

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

7 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(Officeholder Only)

☒ July 15

☐ 8th day before election

☐ Exceeded Modified  
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

Month

Day

Year

01 / 01 / 26

THROUGH

6 / 30 / 26

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 3 / 2026

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other  
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

County Commissioner PCT 4

13 OFFICE SOUGHT (if known)

Same

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

Rio Forward PAC 2.0

☐ GENERAL

COMMITTEE ADDRESS

620 N. Flores Rte Tx 78582

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

Leanne Gallegos

COMMITTEE CAMPAIGN TREASURER ADDRESS

608 E. Ringgold St. Rte Tx 78582

OFFICE USE ONLY

Date Received



Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION  
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR  
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 232.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$ 1,515.74

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 0

18 SIGNATURE

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

  
Signature of Candidate or Officeholder

Please complete either option below:

## (1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_,  
20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

## (2) Unsworn Declaration

My name is Hernan Garza III, and my date of birth is 2-4-1959  
My address is: 104 H+H Drive, Rio Grande City Tx, 78582, Starr  
(street) (city) (state) (zip code) (country)

Executed in Starr County, State of Tx, on the 14<sup>th</sup> day of July, 2026.  
(month) (year)

  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

|     |                          |                                                                                    |    |           |
|-----|--------------------------|------------------------------------------------------------------------------------|----|-----------|
| 1.  | <input type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$ | 0         |
| 2.  | <input type="checkbox"/> | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$ | 16,280.56 |
| 3.  | <input type="checkbox"/> | SCHEDULE B: PLEDGED CONTRIBUTIONS                                                  | \$ | 0         |
| 4.  | <input type="checkbox"/> | SCHEDULE E: LOANS                                                                  | \$ | 0         |
| 5.  | <input type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS              | \$ | 0         |
| 6.  | <input type="checkbox"/> | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                           | \$ | 0         |
| 7.  | <input type="checkbox"/> | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS             | \$ | 0         |
| 8.  | <input type="checkbox"/> | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$ | 0         |
| 9.  | <input type="checkbox"/> | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                        | \$ | 0         |
| 10. | <input type="checkbox"/> | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        | \$ | 0         |
| 11. | <input type="checkbox"/> | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$ | 0         |
| 12. | <input type="checkbox"/> | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | 0         |

## SCHEDULE A2

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

|                                                                                    |                                                                                                                 |                                                                                 |                                                          |
|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                          |                                                                                                                 | 1 Total pages Schedule A2:                                                      |                                                          |
| 2 FILER NAME<br><b>Hernan NUNE Garza</b>                                           |                                                                                                                 | 3 Filer ID (Ethics Commission Filers)                                           |                                                          |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                              |                                                                                                                 | \$                                                                              |                                                          |
| 5 Date<br><b>2-27-26</b>                                                           | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Rio Forward PAC 2.0</b> | 8 Amount of Contribution \$<br><b>737.72</b>                                    | 9 In-kind contribution description<br><b>Advertising</b> |
| 7 Contributor address; City; State; Zip Code<br><b>620 N. Flores Blvd TX 78582</b> |                                                                                                                 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                          |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)          |                                                                                                                 | 11 Employer (FOR NON-JUDICIAL) (See Instructions)                               |                                                          |
| 12 Contributor's principal occupation (FOR JUDICIAL)                               |                                                                                                                 | 13 Contributor's job title (FOR JUDICIAL) (See Instructions)                    |                                                          |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                  |                                                                                                                 | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                          |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)        |                                                                                                                 |                                                                                 |                                                          |

|                                                                          |                                                                                 |                                                                                 |                                  |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of Contribution \$                                                       | In-kind contribution description |
|                                                                          | Contributor address; City; State; Zip Code                                      |                                                                                 |                                  |
|                                                                          |                                                                                 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)   |                                                                                 | Employer (FOR NON-JUDICIAL) (See Instructions)                                  |                                  |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                 | Contributor's job title (FOR JUDICIAL) (See Instructions)                       |                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                 | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                 |                                                                                 |                                  |

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

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Hernan NUÑEZ Garza

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

2-27-20

6 Full name of contributor ☐ out-of-state PAC (ID#:

Rio Forward PAC Q.O.

