The C/OH Instruction (	Guide explains how to complete th	(	D Commission Filers) 3328	2 Total pages filed: 5			
3 CANDIDATE /	MS / MRS / MR FIR:	ST	MI	OFFICE USE ONLY			
OFFICEHOLDER NAME	The Honorable God	cha Allen		Date Received			
				ELECTRONICALLY FILED			
	NICKNAME	 T	CLIEFIX	09/30/2021			
	NICKNAME LAS	nirez	SUFFIX	05/05/2021			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUI	TE#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked			
MAILING	886 Coyote Dr.			Receipt # Amount			
ADDRESS				Amount			
Change of Address	Rio Grande City, TX 78582			Date Processed			
				Date Imaged			
5 CAMPAIGN	MS / MRS / MR FIRS	ST	MI	-			
TREASURER NAME	Dr. Norl	perto					
10.1112							
	NICKNAME LAS	 Г	SUFFIX				
	Can	tu	Jr.				
6 CAMPAIGN	STREET ADDRESS (NO PO BOX	PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE			
TREASURER ADDRESS	5342 E. Hwy 83, Bldg. C, Ste. 9	5					
(Residence or Business)	Rio Grande City, TX 78582						
	,						
7 CAMPAIGN TREASURER	AREA CODE PHONE NU	MBER EXTENSION	DN				
PHONE	(956) 844-3111						
8 REPORT TYPE	January 15 30	Oth day before election	Runoff	15th day after campaign treasurer			
		dir day before election	Kulloli	appointment (officeholder only)			
	X July 15 8t	h day before election	Exceeded modified	Final Report (Attach C/OH-FR)			
			reporting limit				
9 PERIOD	Month Day Year		Month Day	Year			
COVERED	01/01/2021	THROUGH	06/30/202	1			
10 ELECTION	ELECTION DATE	l <u> </u>	ELECTION TYPE	_			
	Month Day Year	Primary	Runoff	Other			
		General	Special				
			<del></del>				
11 OFFICE	OFFICE HELD (if any)	•	12 OFFICE SOUGHT	(if known)			
	District Attorney (Multi-county)	District 229 Starr,					
	Duval, & Jim Hogg						
	ļ						
	GO TO PAGE 2						

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

13 C / OH NAME	Ramirez, Gocha Aller	n (The Honorable)	<b>14</b> Filer ID 00083328	(Ethics Commis	ssion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have been	litical expenditures made by political on made without the candidate's or office this information only if they receive n	eholder's knowl	ledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
ш°	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREAS	URER NAME		
		COMMITTEE CAMPAIGN TREAS	URER ADDRESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS ES OF LOANS, OR CONTRIBUTIO	S (OTHER THAN PLEDGES, LOANS, NS MADE ELECTRONICALLY)	<b>\$</b>	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANT	EES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	806.18
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		NG LOANS AS OF THE LAST DAY	\$	70,850.00
<b>17</b> AFFADAVIT			n, under penalty of perjury, that the ac and includes all information required Election Code.		
			The Honorable Gocha Allen Ra	mirez	
			Signature of Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL ABO	OVE			
Sworn to and subs	cribed before me, by the sa	aid	, this the		day
		ertify which, witness my hand and se			
Signature of office	cer administering	Printed name of officer admin	stering Title of office	er administering	oath

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

				3 01 3
18 FILER		<b>19</b> Filer ID 00083328	(Ethics Commis	sion Filers)
	ez, Gocha Allen (The Honorable)			
	DULE SUBTOTALS  OF SCHEDULE		SUBTOTA	L AMOUNT
1. X	<u> </u>		\$	0.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4. X	SCHEDULE E: LOANS		\$	0.00
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	0.00
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			
			1	

PLE	DGED CONTRIBUTIONS		SCHEDULE B
Т	he Instruction Guide explains how to	complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5
2 FILER NAME Ramirez, Gocha Allen (The Honorable)  4 TOTAL OF UNITEMIZED PLEDGES			3 Filer ID (Ethics Commission Filers) 00083328
			\$ 0.00
5 Date 6 Full name of pledgor out-of-state PAC (ID#:_		PAC (ID#:	8 Amount of pledge (\$) In-kind description (If applicable)
	7 Pledgor Address; City; State;	Zip Code	
10 Principal	occupation / Job title (See Instructions)	11 Franksian (Cooks	Check if travel outside of Texas. Complete Schedule
10 Fillicipai	occupation / 300 title (See Instructions)	11 Employer (See In	structions)

	LOANS					S	CHEDULE E
	The Instruction	on Guide explains how to	o complete this f	orm.	1	al pages Schedul n: 1/1 Rpt: 5/5	e E:
2	FILER NAME Ramirez, Gocha	Allen (The Honorable)			1	r ID (Ethics Co	mmission Filers)
4	TOTAL OF UN	IITEMIZED LOANS				\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Ar	mount (\$)
6	Is lender a financial institution?	8 Lender address; City	y; State;	Zip Code		10 Interest	
						<b>11</b> Maturity	Date
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction:	s)	•	
14	Description of Coll None	lateral		15 Check if personal funds w	ere depo		l account structions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount	Guaranteed (\$)
	not applicable	18 Guarantor address; City	y; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruction:	s)		

The C/OH Instruction (	Guide explains how to complete this	form.  1 Filer ID (Ethics Commission Filers) 00083328	)	2 Total pages filed: 5
3 CANDIDATE /	MS / MRS / MR FIRST	-	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable Goch	a Allen		Date Received
				ELECTRONICALLY FILED
	NICKNAME		CUEEN	01/18/2022
	NICKNAME LAST	ro-7	SUFFIX	01/10/2022
	Rami	iez		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE	E#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING	886 Coyote Dr.			ļ
ADDRESS				Receipt # Amount
Change of Address	Rio Grande City, TX 78582			
	j.			Date Processed
				Date Imaged
				Date illiageu
5 CAMPAIGN	MS / MRS / MR FIRST		MI	
TREASURER	Dr. Norbe		1411	
NAME	Di. Noise	110		
	NICKNAME LAST		SUFFIX	
	Cantu		Jr.	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX P	LEASE); APT / SUITE	E#; CITY;	STATE; ZIP CODE
ADDRESS	5342 E. Hwy 83, Bldg. C, Ste. 5			
(Residence or Business)				
	Rio Grande City, TX 78582			
7 CAMPAIGN	AREA CODE PHONE NUM	BER EXTENSION		
TREASURER		BER EXTENSION		
PHONE	(956) 844-3111			
8 REPORT				
TYPE	X January 15 30th	day before election Runoff		15th day after campaign treasurer
		ш	<u> </u>	appointment (officeholder only)
	July 15 8th c	day before election Exceede reporting	d modified	Final Report (Attach C/OH-FR)
		reporting	IIIIIL	
9 PERIOD	Month Day Year	M	onth Day	Year
COVERED	07/01/2021	THROUGH	12/31/202	1
10 ELECTION	ELECTION DATE	ELEC	TION TYPE	
	Month Day Year	Primary Ru	ınoff	Other
		General	ecial	
11 OFFICE	OFFICE HELD (if any)	12 OF	FICE SOUGHT	(if known)
III OFFICE	District Attorney (Multi-county) Di		TICE SOCOTTI	(ii known)
	Duval, & Jim Hogg	Suiter 220 Starry		
	1			
		GO TO PAGE 2		

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

13 C / OH NAME	Ramirez, Gocha Allei	(The Honorable)	<b>14</b> Filer ID 00083328	(Ethics Commiss	sion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or poli These expenditures may have been a officeholders are required to report t	made without the candidate's or offic	eholder's knowle	edge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
ш°	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASU	RER NAME		
		COMMITTEE CAMPAIGN TREASU	RER ADDRESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS ES OF LOANS, OR CONTRIBUTION		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTE	ES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	806.18
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDIN TING PERIOD	G LOANS AS OF THE LAST DAY	\$	70,850.00
<b>17</b> AFFIDAVIT			, under penalty of perjury, that the ac and includes all information required ection Code.		
			The Honorable Gocha Allen Rar	mirez	
			Signature of Candidate or Officeho	lder	
AFFIX NO	TARY STAMP / SEAL ABO	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the	d	lay
		rtify which, witness my hand and sea			
Signature of offi	cer administering	Printed name of officer adminis	tering Title of office	er administering o	oath

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

				3 01 5
<b>18</b> FILER NAME Ramirez, Goch	(Ethics Commiss	ion Filers)		
20 SCHEDULE SUE NAME OF SCHE			SUBTOTAL	AMOUNT
1. X SCH	HEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2. X SCH	HEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X SCH	HEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4. X SCH	HEDULE E: LOANS		\$	0.00
5. X SCH	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			0.00
6. X SCH	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			0.00
7. X SCH	HEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00
8. X SCH	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X SCH	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS			0.00
10. SCH	HEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11. SCH	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			
			-	

PLE	DGED CONTRIBUTIONS		SCHEDULE B
Т	he Instruction Guide explains how to	complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5
2 FILER NAME Ramirez, Gocha Allen (The Honorable)  4 TOTAL OF UNITEMIZED PLEDGES			3 Filer ID (Ethics Commission Filers) 00083328
			\$ 0.00
5 Date 6 Full name of pledgor out-of-state PAC (ID#:_		PAC (ID#:	8 Amount of pledge (\$) In-kind description (If applicable)
	7 Pledgor Address; City; State;	Zip Code	
10 Principal	occupation / Job title (See Instructions)	11 Franksian (Cooks	Check if travel outside of Texas. Complete Schedule
10 Fillicipai	occupation / 300 title (See Instructions)	11 Employer (See In	structions)

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how	to complete this f	orm.	1	ages Schedule E: /1 Rpt: 5/5
2	FILER NAME Ramirez, Gocha	a Allen (The Honorable)				(Ethics Commission Filers)
4	TOTAL OF UN	NITEMIZED LOANS			I	\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address; C	City; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupati	on / Job title (See Instructions)	)	13 Employer (See Instruc	ctions)	
14	Description of Col	lateral		15 Check if personal fund	ls were deposite	d into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	<b>18</b> Guarantor address; C	City; State;	Zip Code		
20	Principal occupati	on		21 Employer (See Instruc	etions)	

The C/OH Instruction (	Guide explains how to complete this	form. 1 Filer ID (Ethics Commiss 00083328		2 Total pages filed: 5
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable Goch	a Allen		Date Received
				ELECTRONICALLY FILED
	NICKNAME		CLIEFIX	07/15/2022
	NICKNAME LAST Ramii	·07	SUFFIX	0171372022
	Raniii	ez		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE	#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING	886 Coyote Dr.			
ADDRESS				Receipt # Amount
Change of Address	Rio Grande City, TX 78582			
				Date Processed
				Date Imaged
				Date illiaged
5 CAMPAIGN	MS / MRS / MR FIRST		MI	
TREASURER	Dr. Norbe	rto	1411	
NAME	Noise	110		
	NICKNAME LAST		SUFFIX	
	Cantu		Jr.	
			,	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PI	LEASE); APT	/ SUITE #; CITY;	STATE; ZIP CODE
ADDRESS	5342 E. Hwy 83, Bldg. C, Ste. 5			
(Residence or Business)				
	Rio Grande City, TX 78582			
7 CAMPAIGN	AREA CODE PHONE NUM	DED EVIENCION		
7 CAMPAIGN TREASURER		BER EXTENSION		
PHONE	(956) 844-3111			
8 REPORT				
TYPE	January 15 30th	day before election	Runoff	15th day after campaign treasurer
		any seriore erecaer.		appointment (officeholder only)
	X July 15 8th d		Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
		ı	eporting infilt	
9 PERIOD	Month Day Year		Month Day	Year
COVERED	01/01/2022	THROUGH	06/30/2022	<u>) -                                   </u>
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	Primary	Runoff	Other
		General	Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)
	District Attorney (Multi-county) Di	strict 229 Starr.		,
	Duval, & Jim Hogg	,		
	1			
		GO TO PAGE 2		
ı				

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

13 C / OH NAME	Ramirez, Gocha Allei	n (The Honorable)	<b>14</b> Filer ID (00083328	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou I officeholders are required to report this information	t the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER TH. ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.00
	2. <b>TOTAL POLITIC</b> (OTHER THAN F	IS)	\$ 0.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES			\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 806.18
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	<b>\$</b> 70,850.18
17 AFFIDAVIT				
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required to	
		The Honor	able Gocha Allen Ram	nirez
			of Candidate or Officehol	
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subse	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

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

				3 01 5	
<b>18</b> FILER NAME Ramirez, Goch	18 FILER NAME Ramirez, Gocha Allen (The Honorable) 19 Filer ID 00083328				
	20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE				
1. X SCH	HEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00	
2. X SCH	HEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00	
3. X SCH	HEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00	
4. X SCH	HEDULE E: LOANS		\$	0.00	
5. X SCH	HEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	0.00	
6. X SCH	HEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
7. X SCH	HEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00	
8. X SCH	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
9. X SCH	HEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00	
10. SCH	HEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$		
11. SCH	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$		
	HEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I FILER	RETURNED	\$		
			-		

PLE	DGED CONTRIBUTIONS		SCHEDULE B
Т	he Instruction Guide explains how to	complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5
2 FILER N	AME r, Gocha Allen (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083328
<u></u>	OF UNITEMIZED PLEDGES		\$ 0.00
5 Date	6 Full name of pledgor out-of-state	PAC (ID#:	8 Amount of pledge (\$) In-kind description (If applicable)
	7 Pledgor Address; City; State;	Zip Code	
10 Principal	occupation / Job title (See Instructions)	11 Franksian (Cooks	Check if travel outside of Texas. Complete Schedule
10 Fillicipai	occupation / 300 title (See Instructions)	11 Employer (See In	structions)

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how	to complete this f	orm.	1	ages Schedule E: /1 Rpt: 5/5
2	FILER NAME Ramirez, Gocha	a Allen (The Honorable)				(Ethics Commission Filers)
4	TOTAL OF UN	NITEMIZED LOANS			I	\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address; C	City; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupati	on / Job title (See Instructions)	)	13 Employer (See Instruc	ctions)	
14	Description of Col	lateral		15 Check if personal fund	ls were deposite	d into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	<b>18</b> Guarantor address; C	City; State;	Zip Code		
20	Principal occupati	on		21 Employer (See Instruc	etions)	

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

#### FORM COR-C/OH

00083328 6 Date Received  3 CANDIDATE / OFFICEHOLDER NAME The Honorable Gocha Allen  NICKNAME LAST SUFFIX Ramirez  4 ORIGINAL REPORT TYPE A January 15 Runoff Other (specify)	1	Filer ID (Ethi	cs Commission Filers)	2 Total pages filed:		OEEICE I	USE ONLY
3 CANDIDATE / OFFICEHOLDER NAME THE HONOrable Gocha Allen NICKNAME LAST SUFFIX Ramirez  4 ORIGINAL REPORT TYPE Sub 15 Exceeded modified reporting limit popularity per law before election per law political per law political per law political per law		,	,	. •			OOL ONL!
The Honorable Gocha Allen    NICKNAME   LAST   SUFFIX   SUFFIX	3	CANDIDATE /	MS / MRS / MR	FIRST	MI		ALLY FILED
NICKNAME LAST RAMIFEZ    VICKNAME   RAMIFEZ   SUFFIX		OFFICEHOLDER					LLI I ILLU
Ramirez  4 ORIGINAL REPORT TYPE		INAIVIE			SUFFIX		
A PRIGINAL REPORT TYPE   Jahry 15		ļ				Data Hand d. "	w Data Dantara 1 1
REPORT TYPE    3uly 15			X January 15	Runoff	Other (specify)	Date Hand-delivered o	i Date Postmarked
appointment (Officeholder only)  Sto Argument (Altache C/OH-FR)  5 ORIGINAL PERIOD COVERED  Month Day Year Month Day Year 12/31/2022  THROUGH 12/31/2022  THROUGH 12/31/2022  6 EXPLANATION OF CORRECTION  Mistakenly entered \$0 when I still have an outstanding personal loan that I made to my campaign from my personal funds in the amour \$70,850.18. This loan was made to my campaign before I was elected.  7 AFFIDAVIT  I swear, or affirm, under penalty of perjury, that this corrected report and correct.  Check the box next to any and all applicable statements:  Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.  Other reports: I swear, or affirm, that I am filing this correct report not later than the 14th business day after the date I lean the report as originally filed in accurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed in accurated or incomplete. I swear, or affirm, that any error or omission in the report as original filed was made in good faith.  The Honorable Gocha Allen Ramirez  Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said		REPORT TYPE	=			Receipt #	Amount
Semiannual reports:			30th day before election			1	
The thing that the reports: I swear, or affirm, that I am filing this correct report and correct.    Semiannual reports: I swear, or affirm, that I am filing this correct report and corrects.				`` `		Date Processed	-
6 EXPLANATION OF CORRECTION  Mistakenly entered \$0 when I still have an outstanding personal loan that I made to my campaign from my personal funds in the amour \$70,850.18. This loan was made to my campaign before I was elected.  I swear, or affirm, under penalty of perjury, that this corrected report and correct.  Check the box next to any and all applicable statements:  Semiannual reports: I swear, or affirm that the original represent made in good faith and without an intent to mislead or to misrepresent the information contained in the report.  Other reports: I swear, or affirm, that I am filing this correct report not later than the 14th business day after the date I lear that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.  The Honorable Gocha Allen Ramirez  Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the	5	ODICINAL DEDICE	<u> </u>		Day Voor	4	
6 EXPLANATION OF CORRECTION  Mistakenly entered \$0 when I still have an outstanding personal loan that I made to my campaign from my personal funds in the amour \$70,850.18. This loan was made to my campaign before I was elected.  I swear, or affirm, under penalty of perjury, that this corrected report and correct.  Check the box next to any and all applicable statements:    Semiannual reports: I swear, or affirm that the original reports was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.    Other reports: I swear, or affirm, that I am filling this correct report not later than the 14th business day after the date I lean that the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, and any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filled is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally error or omission in the report as originally error or omission in the report as originally error or om	9			TUDOUCU		Date Imaged	
Mistakenly entered \$0 when I still have an outstanding personal loan that I made to my campaign from my personal funds in the amour \$70,850.18. This loan was made to my campaign before I was elected.  I swear, or affirm, under penalty of perjury, that this corrected report and correct.  Check the box next to any and all applicable statements:  Semiannual reports: I swear, or affirm that the original reports was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.  The reports: I swear, or affirm, that I am filing this correct report not later than the 14th business day after the date I lean that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that I am filing this correct report not later than the 14th business day after the date I lean that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that I am filing this correct report not later than the 24th business day after the date I lean that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that I am filing this correct report not later than the 24th business day after the date I lean that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that I am filing this correct report not later than the 24th business day after the date I lean that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that I am filing this correct report not later than the 24th business day after the date I lean that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that I am filing this correct report not later than the 24th business day after the date I lean that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that I am filing this correct report not later than the 24th business day after the date I lean that the original reports or a filed was made in good faith.	6	EXPLANATION OF C		12/31	12022	<u> </u>	
Time   Semiannual reports:   I swear, or affirm, under penalty of perjury, that this corrected report and correct.				nding personal loan that I made to r	ny campaign from my n	ersonal funds in the	e amount of
I swear, or affirm, under penalty of perjury, that this corrected report and correct.  Check the box next to any and all applicable statements:  X Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.  Other reports: I swear, or affirm, that I am filing this correct report not later than the 14th business day after the date I learn that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.  The Honorable Gocha Allen Ramirez  Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the	7	AFFIDA //T					
Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.  Other reports: I swear, or affirm, that I am filing this correct report not later than the 14th business day after the date I learn that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally made in good faith.  The Honorable Gocha Allen Ramirez  Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the	1	AFFIDAVII			under penalty of perjury	y, that this corrected	d report is true
was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.  Other reports: I swear, or affirm, that I am filing this correct report not later than the 14th business day after the date I learn that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as origined was made in good faith.  The Honorable Gocha Allen Ramirez  Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said				Check the box ne	xt to any and all applica	ble statements:	
report not later than the 14th business day after the date I learn that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.  The Honorable Gocha Allen Ramirez  Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the				was made ir	n good faith and without	an intent to mislea	
Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the				report not la that the repo swear, or aff	ter than the 14th busine ort as originally filed is ir firm, that any error or or	ess day after the da naccurate or incomp	te I learned olete. I
AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the					The Honorable Goch	a Allen Ramirez	
Sworn to and subscribed before me, by the said, this the					Signature of Candidate	e or Officeholder	
Sworn to and subscribed before me, by the said, this the, this the, to certify which, witness my hand and seal of office.		AFFIX NOTARY ST.	AMD / SEAL ABOVE				
of, 20, to certify which, witness my hand and seal of office.			AIVIF / SEAL ADOVE				
		Sworn to and subsci		I	, this t	he	day
		Sworn to and subscr	ribed before me, by the sai	I ify which, witness my hand and seal	, this to	he	day
Signature of officer administering oath  Printed name of officer administering oath  Title of officer administering		Sworn to and subsci	ribed before me, by the sai	I	, this t I of office.	he	day

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

The C/OH Instruction (	Guide explains how to complete this	form. 1 Filer ID (Ethics Comm 00083328		2 Total pages filed: 6
3 CANDIDATE /	MS / MRS / MR FIRS	Γ	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable Goch	a Allen		Date Received
				ELECTRONICALLY FILED
	NICKALAME		CHEEN	01/12/2023
	NICKNAME LAST Rami	ro7	SUFFIX	01/12/2023
	Raili	Tez		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITI	Ε#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING	886 Coyote Dr.			
ADDRESS				Receipt # Amount
Change of Address	Rio Grande City, TX 78582			
	,			Date Processed
				Date Imaged
				Date illiageu
5 CAMPAIGN	MS / MRS / MR FIRST		MI	
TREASURER	Dr. Norbe		IVII	
NAME	DI. Noibe	5110		
	NICKNAME LAST		SUFFIX	
	Cantu	Į.	Jr.	
			_,	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX P	LEASE); AP	T / SUITE #; CITY;	STATE; ZIP CODE
ADDRESS	5342 E. Hwy 83, Bldg. C, Ste. 5			
(Residence or Business)				
	Rio Grande City, TX 78582			
7 CAMPAIGN	AREA CODE PHONE NUM	IDED EVIENCION		
TREASURER		IBER EXTENSION		
PHONE	(956) 844-3111			
8 REPORT				
TYPE	X 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)
			reporting intil	
9 PERIOD	Month Day Year		Month Day	Year
COVERED	07/01/2022	THROUGH	12/31/2022	2
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	Primary	Runoff	Other
		General	Special	
		Ш	Ш	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)
	District Attorney (Multi-county) D	istrict 229 Starr.		()
	Duval, & Jim Hogg	,		
		GO TO PAGE 2		
ı				

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

13 C / OH NAME	Ramirez, Gocha Allei	n (The Honorable)	<b>14</b> Filer ID (00083328	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	OMMITTEE NAME				
Ш	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$ 0.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 0.00			
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00			
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 0.00			
CONTRIBUTION BALANCE	REPORTING PE			<b>\$</b> 19.00			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A: TING PERIOD	S OF THE LAST DAY	<b>\$</b> 70,850.18			
17 AFFIDAVIT							
		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.	all information required t				
		The Honor	able Gocha Allen Ram	nirez			
			of Candidate or Officehol				
AFFIX NO	TARY STAMP / SEAL ABO	DVE					
Sworn to and subs	cribed before me. by the s	aid	, this the	day			
		ertify which, witness my hand and seal of office.	,				
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administering oath			

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

				4 01 6	
<b>18</b> FILER NAME Ramirez, Goch	18 FILER NAME Ramirez, Gocha Allen (The Honorable)  19 Filer ID (00083328)				
	20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE			AMOUNT	
1. X SC	HEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00	
2. X SC	HEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00	
3. X SC	HEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00	
4. X SC	HEDULE E: LOANS		\$	0.00	
5. X SC	HEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	0.00	
6. X SC	HEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
7. X SC	HEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00	
8. X SC	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
9. X SC	HEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00	
10. SC	HEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$		
11. SC	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$		
	HEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I FILER	RETURNED	\$		
			•		

PLEI	DGED CONTRIBUTIONS		SCHEDULE B
Т	he Instruction Guide explains how to c	complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 5/6
2 FILER N	AME z, Gocha Allen (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083328
<u></u>	OF UNITEMIZED PLEDGES		\$ 0.00
5 Date	6 Full name of pledgor out-of-state I  7 Pledgor Address; City; State; 2		8 Amount of pledge (\$)   9 In-kind description (If applicable)
		lee .	Check if travel outside of Texas. Complete Schedule
10 Principai	occupation / Job title (See Instructions)	11 Employer (See In	structions)

	LOANS						SCHE	DULE E
	The Instructio	on Guide explains how to co	omplete this f	orm.	1		ges Schedule E: 1 Rpt: 6/6	
2	FILER NAME Ramirez, Gocha	Allen (The Honorable)			3	Filer ID 000833	(Ethics Commis 28	sion Filers)
4	TOTAL OF UN	IITEMIZED LOANS			<b>I</b>		\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		)	9 Loan Amount	t (\$)
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			10 Interest Rate	
							<b>11</b> Maturity Date	<b>!</b>
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See In	structions)			
14	Description of Coll	ateral		15 Check if personal	funds were	deposited	into political acco	
16	GUARANTOR INFORMATION	17 Name of guarantor		<u> </u>			19 Amount Guar	ranteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20	Principal occupation	on		21 Employer (See In	structions)			

Th	e C/OH Instruction (	Guide explains how to comp	olete this form.	1 Filer ID (Ethics Commi 00083328		2 Total pages	s filed: 20
3	CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE	LICE ONLY
	OFFICEHOLDER NAME	The Honorable	Gocha Allen			Date Received	E USE ONLY
						ELECTRONI	CALLY FILED
		NICKNAME	LAST		SUFFIX	07/06/2023	
		THORW WIL	Ramirez		301117		
4	CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivere	d or Date Postmarked
	OFFICEHOLDER MAILING ADDRESS	886 Coyote Dr.				Receipt #	Amount
	Change of Address	Rio Grande City, TX 785	82				
		The Grande Oily, 170 rec	<u> </u>			Date Processed	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI	<u></u>	
	TREASURER NAME	Mr.	Abel				
		NICKNAME	LAST		SUFFIX		
		MCKNAWL	Villarreal Jr.		301117		
			villatteat 51.				
Ļ	CAMPAICN	CTREET ADDRESS (NO.D.	O BOY BLEACE):	4.D-	F / CLUTE # CITY		TATE: 710 CODE
6	CAMPAIGN TREASURER	STREET ADDRESS (NO P	O BOX PLEASE);	AP	Γ / SUITE #; CITY;	5	STATE; ZIP CODE
	ADDRESS	43 Rincon Road					
	(Residence or Business)						
		Roma, TX 78584					
Ļ	CAMPAICN	ADEA CODE DUG	ANE AU MADED	VTENCION			
ľ	CAMPAIGN TREASURER		NE NUMBER E	EXTENSION			
	PHONE	(956) 222-6041					
Ļ	DEDODT						
8	REPORT TYPE	January 15	20th day before	alastian 🗖	Dunoff F	1 5th day offer	aamaalaa traaalirar
	=	January 15	30th day before	election	Runoff	appointment (	campaign treasurer officeholder only)
		X July 15	8th day before	election	Exceeded modified	Final Report (/	Attach C/OH-FR)
		-			reporting limit	_	
9	PERIOD	Month Day Year			Month Day	Year	
	COVERED	01/01/2023	T⊦	IROUGH	06/30/202	23	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
		Month Day Year		rimary	Runoff	Other	
				eneral	Special		
					·		
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
		District Attorney (Multi-co	ounty) District 229	9 Starr,			
		Duval, & Jim Hogg					
Г					•		
			ദവ T	O PAGE 2			
l				O I AGE Z			

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

13 C / OH NAME	Ramirez, Gocha Allei	n (The Honorable)	<b>14</b> Filer ID 00083328	(Ethics Com	mission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendir These expenditures may have been made withou I officeholders are required to report this information	t the candidate's or offic	ceholder's kno	wledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	MMITTEE NAME				
	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELI		, \$	720.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$	66,501.68		
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$	0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$	860.00		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$	58,821.57		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$	70,850.18		
17 AFFIDAVIT							
		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.	all information required				
		The Honora	able Gocha Allen Ra	mirez			
			of Candidate or Officeho				
AFFIX NO	TARY STAMP / SEAL AB	DVE					
Sworn to and subso	cribed before me, by the s	aid	, this the		_ day		
of	, 20, to ce	ertify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of office	er administeri	ng oath		
-	,	-					

				C	OVER S	HEET PG 3 3 of 20
		R NAN	ME Gocha Allen (The Honorable)	<b>19</b> Filer ID 00083328	(Ethics Co	mmission Filers)
			E SUBTOTALS SCHEDULE		SUBT	OTAL AMOUNT
	1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	59,700.00
	2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	6,801.68
	3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
,	4.		SCHEDULE E: LOANS		\$	
	5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	860.00
	6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
	7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
	8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
	9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
	10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
	11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
	12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/13 Rpt: 4/20	
2	FILER NAME Ramirez, Go	ocha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 04/11/2023	5 Full name of contributor out-of-state PAC (ID#:_ AD Mercantile LLC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
_		Rio Grande City, TX 78582				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/20/2023	Full name of contributor out-of-state PAC (ID#:_Alaniz, Pedro Contributor address; City; State; Zip Code Roma, TX 78584			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/20/2023	Full name of contributor out-of-state PAC (ID#:_ Alvarez-Guzman, Reymundo Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu	Roma, TX 78584 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/16/2023	Full name of contributor out-of-state PAC (ID#:_ Baltazar Salazar, Attorney at Law PLLC Contributor address; City; State; Zip Code Houston, TX 77074			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/21/2023	Full name of contributor out-of-state PAC (ID#:_ Barrera, Ovidio (Mr.)  Contributor address; City; State; Zip Code  Rio Grande City, TX 78582			Amount of Contribution (\$)	\$3,000.00
	Principal occu Rancher	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/13 Rpt: 5/20	
2	FILER NAME Ramirez, Go	ocha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 05/16/2023	5 Full name of contributor out-of-state PAC (ID#:_ Barrera, Ricardo  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
_		Roma, TX 78584				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 04/06/2023	Full name of contributor out-of-state PAC (ID#:_ Dr. Gauri Kanhere PLLC  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu	Rio Grande City, TX 78582 pation / Job title (See Instructions)	Employer (See Instructions			
	Timolpai occa	pation 7 vob title (oce monucions)	Employer (See Managina)	,		
	Date 04/17/2023	Full name of contributor out-of-state PAC (ID#:_ E & A Development LLC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		Rio Grande City, TX 78582				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/05/2023	Full name of contributor out-of-state PAC (ID#:_ Eduardo Ramirez Law Firm PLLC Contributor address; City; State; Zip Code Rio Grande City, TX 78582			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/14/2023	Full name of contributor out-of-state PAC (ID#:_Falcon, Antonio (Dr.)  Contributor address; City; State; Zip Code  Rio Grande City, TX 78582			Amount of Contribution (\$)	\$2,020.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/13 Rpt: 6/20	
2	FILER NAME Ramirez, Go	ocha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 05/15/2023	5 Full name of contributor out-of-state PAC (ID#:_ Flores, Flor  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$500.00
_	5	Rio Grande City, TX 78582				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 05/16/2023	Full name of contributor out-of-state PAC (ID#:_Garcia, Daniel  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Rio Grande City, TX 78582 pation / Job title (See Instructions)	Employer (See Instructions			
	Attorney	pation 7 oob title (oce mondetions)	Self-Employed	,		
	Date 05/16/2023	Full name of contributor out-of-state PAC (ID#:_ Garcia, Eligio Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		Mcallen, TX 78504				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/16/2023	Full name of contributor out-of-state PAC (ID#:_Garcia-Vela, Martie  Contributor address; City; State; Zip Code  Houston, TX 77007	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	)		
	Date 05/12/2023	Full name of contributor out-of-state PAC (ID#:_ Garza Jr., Humberto  Contributor address; City; State; Zip Code  Weslaco, TX 78596	)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	)N	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 4/13 Rpt: 7/20	
2	FILER NAME Ramirez, Go	cha Allen (The Honorable)			3	Filer ID (Ethics Commission 00083328	ı Filers)
4	Date 05/15/2023	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Mission, TX 78573 pation / Job title (See Instructions)	9	Employer (See Instructions	  -  s)		
	Housewife			N/A			
	Date 04/28/2023	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Enrique (Mr.)  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
		Rio Grande City, TX 78582					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 05/17/2023	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Gerardo  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$250.00
		Rio Grande City, TX 78582					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 04/11/2023	Full name of contributor out-of-state PAC (ID#:_Gutierrez, Baldemar (Mr.)  Contributor address; City; State; Zip Code  Alice, TX 78332		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Duval County	5)		
	Date 04/13/2023	Full name of contributor out-of-state PAC (ID#:_ Hinojosa, Antonio  Contributor address; City; State; Zip Code  Roma, TX 78584				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/13 Rpt: 8/20	
2	FILER NAME Ramirez, Go	ocha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4		5 Full name of contributor	)	7	Amount of Contribution (\$)	\$500.00
		Garciasville, TX 78547				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#: J. Michael Moore Law Firm  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Mcallen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/20/2023	Full name of contributor out-of-state PAC (ID#:_ Las Alitas Sports & Entertainment LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Roma, TX 78584  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	i illicipai occa	pation 7 oob title (oce monuculons)	Employer (See Matractions	,		
	Date 04/20/2023	Full name of contributor out-of-state PAC (ID#:_ Law Office of Calixtro Villareal PLLC Contributor address; City; State; Zip Code Rio Grande City, TX 78582	)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/12/2023	Full name of contributor out-of-state PAC (ID#:_ Law Office of Hilda Gonzalez Garza PLLC Contributor address; City; State; Zip Code Rio Grande City, TX 78582			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/13 Rpt: 9/20	
2	FILER NAME Ramirez, Go	ocha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 05/10/2023	5 Full name of contributor out-of-state PAC (ID#:_ Law Office of J.M. Chema Garza  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$500.00
_		Rio Grande City, TX 78582				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/19/2023	Full name of contributor out-of-state PAC (ID#:_ Law Office of Margil Sanchez, Jr. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Rio Grande City, TX 78582 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Timolpai occa	pation 7 oob title (oce monuculons)	Employer (See Manacions	,		
	Date 04/21/2023	Full name of contributor	)		Amount of Contribution (\$)	\$1,500.00
		Rio Grande City, TX 78582				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/31/2023	Full name of contributor out-of-state PAC (ID#:_ Law office of Isaac Pena PLLC Contributor address; City; State; Zip Code Rio Grande City, TX 78582			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/20/2023	Full name of contributor out-of-state PAC (ID#:_Linebarger Goggin Blair Sampson  Contributor address; City; State; Zip Code  Austin, TX 78760			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/13 Rpt: 10/20	
2	FILER NAME Ramirez, Go	cha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	n Filers)
4	Date 05/15/2023	5 Full name of contributor out-of-state PAC (ID#:_Marroquin, Manuel 6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$250.00
_		Rio Grande City, TX 78582				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 04/04/2023	Full name of contributor out-of-state PAC (ID#:_ Mascorro, Edgar (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Rio Grande City, TX 78582 pation / Job title (See Instructions)	Employer (See Instructions	)		
		,				
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_ Mirelez Investments Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		Edinburg, TX 78541				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/11/2023	Full name of contributor out-of-state PAC (ID#:_Molina , Alejandro (Mr.)  Contributor address; City; State; Zip Code  Rio Grande City, TX 78582	)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/20/2023	Full name of contributor out-of-state PAC (ID#:_ Moreno, Daniella Contributor address; City; State; Zip Code  Hebbronville, TX 78361			Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/13 Rpt: 11/20	
2	FILER NAME Ramirez, Go	ocha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 05/10/2023	5 Full name of contributor out-of-state PAC (ID#:_ Pope & Pena Attorney's  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_		Rio Grande City, TX 78582				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 04/12/2023	Full name of contributor out-of-state PAC (ID#:_Quintanilla Law Office PLLC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/17/2023	Full name of contributor out-of-state PAC (ID#:_ R &R Collision Center  Contributor address; City; State; Zip Code  Rio Grande City, TX 78582			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#:_ Ramirez, Armando Contributor address; City; State; Zip Code Roma, TX 78584			Amount of Contribution (\$)	\$80.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		
	Date 04/25/2023	Full name of contributor out-of-state PAC (ID#:_ Ramirez, Urbano III (Mr.)  Contributor address; City; State; Zip Code  Rio Grande City, TX 78582			Amount of Contribution (\$)	\$180.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/13 Rpt: 12/20	
2	FILER NAME Ramirez, Go	cha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 05/20/2023	5 Full name of contributor out-of-state PAC (ID#:_ Ramos Jr., Jose  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
•	Dringing! goog	Roma, TX 78584	Employer (Coo Instructions			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#:_ Regina Enterprises  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Rio Grande City, TX 78582 pation / Job title (See Instructions)	Employer (See Instructions	)		
	о.ра. оооа	panon, cos uno (cos monasnon)				
	Date 05/25/2023	Full name of contributor out-of-state PAC (ID#:_ Reso Enterprises LLC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
		Roma, TX 78584				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/10/2023	Full name of contributor out-of-state PAC (ID#:_ Reyna Homes LLC Contributor address; City; State; Zip Code Rio Grande City, TX 78582	)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/17/2023	Full name of contributor out-of-state PAC (ID#:_ Rivera's Towing Contributor address; City; State; Zip Code Rio Grande City, TX 78582			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/13 Rpt: 13/20	
2	FILER NAME Ramirez, Go	cha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 05/15/2023	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Rodriguez, Esther</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$40.00
_	Deireire I e e e	Rio Grande City, TX 78582	O Francis var (Cas Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 04/18/2023	Full name of contributor out-of-state PAC (ID#:_Salazar Insurance Group LLC  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu	Harlingen, TX 78550 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#:_Salinas, Jesus  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$80.00
	Principal occu	Roma, TX 78584 pation / Job title (See Instructions)	Employer (See Instructions	)		
	i illicipai occa	pation 7 oob title (oce matacaons)	Employer (See Matuctions	,		
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID#:_Salinas, Tony  Contributor address; City; State; Zip Code  Hebbronvilee, TX 78361	)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Business Ov	pation / Job title (See Instructions) /ner	Employer (See Instructions Self-Employed	)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#:_Sanchez, Marla Contributor address; City; State; Zip Code Sullivan, TX 78595			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/13 Rpt: 14/20	
2	FILER NAME Ramirez, Go	cha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 05/17/2023	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_ Solis Tires</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$250.00
0	Dringing oggu	Roma, TX 78584	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 05/05/2023	Full name of contributor out-of-state PAC (ID#:_Solis, Laura  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Dringing Lagran	La Grulla, TX 78548	Franks or (Cas Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/14/2023	Full name of contributor out-of-state PAC (ID#:_ The Pediatric Care Center  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5,000.00
		Rio Grande City, TX 78582				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#:_ Trevino, Brenda Contributor address; City; State; Zip Code Rio Grande City, TX 78582			Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/21/2023	Full name of contributor out-of-state PAC (ID#:_ Trevino, Elida (Mrs.)  Contributor address; City; State; Zip Code  Rio Grande City, TX 78582	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Housewife	pation / Job title (See Instructions)	Employer (See Instructions N/A	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/13 Rpt: 15/20	
2	FILER NAME Ramirez, Go	ocha Allen (The Honorable)		3	Filer ID (Ethics Commission 00083328	on Filers)
4	Date 04/21/2023	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$250.00
_	Delicalis al access	Rio Grande City, TX 78582	O Faralassa (Octobration)			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#:_Vale, Sam  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Rio Grande City, TX 78582 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Businessma		Self-Employed			
	Date 05/07/2023	Full name of contributor out-of-state PAC (ID#: Vera, Yvonne Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		Roma, TX 78584				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#:_Villarreal, Rigoberto  Contributor address; City; State; Zip Code  Mission, TX 78572	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/10/2023	Full name of contributor out-of-state PAC (ID#:_ Wyatt Ranches of Texas LLC Contributor address; City; State; Zip Code Realitos, TX 78376	)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 13/13 Rpt: 16/20	
	FILER NAME	ocha Allen (The Honorable)	3	Filer ID (Ethics Commission 00083328	on Filers)	
4	Date 05/05/2023	Full name of contributor		7	Amount of Contribution (\$)	\$2,700.00
		Realitos, TX 78376				
	Principal occu Rancher	ipation / Job title (See Instructions)	9 Employer (See Instructions Wyatt Ranches	s)		
	Date 05/10/2023	Full name of contributor out-of-state PAC (ID#: Wyatt, Oscar  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
		Realitos, TX 78376				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions Wyatt Ranches	<u> </u> s)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

#### SCHEDULE A2

The	e Instru	ction Guide explains how to complete this f	orm.	1 Total pages Sc Sch: 1/2 Rpt:			
	ER NAME mirez, Go	ocha Allen (The Honorable)		3 Filer ID (Ethic 00083328	es Commission Filers)		
<sup>4</sup> TO	TAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date 05/2	e 20/2023	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>			9 In-kind contribution   description   Food for campaign   fundraiser.		
<b>10</b> Prin	ıcipal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON		nstructions)		
	siness O	· · · · · · · · · · · · · · · · · · ·	Starr Moulding	,	·		
<b>12</b> Con	ntributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)		
<b>14</b> Con	ntributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (	FOR JUDICIAL)		
<b>16</b> If co	ontributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 05/:	e 20/2023	Full name of contributor out-of-state PAC (ID#: Mascorro, Karina Contributor address; City; State; Zip Code	Amount of In-kind contribution (\$) description \$560.00   Waiters for campa fundraising event.				
		Roma, TX 78584		Check if travel of	l butside of Texas. Complete Schedule T.		
	icipal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)  Owner	Employer (FOR NON-JUDICIAL) (See instructions) Starr Moulding				
Con	ntributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)				
Con	ntributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If co	ontributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 05/2	e 20/2023	Full name of contributor out-of-state PAC (ID#: Villarreal, Abel Contributor address; City; State; Zip Code		Amount of contribution (\$) \$600.00	In-kind contribution Contribution I description I Music for campaign I fundraiser.		
		Roma, TX 78584		Check if travel of	I butside of Texas. Complete Schedule T.		
	icipal occi orney	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON 229th District Attor	-JUDICIAL) (See i	nstructions)		
		principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)		
Con	ntributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (	FOR JUDICIAL)		
If co	ontributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 18/20 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Ramirez, Gocha Allen (The Honorable) 00083328 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 05/20/2023 Villarreal Jr., Abel \$2,820.84 Food for campaign 7 Contributor address; City; State; Zip Code fundraiser. Roma, TX 78584 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 229th District Attorney's Office Attorney 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula F1:	
1	Total pages Schedule F1: Sch: 1/2 Rpt: 19/20	2 FILER NAME Ramirez, Gocha Allen (The Honorable) 3 Filer ID (Ethics Commission Filers) 00083328
4	Date	5 Payee name
	04/03/2023	City of Roma - Parks & Recreation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	77 E. Convent Ave
		Roma, TX 78584
		Kulla, 17 70304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	_/\\ _!\\ _!\\ _!\\ _!\\	Check if Austin, TX, officeholder living expense
		Gift to the City of Roma Parks & Recreation
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/30/2023	Freer Senior Citizens
_	Amount (\$)	Payee address; City; State; Zip Code
	` ,	
	\$250.00	PO Box 1256
		Freer, TX 78357
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gift to Freer Senior Citizens
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/24/2023	Lone Star National Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	2300 E. US Hwy 83
	\$10.00	2300 E. 03 Hwy 03
		Rio Grande City, TX 78582
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Bank Service Charge
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	,	
l		

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/2 Rpt: 20/20	Ramirez, Gocha Allen (The Honorable) 00083328
4	Date	5 Payee name
	03/28/2023	Lone Star National Bank
6	Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 2300 E. US Hwy 83
		Rio Grande City, TX 78582
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Order of checks
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/21/2023	Rio Grande City EDC
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 5332 E. US HWY 83 STE B Rio Grande City, TX 78582
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment for reservation of Tijerina Courtyard for political fundraiser.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/10/2023	Rio Grande City EDC
	Amount (\$) \$225.00	Payee address; City; State; Zip Code 5332 E. US HWY 83 STE B Rio Grande City, TX 78582
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment for reservation of Tijerina Courtyard for political fundraiser.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction	Guide explains how to complete th	is form. (E	Filer ID Ethics Commission Filers 10083328		2 Total pages file 4	d:
3 CANDIDATE /	MS / MRS / MR FIRS	ST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable Goo	cha Allen			Date Received  ELECTRONICAL	LY FILED
	NICKNAME LAS Ran	T nirez		SUFFIX	01/09/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUIT	TE#; CITY;		ZIP CODE	Date Hand-delivered or [	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	886 Coyote Dr.				Receipt #	Amount
Change of Address	Rio Grande City, TX 78582				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIRS	ST		MI		
TREASURER NAME	Mr. Abel	I				
	NICKNAME LAST			SUFFIX		
	Villa	rreal Jr.				
6 CAMPAIGN	STREET ADDRESS (NO PO BOX	PLEASE);	APT / SUITE	E#; CITY;	STAT	E; ZIP CODE
TREASURER ADDRESS	43 Rincon Road					
(Residence or Business)	Roma, TX 78584					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NU (956) 222-6041	MBER EXTE	NSION			
8 REPORT TYPE	X January 15 30	oth day before electi	on Runoff	Х	15th day after cam appointment (office	
	July 15 Stf	h day before electio	n Exceede reporting	ed modified limit	Final Report (Attac	h C/OH-FR)
9 PERIOD COVERED	Month Day Year 07/01/2023	THROU		onth Day 12/31/2023	Year 3	
	0170172020			12,01,202	•	
10 ELECTION	ELECTION DATE  Month Day Year	Drimon		CTION TYPE	Othor	
	Month Day Year 03/05/2024	X Primary			Other	
		Genera		pecial		
11 OFFICE	OFFICE HELD (if any)	•		FICE SOUGHT	(if known)	
	District Attorney (Multi-county) I Duval, & Jim Hogg	District 229 Sta	rr,			
	•		•			
		GO TO P	AGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Ramirez, Gocha Allei	ı (The Honorable)	<b>14</b> Filer ID 00083328	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political contributions accepted or political report to report t	made without the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
ш°	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASU	RER NAME	
		COMMITTEE CAMPAIGN TREASU	RER ADDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS ES OF LOANS, OR CONTRIBUTION		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTE	ES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 52,250.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED : RIOD	AS OF THE LAST DAY OF THE	<b>\$</b> 6,571.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDIN TING PERIOD	G LOANS AS OF THE LAST DAY	<b>\$</b> 20,850.18
<b>17</b> AFFIDAVIT			under penalty of perjury, that the ac and includes all information required t ection Code.	
			The Honorable Gocha Allen Ran	nirez
			Signature of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		rtify which, witness my hand and sea		
Signature of office	cer administering	Printed name of officer administ	tering Title of office	r administering oath

#### SUBTOTALS - C/OH

			3 of 4		
<b>18</b> FILER NAME Ramirez, Go	(Ethics Commission Filers)				
20 SCHEDULE S			SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$		
2. 📗 5	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3. 📗 5	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4. 🔲 S	SCHEDULE E: LOANS	\$			
5. X S	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				
6. 📗 S	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
8. 📗 S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
9. 📗 S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$		
10. 🔲 S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$		

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction G			ages	/Contract Labor		OTHER (enter a	category not listed above)	
Ļ						W to con	пріс	te this form.	_			
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission File	ers)
	Sch: 1/1 Rpt: 4/4			ocha Allen (The	: Honorable)					00083328		
4	Date	5	Payee name									
	12/18/2023		Ramirez, Go	ocha Allen								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de					
	\$50,000.00		886 COYOT	ΓE DR								
			Rio Grande	City, TX 78582								
8	PURPOSE	(a)		ee Categories listed at t		ulo)	(b)	Description				
	OF	l`		ment/Reimburs		uie)	` '		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE		Loui Nepay		Serrierie			Check if Austin,	, TX,	officeholder living	g expense	
								Partial Repay	me	ent of perso	nal loan to campaigr	ı
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Off	fice souç	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name	<del>-</del>				<u> </u>				
	08/22/2023		Roma Indep	endent School	District							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$1,000.00		2015 N. HW	/Y 83								
			Roma, TX 7	OE01								
		L.										
	PURPOSE OF	(a)		ee Categories listed at t	the top of this sched	ule)	(b)	Description				
	EXPENDITURE		Advertising	Expense				<b>=</b>		de of Texas. Con officeholder livin	plete Schedule T.	
								Scoreboard A		onicendidei iivini	g expense	
								Scoreboard A	٦u			
_	Commiste ONII V if diseast	Ļ	Condidate/Offi		0"		la 4			Office h	_   _	
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Oili	ceholder name	Oli	fice soug	ynı			Office h	eiu	
	<u>'</u>	_										
	Date		Payee name									
	11/20/2023		Texas Dem	ocratic Party								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$1,250.00		PO Box 157	'07								
			Austin, TX 7	78761								
	PURPOSE	(a)	Category (Se	ee Categories listed at t	the top of this sched	ule)	(b)	Description				
	OF	``	Fees	o categorico notos at t		,			outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE							Check if Austin,	, TX,	officeholder living	g expense	
								Filing fee for	pla	ce on ballot		
	Complete ONLY if direct		Candidate/Offi	ceholder name	Off	fice soug	ght			Office h	eld	
	expenditure to benefit C/OI											
l												

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (	Guide explains how to complete this f	form.   1 Filer ID (Ethics Commission I 00083328		2 Total pages filed: 4
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable Gocha	Allen		Date Received ELECTRONICALLY FILED
	NICKNAME LAST Ramire	ez	SUFFIX	07/01/2024
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE	#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	886 Coyote Dr.			Receipt # Amount
Change of Address	Rio Grande City, TX 78582			Date Processed
				Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRST		MI	
TREASURER NAME	Mr. Abel			
	NICKNAME LAST		SUFFIX	
	Villarre	al Jr.		
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLI	EASE); APT / SI	JITE#; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	43 Rincon Road			
(Residence or Business)	Roma, TX 78584			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMB (956) 222-6041	BER EXTENSION		
8 REPORT TYPE	January 15 30th c	day before election Runo	off	15th day after campaign treasurer appointment (officeholder only)
	X July 15 8th da		eeded modified rting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Year		Month Day	Year
COVERED	01/01/2024	THROUGH	06/30/2024	l
10 ELECTION	ELECTION DATE		LECTION TYPE	——————————————————————————————————————
	Month Day Year	Primary	Runoff	Other
		General	Special	
11 OFFICE	OFFICE HELD (if any)	12	OFFICE SOUGHT (	(if known)
	District Attorney (Multi-county) Dis Duval, & Jim Hogg	strict 229 Starr,		
	1			
		GO TO PAGE 2		

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Ramirez, Gocha Allei	(The Honorable)	<b>14</b> Filer ID 00083328	(Ethics Con	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have been	itical expenditures made by political made without the candidate's or office this information only if they receive n	eholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
ш°	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASU	JRER NAME		
		COMMITTEE CAMPAIGN TREASU	JRER ADDRESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS ES OF LOANS, OR CONTRIBUTION	(OTHER THAN PLEDGES, LOANS, NS MADE ELECTRONICALLY)	\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTE	ES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	500.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED RIOD	AS OF THE LAST DAY OF THE	\$	6,071.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDINTING PERIOD	NG LOANS AS OF THE LAST DAY	\$	20,850.18
<b>17</b> AFFIDAVIT			n, under penalty of perjury, that the ac and includes all information required lection Code.		
			The Honorable Gocha Allen Rai	mirez	
			Signature of Candidate or Officeho	older	<u></u>
AFFIX NO	TARY STAMP / SEAL ABO	OVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
		ertify which, witness my hand and se			
Signature of office	cer administering	Printed name of officer adminis	stering Title of office	er administer	ing oath

#### SUBTOTALS - C/OH

			3 of 4		
<b>18</b> FILER NAME Ramirez, Go	(Ethics Commission Filers)				
20 SCHEDULE S NAME OF SC			SUBTOTAL AMOUNT		
1. S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$		
2.	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4. S	4. SCHEDULE E: LOANS				
5. X S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$ 500.00		
6. S	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
7. S	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
8. S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
9. S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$		
10. S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$		
11. S	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$		
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS,	RETURNED	\$		

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services The Instruction Guide 6	ise I		ense ges/Contract Labor		Travel in District Travel Out of Dist OTHER (enter a c	rict ategory not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/1 Rpt: 4/4		Ramirez, Gocha Allen (The Hor	orable)				00083328	
4	Date	5	Payee name						
l	03/25/2024		Jim Hogg County Fair Associati	on					
6	Amount (\$)	7	Payee address; City;	State;	Zip Code	е			
l	\$500.00		300 W. Martinez Drive						
l									
			Hebbronville, TX 78361						
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sched	<sub>lule)</sub> (I	Description			
l	OF EXPENDITURE		Contributions/Donations Made I	Зу				de of Texas. Comp	
l	_,, _,,,,,,		Candidate/Officeholder/Political	Commit	tee	_		officeholder living	
l						Jilli Hogg C	Journ	y Fair Donat	UII
9	Complete ONE V Staller	Ļ	Condidate /Office held	6"	Gaa a - : : '			Off: 1	lal
٩	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	On	fice sough	ıt		Office he	a

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (	Guide explains how to complete this	form. 1 Filer ID (Ethics Commission 00083328		2 Total pages filed: 5			
3 CANDIDATE /	MS / MRS / MR FIRST	•	MI	OFFICE USE ONLY			
OFFICEHOLDER NAME	The Honorable Gocha	a Allen		Date Received ELECTRONICALLY FILED			
	NICKNAME LAST Ramir	rez	SUFFIX	01/07/2025			
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE	#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked			
OFFICEHOLDER MAILING ADDRESS	886 Coyote Dr.			Receipt # Amount			
Change of Address	Rio Grande City, TX 78582			Date Processed			
				Date Imaged			
5 CAMPAIGN	MS / MRS / MR FIRST		MI	•			
TREASURER NAME	Mr. Abel						
	NICKNAME LAST		SUFFIX				
	Villarre	eal Jr.					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PL	_EASE); APT /	SUITE#; CITY;	STATE; ZIP CODE			
TREASURER ADDRESS	43 Rincon Road						
(Residence or Business)	Roma, TX 78584						
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMI (956) 222-6041	BER EXTENSION					
8 REPORT TYPE	X January 15 30th	day before election R	unoff	15th day after campaign treasurer appointment (officeholder only)			
	July 15 8th d		xceeded modified eporting limit	Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2024	THROUGH	Month Day 12/31/2024	Year 1			
	0770172024	THROUGH.	12/31/202-				
10 ELECTION	ELECTION DATE  Month Day Year	Drimon	ELECTION TYPE	Other			
	Month Day Year	Primary	Runoff	Other			
		General	Special				
11 OFFICE	OFFICE HELD (if any)	:	12 OFFICE SOUGHT	(if known)			
	District Attorney (Multi-county) Di Duval, & Jim Hogg	strict 229 Starr,					
	•						
GO TO PAGE 2							

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Ramirez, Gocha Allen (The Honorable)  14 Filer ID 00083328			(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00			
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			<b>\$</b> 6,071.57		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 20,850.18		
17 AFFIDAVIT						
		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.				
		The Honor	able Gocha Allen Ram	niro-		
			of Candidate or Officehol			
AFFIX NO	TARY STAMP / SEAL ABO	· ·				
Sworn to and subs	cribed before me, by the s	aid	, this the	day		
		ertify which, witness my hand and seal of office.	,			
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath		

#### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

				3 01 5	
18 FILER NAME Ramirez, Gocha Allen (The Honorable)  19 Filer ID 00083328			(Ethics Commission Filers)		
20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE				SUBTOTAL AMOUNT	
1. X SCH	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			0.00	
2. X SCH	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			0.00	
3. X SCH	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			0.00	
4. X SCH	4. X SCHEDULE E: LOANS			0.00	
5. X SCH	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			0.00	
6. X SCH	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			0.00	
7. X SCH	7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS			0.00	
8. X SCH	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
9. X SCH	HEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00	
10. SCH	HEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$		
11. SCH	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$		
	HEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I FILER	RETURNED	\$		
			-		

PLEI	DGED CONTRIBU	TIONS			SCHEDULE B
The Instruction Guide explains how to complete this form.  2 FILER NAME Ramirez, Gocha Allen (The Honorable)				1	Total pages Schedule B: Sch: 1/1 Rpt: 4/5
				3	
<u></u>	OF UNITEMIZED PLEDO				<b>\$</b> 0
5 Date	6 Full name of pledgor	dgorout-of-state PAC (ID#:)		_) 8	Amount of pledge (\$) In-kind description (If applicable)
	7 Pledgor Address;	City; State; Zip Co	ode		
10 Principal	l occupation / Job title (See Instru	ections)	11 Franksium (Cooks	<u>  L</u>	Check if travel outside of Texas. Complete Schedu
10 Fillicipai	r occupation / Job title (See Institu	ictions)	11 Employer (See In	Structio	ons)

L	LOANS					SCHEDUL	ΕE	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5				
	2 FILER NAME Ramirez, Gocha Allen (The Honorable)				3 Filer ID (Ethics Commission Filers) 00083328			
4 T	OTAL OF UN	IITEMIZED LOANS			•	\$	0.00	
<b>5</b> D	Pate of loan	7 Name of lender	out-of-state PA	C (ID#:	)	9 Loan Amount (\$)		
fi	s lender a nancial nstitution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate		
						11 Maturity Date		
<b>12</b> P	rincipal occupation	on / Job title (See Instructions	5)	13 Employer (See Instructions)				
<b>14</b> D	Description of Coll	ateral		15 Check if personal funds w	ere deposite	d into political account (See Instructions)		
	GUARANTOR NFORMATION	17 Name of guarantor				19 Amount Guarantee	ed (\$)	
	not applicable	18 Guarantor address;	City; State;	Zip Code				
<b>20</b> P	Principal occupation	on		21 Employer (See Instruction	s)	1		