

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: 29
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr. FIRST Ernesto MI	OFFICE USE ONLY <hr/> Date Received <div style="font-size: 2em; font-weight: bold; color: blue; text-align: center;">RECEIVED</div> <div style="text-align: center; color: red; font-weight: bold;">APR 04 2024</div> BY: 1:31pm <hr/> Date Hand-delivered or Date Postmarked <div style="text-align: center; color: blue; font-weight: bold;">4/4/24 1:31pm</div> <hr/> Receipt # Amount \$ <hr/> Date Processed <hr/> Date Imaged	
	NICKNAME LAST SUFFIX Ernie Gutierrez		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1223 Losta Brava Brownsville, TX 78520		
<input type="checkbox"/> Change of Address			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 455-7064		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. FIRST Bryant MI C.		
	NICKNAME LAST SUFFIX Touchy		
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 304 Nickolas St. Rancho Viejo, TX 79575		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 459-6607		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01 / 25 / 2024 03 / 25 / 2024		
11 ELECTION	ELECTION DATE Month Day Year 05 / 04 / 24	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Brownsville Navigation District, Port Commissioner, Place 1	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> 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 <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME Half Associates - state PAC	
		COMMITTEE ADDRESS 1201 N. Bowser Road, Richardson TX 75081	
		COMMITTEE CAMPAIGN TREASURER NAME R C Plugge Jr.	
		COMMITTEE CAMPAIGN TREASURER ADDRESS 1201 N. Bowser Road, Richardson, TX 75081	

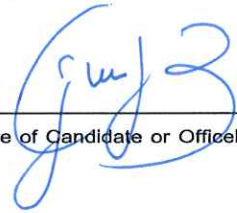
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME		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)	\$ 5,362. ⁰⁰
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 67,454. ⁰⁰
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ 18,137. ⁷⁷
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 32,470. ³⁴
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ - 0 -

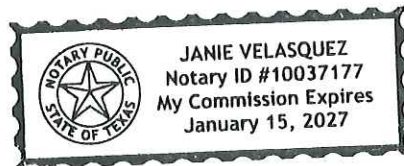
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Ernesto Gutierrez this the 4th day of April, 2024, to certify which, witness my hand and seal of office.

Janie Velasquez Signature of officer administering oath
Janie Velasquez Printed name of officer administering oath
Notary Public Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
 (street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

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	\$
2.	<input checked="" 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	\$
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: 12
2 FILER NAME Ernesto Gutierrez		3 Filer ID (Ethics Commission Filers)
4 Date 2/1/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Lee Ostas	7 Amount of contribution (\$) \$ 1,000.00
	6 Contributor address; City; State; Zip Code [Redacted] Brownsville, TX 79526	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/2/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert A. Ostas	Amount of contribution (\$) \$ 1,000.00
	Contributor address; City; State; Zip Code [Redacted] Brownsville TX 79521	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/20/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cesar De Leon	Amount of contribution (\$) \$ 1,000.00
	Contributor address; City; State; Zip Code [Redacted] Brownsville TX 79520	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/6/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luis Rodriguez AMFLO Brokerage Services LLC	Amount of contribution (\$) \$ 2,500.00
	Contributor address; City; State; Zip Code [Redacted] Brownsville TX 79521	
Principal occupation / Job title (See Instructions) Broker / President		Employer (See Instructions) AMFLO Brokerage Services LLC
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/3/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Romulo Mejia</i>	7 Amount of contribution (\$) <i>\$ 1,000.00</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville, TX 78521</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>1/31/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ruben Angel Gutierrez</i>	Amount of contribution (\$) <i>\$ 5,000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78521</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/14/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Thomas Francis Charvat III</i>	Amount of contribution (\$) <i>\$ 250.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78521</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/20/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>M.G. Auto Sales LLC</i>	Amount of contribution (\$) <i>\$ 1,000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78521</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/11/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nick Tipton; Kelly Tipton</i>	7 Amount of contribution (\$) <i>\$ 1,000.00</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78526</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <i>2/13/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Silvia L. Gutierrez</i>	Amount of contribution (\$) <i>\$ 5,000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78520</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>2/13/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kamel Mendez</i>	Amount of contribution (\$) <i>\$ 2,000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Los Fresnos, TX 78566</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/9/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robert M. Walsdorf</i>	Amount of contribution (\$) <i>\$ 1,000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78566 Los Fresnos,</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <i>Ernest Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/13/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jasmine Andres Diez</i> 6 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78521</i>	7 Amount of contribution (\$) <i>\$125.00</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/15/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Frank Parker</i> Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78520</i>	Amount of contribution (\$) <i>\$1,000.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/13/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Coastal Insurance Agency LLC</i> Contributor address; City; State; Zip Code [Redacted] <i>Laguna Vista, TX 78573</i>	Amount of contribution (\$) <i>\$900.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/11/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mc2 McCumber Productions LLC</i> Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78520</i>	Amount of contribution (\$) <i>\$450.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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2 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/23/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Navco Logistics LLC</i>	7 Amount of contribution (\$) <i>\$450.00</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78521</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dana Properties Inc.</i>	Amount of contribution (\$) <i>\$450.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Olmito TX 78575</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kennedy Bug Impressions Inc.</i>	Amount of contribution (\$) <i>\$450.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Rancho Viejo TX 78575</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rafael Larrazolo LLC</i>	Amount of contribution (\$) <i>\$450.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78526</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/23/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Industrial Performance</i> 6 Contributor address; City; State; Zip Code [REDACTED] <i>Brownsville TX 78521</i>	7 Amount of contribution (\$) <i>\$1,350.00</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dipisa USA, Inc.</i> Contributor address; City; State; Zip Code [REDACTED] <i>Brownsville TX 78526</i>	Amount of contribution (\$) <i>\$450.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gustavo D. Elizondo III</i> Contributor address; City; State; Zip Code [REDACTED] <i>San Benito, TX 78586</i>	Amount of contribution (\$) <i>\$450.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/22/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bernus Commercial Properties LLC</i> Contributor address; City; State; Zip Code [REDACTED] <i>Brownsville TX 78526</i>	Amount of contribution (\$) <i>\$450.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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2 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/22/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Shane Wealth Management LLC</i>	7 Amount of contribution (\$) <i>\$ 450.00</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78520</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/20/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ruben M. Torres</i>	Amount of contribution (\$) <i>\$ 450.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Rancho Viejo TX 78575</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/24/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Christopher E. Olson</i>	Amount of contribution (\$) <i>\$ 450.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville, TX 78526</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Carlos A. Barba</i>	Amount of contribution (\$) <i>\$ 450.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Rancho Viejo TX 78575</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <i>3/23/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John G. Champion</i>	7 Amount of contribution (\$) <i>\$ 100.00</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 79520</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rusty Brecht Jr.</i>	Amount of contribution (\$) <i>\$ 100.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Rancho Viejo TX 79575</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Russell P. Adams</i>	Amount of contribution (\$) <i>\$ 100.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 79526</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/25/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>SOSW Enterprises LLC</i>	Amount of contribution (\$) <i>\$ 450.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 79520</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <i>3/23/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robert E. Galindo</i>	7 Amount of contribution (\$) <i>\$450.00</i>
	6 Contributor address; City; State; Zip Code <i>[Redacted] Brownsville TX 79521</i>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/24/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jonathan P. Gulley</i>	Amount of contribution (\$) <i>\$450.00</i>
	Contributor address; City; State; Zip Code <i>[Redacted] Brownsville TX 79521</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/15/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Arturo A. Farias</i>	Amount of contribution (\$) <i>\$450.00</i>
	Contributor address; City; State; Zip Code <i>[Redacted] Rancho Viejo, TX 79575</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/13/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>James T. Griffin</i>	Amount of contribution (\$) <i>\$1,000.00</i>
	Contributor address; City; State; Zip Code <i>[Redacted] Brownsville TX 79521</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/17/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alvaro De La Garza</i>	7 Amount of contribution (\$) <i>\$ 500.00</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78520</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Klaus Meyer</i>	Amount of contribution (\$) <i>\$ 300.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Laguna Vista TX 78578</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Pedro Cardenas</i>	Amount of contribution (\$) <i>\$ 250.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78526</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/22/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Devin Van Holsbeke</i>	Amount of contribution (\$) <i>\$ 250.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Houston TX 77095</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/23/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mario H. Escobedo</i>	7 Amount of contribution (\$) <i>\$ 100.00</i>
6 Contributor address; City; State; Zip Code [REDACTED] <i>Brownsville TX 78520</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Silvano Cristiano</i>	Amount of contribution (\$) <i>\$ 100.00</i>
Contributor address; City; State; Zip Code [REDACTED] <i>Pizarra Pr. Brownsville TX 78520</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andres Shane</i>	Amount of contribution (\$) <i>\$ 100.00</i>
Contributor address; City; State; Zip Code [REDACTED] <i>Brownsville TX 78526</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/23/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jose A. Purnon Gonzalez</i>	Amount of contribution (\$) <i>\$ 100.00</i>
Contributor address; City; State; Zip Code [REDACTED] <i>Brownsville TX 78526</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/28/24</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joe Link</i>	7 Amount of contribution (\$) <i>\$80.00</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 75520</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/13/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Liliana Trevino</i>	Amount of contribution (\$) <i>\$4,000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 75520</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/7/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Luis Emiliano Trevino Flores</i>	Amount of contribution (\$) <i>\$4,000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 75520</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3-14-24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Half Associates - State PAC</i>	Amount of contribution (\$) <i>\$1,000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Richardson TX 75081</i>		
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.		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 3	
2 FILER NAME Ernesto Gutierrez		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/23/24	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaron Rendon	8 Amount of Contribution \$ \$ 700.00	9 In-kind contribution description Beverages
7 Contributor address; City; State; Zip Code [Redacted] Brownsville TX 78520		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Attorney		11 Employer (FOR NON-JUDICIAL)(See Instructions) Rendon Law Office	
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 3/23/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arturo Trevino	Amount of Contribution \$ \$ 487.00	In-kind contribution description Beverages
Contributor address; City; State; Zip Code [Redacted] Brownsville TX 78520		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Employee Owner		Employer (FOR NON-JUDICIAL)(See Instructions) Los Trevis	
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)			

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2:	
2 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>2-13-24</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Juan Enrique Quintanilla</i>	8 Amount of Contribution \$ <i>\$3,000.00</i>	9 In-kind contribution description <i>Campaign merchandise</i>
7 Contributor address: _____ City: _____ State: _____ Zip Code _____ <i>Brownsville TX 78520</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Self employed</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Self employed</i>	
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 <i>2-13-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Carlos Marin</i>	Amount of Contribution \$ <i>\$2,500.00</i>	In-kind contribution description <i>Campaign Signs</i>
Contributor address: _____ City: _____ State: _____ Zip Code _____ <i>Brownsville TX 78520</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
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)			

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2:	
2 FILER NAME <i>Ernesto Gutierrez</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>2-13-24</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Julio Graña</i>	8 Amount of Contribution \$ <i>\$10,000.00</i>	9 In-kind contribution description <i>Online Advertising Merchandise</i>
7 Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78526</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>President</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>CRJ Hospitality</i>	
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 <i>2-13-24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ernesto Andrade</i>	Amount of Contribution \$ <i>\$1,000</i>	In-kind contribution description <i>Campaign merchandise</i>
Contributor address; City; State; Zip Code [Redacted] <i>Brownsville TX 78521</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Self employed</i>		Employer (FOR NON-JUDICIAL) (See Instructions) <i>Cazha Design Studio</i>	
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)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

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: <i>11</i>	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/23/24</i>	5 Payee name <i>Riverbend Golf Club</i>	
6 Amount (\$) <i>\$5,612.96</i>	7 Payee address; City; State; Zip Code <i>4541 vs-281, Brownsville, TX 73520</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Fundraiser - Event Expense</i>	(b) Description <i>Golf Tournament venue</i>
	(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	Office sought Office held
Date <i>3/23/24</i>	Payee name <i>Roberto Castillo</i>	
Amount (\$) <i>\$1,450.00</i>	Payee address; City; State; Zip Code <i>800 I-69E Frontage Rd, Unit 40 Brownsville TX 73521</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description <i>Caterer at Golf Tournament Fundraiser</i>
	<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	Office sought Office held
Date <i>3-2-24</i>	Payee name <i>Mario Saenz</i>	
Amount (\$) <i>\$1,945.00</i>	Payee address; City; State; Zip Code <i>51 Calgary CT, Brownsville, TX 73526</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Signs - Installed signs for candidate</i>
	<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	Office sought 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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>3-25-24</i>	5 Payee name <i>Sheila Guerrero</i>
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6 Amount (\$) <i>\$315.00</i>	7 Payee address; City; State; Zip Code <i>1837 E. Taylor St., APT A Brownsville TX 78520</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Wages</i>	(b) Description <i>Block walk to promote candidate "Block walk"</i>
	(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	Office sought	Office held
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Date <i>3-18-24</i>	Payee name <i>Sheila Guerrero</i>
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Amount (\$) <i>\$270.00</i>	Payee address; City; State; Zip Code <i>1837 E. Taylor St. Apt A, Brownsville TX 78520</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought	Office held
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Date <i>3-25-24</i>	Payee name <i>Deyanira Aranda Pacheco</i>
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Amount (\$) <i>\$517.50</i>	Payee address; City; State; Zip Code <i>1144 E. Washington St. Brownsville TX 78520</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought	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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3-25-24</i>	5 Payee name <i>Ernesto Hernandez</i>	
6 Amount (\$) <i>\$375.00</i>	7 Payee address; City; State; Zip Code <i>2342 El Arbol Dr., Brownsville TX 78520</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>wages</i>	(b) Description <i>Block walk</i>
	(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	Office sought Office held
Date <i>3-18-24</i>	Payee name <i>Ernesto Hernandez</i>	
Amount (\$) <i>\$300.00</i>	Payee address; City; State; Zip Code <i>2342 El Arbol Dr. Brownsville TX 78520</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought Office held
Date <i>3-25-24</i>	Payee name <i>Ricardo Hernandez</i>	
Amount (\$) <i>\$360.00</i>	Payee address; City; State; Zip Code <i>2342 El Arbol Dr. Brownsville TX 78520</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought 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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3-25-24</i>	5 Payee name <i>Lourdes Hernandez</i>	
6 Amount (\$) <i>\$60.00</i>	7 Payee address; City; State; Zip Code <i>2342 El Arbol Dr. Brownsville TX 78520</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>wages</i>	(b) Description <i>Block walk</i>
	(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	Office sought Office held
Date <i>3-18-24</i>	Payee name <i>Lourdes Hernandez</i>	
Amount (\$) <i>\$75.00</i>	Payee address; City; State; Zip Code <i>2342 El Arbol Dr. Brownsville TX 78520</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought Office held
Date <i>3-25-24</i>	Payee name <i>Maria Gnselda Rodriguez</i>	
Amount (\$) <i>\$465.00</i>	Payee address; City; State; Zip Code <i>1737 McKinley St. Brownsville TX 78521</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought 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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>3-25-24</i>	5 Payee name <i>Berenice Peralta</i>
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6 Amount (\$) <i>\$ 450.00</i>	7 Payee address; City; State; Zip Code <i>1045 McNair Family Drive Brownsville TX 78520</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>wages</i>	(b) Description <i>Block walk</i>
	(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	Office sought	Office held
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Date <i>3-25-24</i>	Payee name <i>Elisa Anevalo</i>
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Amount (\$) <i>\$225.00</i>	Payee address; City; State; Zip Code <i>1837 E. Taylor St. Apt. A Brownsville TX 78520</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought	Office held
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Date <i>3-25-24</i>	Payee name <i>Maria Araceli Sanchez</i>
------------------------	--

Amount (\$) <i>\$90.00</i>	Payee address; City; State; Zip Code <i>1837 E. Taylor St Apt A. Brownsville TX 78520</i>
-------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought	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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>3-26-24</i>	5 Payee name <i>Guadalupe Peralta</i>
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6 Amount (\$) <i>\$450.00</i>	7 Payee address; <i>1045 McNair Family Dr. Brownsville TX 78520</i>	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>wages</i>	(b) Description <i>Block walker</i>
	(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	Office sought	Office held
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Date <i>3-11-24</i>	Payee name <i>Sonia Rodriguez</i>
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Amount (\$) <i>\$67.50</i>	Payee address; <i>1737 McKinley St. Brownsville TX 78521</i>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought	Office held
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Date <i>3-18-24</i>	Payee name <i>Sonia Rodriguez</i>
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Amount (\$) <i>\$427.50</i>	Payee address; <i>1737 McKinley St. Brownsville TX 78521</i>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought	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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>3-11-24</i>	5 Payee name <i>Mania Sanchez</i>
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6 Amount (\$) <i>\$ 30.00</i>	7 Payee address; <i>1937 E. Taylor ST. Apt A</i>	City; <i>Brownsville TX</i>	State; <i>TX</i>	Zip Code <i>78520</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>wages</i>	(b) Description <i>Block walk</i>
	(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	Office sought	Office held
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Date <i>3-11-24</i>	Payee name <i>Deyanira Aranda Pacheco</i>
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Amount (\$) <i>\$37.50</i>	Payee address; <i>1144 E. WASHINGTON ST.</i>	City; <i>Brownsville TX</i>	State; <i>TX</i>	Zip Code <i>78520</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought	Office held
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Date <i>3-13-24</i>	Payee name <i>Deyanira Aranda Pacheco</i>
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Amount (\$) <i>\$ 487.50</i>	Payee address; <i>1144 E. WASHINGTON ST.</i>	City; <i>Brownsville TX</i>	State; <i>TX</i>	Zip Code <i>78520</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought	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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3-11-24</i>	5 Payee name <i>Maria Elena</i>	
6 Amount (\$) <i>\$1000.00</i>	7 Payee address; City; State; Zip Code <i>— VOID —</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Advertising</i>
	(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	Office sought Office held
Date <i>3-11-24</i>	Payee name <i>Juan Montoya</i>	
Amount (\$) <i>\$500.00</i>	Payee address; City; State; Zip Code <i>Brownville TX 73520</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Advertising/marketing</i>
	<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	Office sought Office held
Date <i>3-18-24</i>	Payee name <i>Vanessa Lopez Molina</i>	
Amount (\$) <i>\$157.50</i>	Payee address; City; State; Zip Code <i>105 Vista Del Golf, Brownville TX 73526</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>wages</i>	Description <i>Block walk</i>
	<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	Office sought Office held

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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)

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|--|-------------------------------|--------------------------------|--|
| 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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/14/24</i>	5 Payee name <i>Sams Club</i>	
6 Amount (\$) <i>\$109.41</i>	7 Payee address; City; State; Zip Code <i>3570 W. Alton Glouer Blvd Braunsville TX 78526</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description <i>Purchase additional raffle items for Golf Tournament Fundraiser</i>
	(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	Office sought Office held
Date <i>3/19/24</i>	Payee name <i>Sams Club</i>	
Amount (\$) <i>\$313.90</i>	Payee address; City; State; Zip Code <i>3570 W. Alton Glouer Blvd Braunsville TX 78526</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>Purchase additional raffle items for Fundraiser</i>
	<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	Office sought Office held
Date <i>3-18-24</i>	Payee name <i>Spec's Wines, Spirits & Finer Foods</i>	
Amount (\$) <i>\$591.01</i>	Payee address; City; State; Zip Code <i>4350 US N Expressway 93 Braunsville TX 78526</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>Beverages for the Golf Tournament Fundraiser</i>
	<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	Office sought Office held

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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)

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|--|-------------------------------|--------------------------------|--|
| 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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>3-18-24</i>	5 Payee name <i>Joseph Molina</i>
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6 Amount (\$) <i>\$52.50</i>	7 Payee address; City; State; Zip Code <i>204 Las Villas Ave. Brownsville TX 78526</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>wages</i>	(b) Description <i>Block walk</i>
	(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	Office sought	Office held
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Date <i>3/19/24</i>	Payee name <i>Lowe's</i>
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Amount (\$) <i>\$76.90</i>	Payee address; City; State; Zip Code <i>525 E. Ruben Torres Brownsville TX 78520</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>Pit Boss Pellets as raffle item</i>
	<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	Office sought	Office held
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Date <i>3/16/24</i>	Payee name <i>Sams Club</i>
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Amount (\$) <i>\$1,241.43</i>	Payee address; City; State; Zip Code <i>3570 W A Hon Glaur Blvd, Brownsville TX 78526</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>purchase raffle items for Golf Tournament Fundraiser</i>
	<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	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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:	2 FILER NAME <i>Ernesto Gutierrez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>3-22-24</i>	5 Payee name <i>H-E-B</i>
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6 Amount (\$) <i>\$114.50</i>	7 Payee address; <i>6135 Expressway 93</i>	City; <i>Harlingen</i>	State; <i>TX</i>	Zip Code <i>78550</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description <i>Purchase Food ; beverage fr Golf Tournament Fundraiser</i>
	(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	Office sought	Office held
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Date <i>3-22-24</i>	Payee name <i>Feldmans</i>
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Amount (\$) <i>\$ 88.51</i>	Payee address; <i>116 W. Van Buren Ave.</i>	City; <i>Harlingen</i>	State; <i>TX</i>	Zip Code <i>78550</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>Purchase Food ; beverage for Golf Tournament Fundraiser</i>
	<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	Office sought	Office held
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Date <i>3-17-24</i>	Payee name <i>Sums Club</i>
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Amount (\$) <i>\$706.65</i>	Payee address; <i>3570 W. Alton Glour Blvd</i>	City; <i>Braunsville</i>	State; <i>TX</i>	Zip Code <i>78526</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>purchase raffle items fr Golf Tournament Fundraiser</i>
	<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	Office sought	Office held
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