u>	Payee address: <u>25006 Las Nubes Dr.</u>	City: <u>Monte Alto</u> State: <u>TX</u> Zip Code: <u>78538</u>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>	
	Description <u>GOTV</u>	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name: <u>Jessica Garza</u> Office sought: <u>Councilman P11</u> Office held:	
Date <u>3/24/26</u>	Payee name <u>Ruben Gonzalez</u>	
Amount (\$) <u>1166.67</u>	Payee address: <u>508 Adkins St</u>	City: <u>Edroach</u> State: <u>TX</u> Zip Code: <u>78538</u>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>	
	Description <u>GOTV</u>	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name: <u>Jessica Garza</u> Office sought: <u>Councilman P11</u> Office held:	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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 F1: 6	2 FILER NAME Jessica Garza	3 Filer ID (Ethics Commission Filers)
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4 Date 3/24/20	5 Payee name Jesus moran
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6 Amount (\$) 1166.67	7 Payee address: PO Box 1217 Elsa, Tx. 78543	City:	State:	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description GOTV
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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Date 3/24/20	Payee name Gloria Garcia
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Amount (\$) 1166.67	Payee address: 18208 Nitsche Dr.	City: Edinburg	State: Tx.	Zip Code 78542
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description AOTV
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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Date 3/24/20	Payee name Omar Garcia
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Amount (\$) 1166.67	Payee address: 7915 Texas St	City: Edinburg	State: Tx	Zip Code 78538
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description GOTV
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(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 |
| Credit Card Payment | 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: 6	2 FILER NAME Jessica Garza	3 Filer ID (Ethics Commission Filers)
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4 Date 3/24/26	5 Payee name Pearl Arispe
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6 Amount (\$) 1166.67	7 Payee address: 501 N Carlos Arispe St Elsa, Tx - 78542	City:	State:	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description GOTU
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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Date 3/24/26	Payee name Future Strikers of A - Lisa Alvarado
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Amount (\$) 1166.67	Payee address: 16002 N FM 88 Weslaco, Tx. 78599	City:	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Tournament
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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Date 3/24/26	Payee name Isabel Martinez
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Amount (\$) 1166.67	Payee address: POBox 3971	City: Ector	State: Tx	Zip Code 78588
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description GOTU
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman P11	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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 F1: 6	2 FILER NAME Jessica Garza	3 Filer ID (Ethics Commission Filers)
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4 Date 3/24/26	5 Payee name Jennifer Viera
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6 Amount (\$) 1166.67	7 Payee address; PO Box 2582	City; Elsa	State; TX	Zip Code 78543
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contact Labor	(b) Description GOTV
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman Pl. 1	Office held
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Date 3/22/26	Payee name Pins + Cues
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Amount (\$) 235.76	Payee address; 514 Plaza Los Encinos	City; Weslaco	State; TX	Zip Code 78596
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Bowling Rental
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman Pl. 1	Office held
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Date 3/22/26	Payee name Beth's 1-Stop Ruben Barrera
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Amount (\$) 33.33	Payee address; 805 S International Blvd	City; Weslaco	State; TX	Zip Code 78596
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Tournament
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jessica Garza	Office sought Councilman Pl. 1	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | 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 F1: 4 2 FILER NAME Jessica Garza 3 Filer ID (Ethics Commission Filers)

4 Date 3/23/26 5 Payee name Oscar Garcia

6 Amount (\$) 166.67 7 Payee address: 21223 Main St City: Edinburg State: TX Zip Code: 78538

8 PURPOSE OF EXPENDITURE: Contact Labor (a) Category (See Categories listed at the top of this schedule) (b) Description GO TV

(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 Jessica Garza Office sought Office held

Date 3/22/26 Payee name Angel Trejo

Amount (\$) 150.00 Payee address: 2512 S C St City: McAllen State: TX Zip Code: 78503

PURPOSE OF EXPENDITURE: Advertising Category (See Categories listed at the top of this schedule) Description Video

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 Jessica Garza Office sought Councilman Pl 1 Office held

Date 3/22/26 Payee name Leroy Rodriguez

Amount (\$) 100.00 Payee address: 5409 Brick Lane Dr. City: Weslaco State: TX Zip Code: 78596

PURPOSE OF EXPENDITURE: Fundraising Expense Category (See Categories listed at the top of this schedule) Description Tournament

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 Jessica Garza Office sought Councilman Pl 1 Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED