# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction C	Suide explains how	to complete this form.	1 Filer ID (Et	hics Commission Filers)	2 Total pages	filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR MRS NICKNAME	LORENZA LAST RUIZ	e	ARCIA SUFFIX	OFFIC	E USE ONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX	+34 ROCKSPR	INGS TX			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (830)	PHONE NUMBER 683.7609	EXT	ENSION	Date Hand-delivere	and or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR SAUE -	FIRST SELF LAST		M! SUFFIX	Date Imaged	Autouit 9
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		NO PO BOX PLEASE); APT IS		NGS T	STATE:	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (830)	PHONE NUMBER 683.7609		ENSION		
9 REPORT TYPE	January 15	30th day before e		Runoff  Exceeded Modified Reporting Limit	treesurer : (Officehold	after campaign appointment ler Only) ort (Attach C/OH - FR)
10 PERIOD COVERED	Month D7	Day Year   01   2023	THROUGH	Month 12	Day Ye.	
11 ELECTION	ELECTION DA Month Day	Year Primary	Runoff Special	ELECTION TYPE Other Description		
12 OFFICE	OFFICE HELD (If any)	ASSESSOR-COLLE	"	ICE SOUGHT (IF INTOWN)		LECTOR
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	E OF POLITICAL CONTRIBUTIONS EHOLDER. THESE EXPENDITURES AND OFFICEHOLDERS ARE REQUIRED OF THE NAME	MAY HAVE BEEN MA	ADE WITHOUT THE CAND	IDATE'S OR OFFICEHO	LDER'S KNOWLEDGE OR
Additional Pages	GENERAL	COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TRE				
- E		COMMITTEE CAMPAIGN TRE		8		
		GO 10	PAGE 2			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

<u> </u>		
15 C/OH NAME LORENZA "L	ORRI" GARCIARUIZ	ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	TOTAL POLITICAL CONTRIBUTIONS     (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 750.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 750.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
	wear, or affirm, under penalty of perjury, that the accompanying report is true and co	rrect and includes all information
rec	quired to be reported by me under Title 15, Election Code.	
	Characan Na a i	Duis
	<u> </u>	i kuz
	Signature of Candidate	or Officeholder
	Please complete either option below:	
(1) Affidavit	ROBIN HOHMAN My Notary ID # 131139276 Expires May 22, 2025	
NOTARY STAMP/SEAL		
Sworn to and subscribed	I wanza Kluiz	h day of January.
7/7 // 1//	which, witness my hand and seal of office.  Men Robin Hohman	Public Niflary
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaration	FILED FOR RECORD  no  AtO'clockM	
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(month)	, 20
	CALDARY CLEEK	(year)
	SAXXI YIVUO SURAWO Signature of Candidate/Office	eholder (Declarant)



VVV 8 8 0



JAN 1 6 2024

OFR

COUNTY CLERK
EDWARDS COUNTY, TRIAS

By

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages fi	iled: 2			
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR MRS	LORENZA	GARCIA	OFFICE	USEONLY			
INAME	NICKNAME "	RU17	SUFFIX	Date Received				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	PO BOX 43	APT / SUITE #: C	CITY; STATE; ZIP CODE					
Change of Address								
5 CANDIDATE/ OFFICEHOLDER PHONE	(\\ 30 )	PHONE NUMBER	EXTENSION		d or Date Postmarked			
6 CAMPAIGN TREASURER	MS/MRS/MR SAME - SE	FIRST	MI	Receipt #	Amount \$			
NAME	NICKNAME	LAST	SUFFIX	Date Processed				
		LNO!	331714	Date Imaged				
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / SU	JITE #; CITY;	STATE:	ZIP CODE			
TREASURER ADDRESS	OM H CH	JEPTENI DACI	DEBOINCE. TV. TV	0 × 2)				
(Residence or Business)	409 N 3V	veelen, rock	USPRINGS; TX; 78.	50 O				
	AREA CODE	PHONE NUMBER	EXTENSION		<del> </del>			
8 CAMPAIGN TREASURER	8							
PHONE	(830) 683-7609							
9 REPORT TYPE	January 15	30th day before el	lection Runoff	15th day af treasurer a (Officeholde				
	July 15	8th day before elec	ction Exceeded Modified Reporting Limit	Final Repor	rt (Attach C/OH - FR)			
10 PERIOD COVERED	Month	Day Year	Month	Day Year	,			
COVERED	01	/01/2024	THROUGH 01	/ 25 / 20	024			
11 ELECTION	ELECTION DA		ELECTION TYPE					
	Month Day	Month Day Year Primary Runoff Other Description						
	03/05	/2021 General	Special					
	- / 00 /	2004						
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known	•				
	COUNTY TAX	AMEBSOR-COLLEC	TOR COUNTY TAX ASSE	350R - COLL	ECTOR			
14 NOTICE FROM POLITICAL	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 OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.							
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL	COMMITTEE ADDRESS						
Additional Pages								
	SPECIFIC	COMMITTEE CAMPAIGN TREA	ASURER NAME					
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS		-			
<u> </u>	<u> </u>							
		GO TO I	PAGE 2					

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

LORENZA "LO	PRI"GARCIA RUIZ	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	<ol> <li>TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</li> </ol>	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	* 0.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* O. OO
18 SIGNATURE   I st	wear, or affirm, under penalty of perjury, that the accompanying report is true	and correct and includes all information
req	uired to be reported by me under Title 15, Election Code.	
	Sprann &	Vais Rus
	Signature of Cal	ndidate or Officeholder
	Please complete either option below	7•
	r lease complete cities option bolon	•
	SOUTH AND THE PROPERTY OF THE	
(1) Affidavit	ROBIN HOHMAN  My Notary ID # 131139276	
	Expires May 22, 2025	
NOTARY STAMP/SEAL	ii 11/1 0	r th
Sworn to and subscribed	before me by LORINZa Wrri Garcia-RHISTate	day of 1-lbruary.
20 74 , to certify	which, witness my hand and seal of office.	ľ
Signature of officer administer	thmkn KODIA (TUDM 4n  Printed name of officer administering oath	Title of officer administering oath
Olgitatoro of others deministra	OR	
(2) Unsworn Declaration	<u></u>	
	FILED FOR P	
My name in		·
My address is	,	
ر در شر دهو راید	()	tate) (zip code) (country)
Executed in	County, State of, on theday of(month	) , 20 (year) .
EYE! X!!! X!!!	Signature of Candid	late/Officeholder (Declarant)



FEB 5 2024

LR

CLGA LYDIA REYES

COUNTY CLERK
EDWARDS COUNTY, TEXAS

By:

Doponty

#### **CANDIDATE / OFFICEHOLDER** FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** LORENZA NAME Date Received SUFFIX 4 CANDIDATE / ADDRESS / PO BOX; STATE: ZIP CODE **OFFICEHOLDER** MAILING PD BOX 434 ROCKSPRINGS TX 7888D **ADDRESS** Change of Address PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE Receipt # Amount \$ 6 CAMPAIGN TREASURER Date Processed NAME Date Imaged STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; STATE: ZIP CODE 7 CAMPAIGN **TREASURER** 909 N SWEETEN; ROCKSPRINGS; TX; 78880 **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER 8 CAMPAIGN **TREASURER** PHONE (830) 683.7609 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) Exceeded Modified July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD COVERED

THROUGH

Runoff

Special

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.

TEE CAMPAIGN TREASURER ADDRESS	
GO TO PAGE 2	

**ELECTION TYPE** 

Description

RME550R-20LLEC

Other

13 OFFICE SOUGHT (if known)

COMMITTEE CAMPAIGN TREASURER NAME

01/26/2024

Primary

General

COUNTY TAX ASSESSOR-COLLECTOR COUNT

COMMITTEE NAME

COMMIT

COMMITTEE ADDRESS

ELECTION DATE

03/05/2024

OFFICE HELD (if any)

COMMITTEE TYPE

GENERAL

SPECIFIC

Month

11 ELECTION

12 OFFICE

14 NOTICE FROM

POLITICAL COMMITTEE(S)

Additional Pages

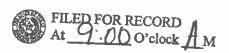
### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

LORENZA "L	URRI" BARCIA RUIZ	16 Filer ID (Ethics Commission Filers)						
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0						
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ Ø						
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 1461.66						
	4. TOTAL POLITICAL EXPENDITURES	\$ 1461.66						
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	T DAY \$ Ø						
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	*						
	wear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code.	and correct and includes all information						
Signature of Candidate or Officeholder								
	Please complete either option below	<b>:</b>						
(1) Affidavit								
NOTARY STAMP/SEA								
Sworn to and subscribed	before me by this the	day of,						
20, to certify	which, witness my hand and seal of office.							
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath						
	OR							
(2) Unsworn Declarati	on							
My name is LOVENT	A "LORNI" GARCIA RUIZ, and my date of birth is	08.10.1980						
	SWEETEN U434 ROCKSPRINGS , 7	x , 78880 , USA .						
Executed in <u>EOWAR</u>	County, State of TEXAS, on the 27th day of FEB (month)	state) (zip code) (country)  24 24 24 24 20 24 20 24 20 24 20 20 20 20 20 20 20 20 20 20 20 20 20						

## **SUBTOTALS - C/OH**

### FORM C/OH COVER SHEET PG 3

EU EDA	AME				
20 The D (Lanes Co.				sion Filers)	
1000					
SCHED	JLE SUBTOTALS	<u> </u>		SUBTOTAL	
NAME C	FSCHEDULE		-	AMOUNT	
	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$		
	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
	\$				
	\$				
	\$				
	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS				
	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	IDS	\$	1421.66 40.66	
	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH				
	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS				
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$		
	SCHEDINAME O	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  SCHEDULE B: PLEDGED CONTRIBUTIONS  SCHEDULE E: LOANS  SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A  SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS TO A  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	SCHEDULE 41: MONETARY POLITICAL CONTRIBUTIONS  SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  SCHEDULE B: PLEDGED CONTRIBUTIONS  SCHEDULE E: LOANS  SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE F4: EXPENDITURES MADE FROM PERSONAL FUNDS  SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH  SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	SCHEDULE SUBTOTALS  SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  SCHEDULE B: PLEDGED CONTRIBUTIONS  SCHEDULE E: LOANS  SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS  SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH  SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	



FEB 2 7 2024

OLGA LYDIA REYES
COUNTY CLERK
EDWARDS TO LATY, JEXAS
By. Deputy

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

### SCHEDULE G

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

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbutsement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment		Wages/Contract Labor Ot	avel Out Of District her (enter a categor	y not listed above)			
1 Total pages Schedule G:	2 FILER NAME LORENZA "LORRI" GARCIA RUIZ  3 Filer ID (Ethics Commission Filers						
4 Date 2. 21. 2024	Edwards County TAX OPF	CE					
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code			
Reimbursement from political contributions intended	POBOX 378	ROCKSPRINGS TX 78%					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description VOTER LI	ST				
EXPENDITURE	(c) Check if travel outside of Texas. Complete Schedula T.	Check if Austin, TX,	officeholder living ex	pense			
9	Candidate / Officeholder name	Office sought		Office held			
Complete ONLY if direct expenditure to benefit C/OH	LORENZA "LORRI" GARCIA RU	17 THERESESSOR CO	LLECTOR-	TAC			
Date 02.21 - 24.2024	EDWARDS COUNTY/DISTRICT C	LEPK					
Amount (\$) Z	Payee address;	City;	State;	Zip Code			
Reimbursement from political contributions intended	POBOX 184 RUCI	SPRINGS TX 78	1880				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	COPIES OF COMBINATION & EV ROSTER FOR EV					
EXPENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living e	xpense			
Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name	Office sought		Office held			
Date	Payee name						
Amount (\$)	Payee address;	City;	State;	Zip Code			
Reimbursement from political contributions intended							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description					
EXPENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED					

### **EXPENDITURES MADE BY CREDIT CARD**

SCHEDULE F4

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

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advantage Evenson

Accounting Expense Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi	By Gift/Award	rage Expense s/Memorials Expense	Office O Polling E Printing	payment/Rein verhead/Rent Expense Expense Wages/Contr	al Expense	Solicitation/Fundraisin Fransportation Equipn Fravel In District Fravel Out Of District Other (enter a categor	nent & Related Expense	
The Instruction	Guide explains how to co	mplete this form.				ACH CREDIT CAR	753	
1 TOTAL PAGES SCHEDULE F4: 2	2 FILER NAME LORENZA"LORI	2 FILER NAME LORENZA"LORRI" GARCIA RUIZ					Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD						s 1000 00	)	
5 CREDIT CARD ISSUER	Name of financial institution  CapITAL ONE - MC							
6 PAYMENT	(a) Amount Charged	(b) Date Expendito	•		Credit Card Issue	suer Paid		
	\$ 1000.00	02.13.2	2024	02.14	4.2024	•		
7 PAYEE	(a) Payee name		(b) Payee add	dress;	City	, State,	Zip Code	
	JUC MED	IA LLC	3106 F1	ALL CRE	STOR ST	Tomo Tx	78247	
8 PURPOSE OF EXPENDITURE Political	(a) Category (See Categories IIs PRINTING I		dule)	(b) Descrip SIGN Partial 1	s + Bus	ASINESS CAROS - balance \$ 421.66		
Non-Political	(c) Check if travel out	side of Texas. Complet	e Schedule T.		Check if Austin,	TX, officeholder living	expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office holder name Office Sought Office Held Office Held Office Held Office Held TAX ASSESSOR COLLECTOR TAX ASSESSOR COLLECTOR							
PAYMENT	(a) Amount Charged	(b) Date Expenditu	ire Charged	(c) Date(s)	Credit Card Issuer	Paid		
	\$							
PAYEE	(a) Payee name		(b) Payee add	dress;	City	, State,	Zíp Code	
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) (b) Description				tion			
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin,	TX, officeholder living	expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder r	name	Off	ice Sought		Office Held		
PAYMENT	(a) Amount Charged	(b) Date Expenditu	ire Charged	(c) Date(s)	Credit Card Issuer	· Paid		
PAYEE	(a) Payee name		(b) Payee add	dress;	City	, State,	Zip Code	
PURPOSE OF EXPENDITURE  Political	(a) Category [See Categories listed at the top of this schedule] (b) Description							
Non-Political	(c) Check if travel out	side of Texas. Complet	e Schedule T.		Check if Austi	in, TX, officeholder livir	ng expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder r	name	Off	ice Sought		Office Held		
	ATTACH ADDIT	IONAL COPIE	S OF THIS	SCHEDU	LE AS NEED	ED		

### EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

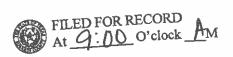
Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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

es/Contract Labor Ot

The Instruction	Guide explains how to co	mplete this form.	Gairitos	USE A NEW				) ISSUER
1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME LORENZA "LORRI" GARCIA RU				3 FILER ID (Ethics Commission Filers			Commission Filers)
4 TOTAL OF UNITEMIZED EX	PENDITURES CHARGED TO A	CREDIT CARD				\$	421,1	ele
5 CREDIT CARD ISSUER	SAMIS CLUB			ii .				
6 PAYMENT	(a) Amount Charged (b) Date Expendit		ure Charged (c) Date(s) Credit Card is		edit Card Issu	er Paid		
	\$ 421.66 02.13.		024	2.13	3.2024	+		
7 PAYEE	(a) Payee name	•	(b) Payee ad			ty,	State,	Zip Code
	JVC MEDIA	LLC	3106 FA	LL CRES	IDR AN	an Jionio	TX	78947
8 PURPOSE OF	(a) Category (See Categories lis	sted at the top of this sche	dule)	(b) Descriptio	ก ( 177 /	رسمسا راحان	·	105
Political Non-Political	PRINTING ES	PRINTING EXPENSE				rzine	35 GA	(203
	(c) Check if travel out	side of Texas. Complet	e Schedule T		Check if Austi	n, TX, officel	nolder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder	name	Off	ice Sought			Office Held	
PAYMENT	(a) Amount Charged	(b) Date Expendit	ure Charged	(c) Date(s) Cro	edit Card Issu	er Paid		
PAYEE	(a) Payee name		(b) Payee add	dress;	Ci	ty,	State,	Zip Code
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule)  (b) Description							
Non-Political	(c) Check if travel out		Check if Aust	in, TX, office	holder living	expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder	name	Off	fice Sought Office Held				
PAYMENT	(a) Amount Charged	(b) Date Expendit	ure Charged	(c) Date(s) Cre	edit Card Issu	er Paid		
PAYEE	(a) Payee name	•	(b) Payee ad	iress;	Ci	ty,	State,	Zip Code
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule)			(b) Description				
Non-Political	(c) Check if travel out	tside of Texas. Complet	te Schedule T.	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder	name	Off	ice Sought			Office Held	I
	ATTACH ADDI	TIONAL COPIE	S OF THIS	SCHEDULI	E AS NEE	DED		



FEB 2 7 2024

OLGA LYDIA REYES
COUNTY CLERK
EDWARDS COUNTY, TEXAS
By: Deputy