8 Amount of Contribution \$

75.00

9 In-kind contribution description

Contract Labor

7 Contributor address; City; State; Zip Code

620 N. Flores Rte Tx 78592

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

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

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME Hernan NUNE Garza

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

6 Full name of contributor ☐ out-of-state PAC (ID#:

8 Amount of Contribution \$

9 In-kind contribution description

2-27-26 RioForwardpac 2-0

7 Contributor address; City; State; Zip Code

1,250.00

Consulting expense

680 N. Flores Blvd Tx 78582

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)

11 Employer (FOR NON-JUDICIAL)(See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL)(See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

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

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL)(See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                                   |                                                                                                         |  |                                                             |                                                                                 |                                                                 |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                         |                                                                                                         |  |                                                             | 1 Total pages Schedule A2:                                                      |                                                                 |
| 2 FILER NAME <u>Hernan NUNE Garza</u>                                             |                                                                                                         |  |                                                             | 3 Filer ID (Ethics Commission Filers)                                           |                                                                 |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                             |                                                                                                         |  |                                                             | \$                                                                              |                                                                 |
| 5 Date<br><u>2-27-26</u>                                                          | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><u>Rio Forward PAC 20</u> |  |                                                             | 8 Amount of Contribution \$<br><u>150.00</u>                                    | 9 In-kind contribution description<br><u>Contract Upholster</u> |
| 7 Contributor address; City; State; Zip Code<br><u>620 N. Flores RMC TX 78582</u> |                                                                                                         |  |                                                             | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                 |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)          |                                                                                                         |  | 11 Employer (FOR NON-JUDICIAL)(See Instructions)            |                                                                                 |                                                                 |
| 12 Contributor's principal occupation (FOR JUDICIAL)                              |                                                                                                         |  | 13 Contributor's job title (FOR JUDICIAL)(See Instructions) |                                                                                 |                                                                 |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                 |                                                                                                         |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) |                                                                                 |                                                                 |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)       |                                                                                                         |  |                                                             |                                                                                 |                                                                 |

|                                                                          |                                                                          |                                                                                 |                                  |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: | Amount of Contribution \$                                                       | In-kind contribution description |
|                                                                          | Contributor address; City; State; Zip Code                               |                                                                                 |                                  |
|                                                                          |                                                                          | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                          | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                  |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                          | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                          | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                          |                                                                                 |                                  |

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                             |                                                                                                                        |                                                                                 |                                                                                 |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                   |                                                                                                                        | 1 Total pages Schedule A2:                                                      |                                                                                 |
| 2 FILER NAME<br>Hernan NUNEZ Garza                                          |                                                                                                                        | 3 Filer ID (Ethics Commission Filers)                                           |                                                                                 |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |                                                                                                                        | \$                                                                              |                                                                                 |
| 5 Date<br>2-27-20                                                           | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>RioForward PAC 2.0                       | 8 Amount of Contribution \$<br>1092.84                                          | 9 In-kind contribution description<br>GAS/Food                                  |
| 7 Contributor address; City; State; Zip Code<br>620 N. Flores Blvd TX 78582 |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                 |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                                                                        | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                                                 |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                                                        | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                                                 |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                                                        | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                                                 |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                                                        |                                                                                 |                                                                                 |
| Date                                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                                       | In-kind contribution description                                                |
|                                                                             |                                                                                                                        |                                                                                 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)      |                                                                                                                        | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                                                                 |
| Contributor's principal occupation (FOR JUDICIAL)                           |                                                                                                                        | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                                                                 |
| Contributor's employer/law firm (FOR JUDICIAL)                              |                                                                                                                        | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                                                 |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |                                                                                                                        |                                                                                 |                                                                                 |

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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|                                                                                   |                                                                                                          |  |  |                                                                                 |                                                             |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                         |                                                                                                          |  |  | 1 Total pages Schedule A2:                                                      |                                                             |
| 2 FILER NAME <b>Hernan NUNE Garza</b>                                             |                                                                                                          |  |  | 3 Filer ID (Ethics Commission Filers)                                           |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                             |                                                                                                          |  |  | \$                                                                              |                                                             |
| 5 Date<br><b>2-27-26</b>                                                          | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Rio Forward PAC 2.0</b> |  |  | 8 Amount of Contribution \$<br><b>1,250.00</b>                                  | 9 In-kind contribution description<br><b>Contract Labor</b> |
| 7 Contributor address; City; State; Zip Code<br><b>620 N. Flores R6C Tx 78580</b> |                                                                                                          |  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)          |                                                                                                          |  |  | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                              |                                                                                                          |  |  | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                 |                                                                                                          |  |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)       |                                                                                                          |  |  |                                                                                 |                                                             |

|                                                                          |                                                                          |                                                                                 |                                  |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: | Amount of Contribution \$                                                       | In-kind contribution description |
|                                                                          | Contributor address; City; State; Zip Code                               |                                                                                 |                                  |
|                                                                          |                                                                          | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                          | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                  |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                          | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                          | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                          |                                                                                 |                                  |

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                                   |                                                                                                                        |                                                                                 |                                                             |
|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                         |                                                                                                                        | 1 Total pages Schedule A2:                                                      |                                                             |
| 2 FILER NAME <u>Hernan NUNE Garza</u>                                             |                                                                                                                        | 3 Filer ID (Ethics Commission Filers)                                           |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                             |                                                                                                                        | \$                                                                              |                                                             |
| 5 Date<br><u>2-27-20</u>                                                          | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><u>Rio Forward PAC 2.0</u>               | 8 Amount of Contribution \$<br><u>150.00</u>                                    | 9 In-kind contribution description<br><u>Contract Labor</u> |
| 7 Contributor address; City; State; Zip Code<br><u>620 N. Flores RGL Tx 78588</u> |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)          |                                                                                                                        | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                              |                                                                                                                        | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                 |                                                                                                                        | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)       |                                                                                                                        |                                                                                 |                                                             |
| Date                                                                              | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                                       | In-kind contribution description                            |
|                                                                                   |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)             |                                                                                                                        | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                                             |
| Contributor's principal occupation (FOR JUDICIAL)                                 |                                                                                                                        | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                                             |
| Contributor's employer/law firm (FOR JUDICIAL)                                    |                                                                                                                        | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                             |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)          |                                                                                                                        |                                                                                 |                                                             |

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Hernan WUNE Garza

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

2-27-26

6 Full name of contributor ☐ out-of-state PAC (ID#:

ProForward PAC 2-0

8 Amount of Contribution \$

1000.00

9 In-kind contribution description

Contract Labor

7 Contributor address; City; State; Zip Code

620 W. Flores Rte Tx 78582

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

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

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

|                                                                                    |                                                                                                                        |                                                                                 |                                                             |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                          |                                                                                                                        | 1 Total pages Schedule A2:                                                      |                                                             |
| 2 FILER NAME <u>Hernan NUNE Garca</u>                                              |                                                                                                                        | 3 Filer ID (Ethics Commission Filers)                                           |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                              |                                                                                                                        | \$                                                                              |                                                             |
| 5 Date<br><u>2-27-26</u>                                                           | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><u>Rio Forward PAC 2.0</u>               | 8 Amount of Contribution \$<br><u>800.00</u>                                    | 9 In-kind contribution description<br><u>Contract Labor</u> |
| 7 Contributor address; City; State; Zip Code<br><u>620 N. Flores Bldg TX 78582</u> |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)           |                                                                                                                        | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                               |                                                                                                                        | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                  |                                                                                                                        | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)        |                                                                                                                        |                                                                                 |                                                             |
| Date                                                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                                       | In-kind contribution description                            |
|                                                                                    |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)              |                                                                                                                        | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                                             |
| Contributor's principal occupation (FOR JUDICIAL)                                  |                                                                                                                        | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                                             |
| Contributor's employer/law firm (FOR JUDICIAL)                                     |                                                                                                                        | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                             |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)           |                                                                                                                        |                                                                                 |                                                             |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                                   |                                                                            |  |                                                                                 |                                                             |                                                             |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                         |                                                                            |  |                                                                                 | 1 Total pages Schedule A2:                                  |                                                             |
| 2 FILER NAME <b>Hernan NUNE Garcia</b>                                            |                                                                            |  |                                                                                 | 3 Filer ID (Ethics Commission Filers)                       |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                             |                                                                            |  |                                                                                 | \$                                                          |                                                             |
| 5 Date<br><b>2-27-24</b>                                                          | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: |  |                                                                                 | 8 Amount of Contribution \$<br><b>150.00</b>                | 9 In-kind contribution description<br><b>Contract Labor</b> |
|                                                                                   | <b>Rip Forward PAC 2.0</b>                                                 |  |                                                                                 |                                                             |                                                             |
| 7 Contributor address; City; State; Zip Code<br><b>680 N. Flores RHC TX 78582</b> |                                                                            |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)          |                                                                            |  |                                                                                 | 11 Employer (FOR NON-JUDICIAL)(See Instructions)            |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                              |                                                                            |  |                                                                                 | 13 Contributor's job title (FOR JUDICIAL)(See Instructions) |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                 |                                                                            |  |                                                                                 | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)       |                                                                            |  |                                                                                 |                                                             |                                                             |

|                                                                          |                                                                          |  |                                                                                 |                                                          |                                  |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: |  |                                                                                 | Amount of Contribution \$                                | In-kind contribution description |
|                                                                          |                                                                          |  |                                                                                 |                                                          |                                  |
| Contributor address; City; State; Zip Code                               |                                                                          |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                          |                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                          |  |                                                                                 | Employer (FOR NON-JUDICIAL)(See Instructions)            |                                  |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                          |  |                                                                                 | Contributor's job title (FOR JUDICIAL)(See Instructions) |                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                          |  |                                                                                 | Law firm of contributor's spouse (if any) (FOR JUDICIAL) |                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                          |  |                                                                                 |                                                          |                                  |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                                   |                                                                                                                 |  |                                                                                 |                                       |                                                             |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                         |                                                                                                                 |  |                                                                                 | 1 Total pages Schedule A2:            |                                                             |
| 2 FILER NAME <u>Hernan NUNE Garcia</u>                                            |                                                                                                                 |  |                                                                                 | 3 Filer ID (Ethics Commission Filers) |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                             |                                                                                                                 |  |                                                                                 | \$                                    |                                                             |
| 5 Date<br><u>2-27-20</u>                                                          | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><u>Rio Forward PAC 2-0</u> |  | 8 Amount of Contribution \$<br><u>150.00</u>                                    |                                       | 9 In-kind contribution description<br><u>Contract Labor</u> |
| 7 Contributor address; City; State; Zip Code<br><u>620 N. Flores Rte TX 78582</u> |                                                                                                                 |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                       |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)          |                                                                                                                 |  | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                       |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                              |                                                                                                                 |  | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                       |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                 |                                                                                                                 |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                       |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)       |                                                                                                                 |  |                                                                                 |                                       |                                                             |

|                                                                          |                                                                                 |                                                                                 |                                  |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of Contribution \$                                                       | In-kind contribution description |
|                                                                          | Contributor address; City; State; Zip Code                                      |                                                                                 |                                  |
|                                                                          |                                                                                 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                                 | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                  |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                 | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                 | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                 |                                                                                 |                                  |

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                             |                                                                                   |  |  |                                                                                 |                                                             |
|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                   |                                                                                   |  |  | 1 Total pages Schedule A2:                                                      |                                                             |
| 2 FILER NAME <b>Hernan NUNE Garcia</b>                                      |                                                                                   |  |  | 3 Filer ID (Ethics Commission Filers)                                           |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |                                                                                   |  |  | \$                                                                              |                                                             |
| 5 Date<br><b>2-7-26</b>                                                     | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:        |  |  | 8 Amount of Contribution \$<br><b>250.00</b>                                    | 9 In-kind contribution description<br><b>Contract Labor</b> |
|                                                                             | <b>BioForward PAC 2.0</b>                                                         |  |  |                                                                                 |                                                             |
|                                                                             | 7 Contributor address; City; State; Zip Code<br><b>620 N. Flores Rbl Tx 78582</b> |  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                                   |  |  | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                   |  |  | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                   |  |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                   |  |  |                                                                                 |                                                             |

|                                                                          |                                                                          |  |  |                                                                                 |                                  |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------|----------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: |  |  | Amount of Contribution \$                                                       | In-kind contribution description |
|                                                                          |                                                                          |  |  |                                                                                 |                                  |
|                                                                          | Contributor address; City; State; Zip Code                               |  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                          |  |  | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                  |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                          |  |  | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                          |  |  | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                          |  |  |                                                                                 |                                  |

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

## SCHEDULE A2

**The Instruction Guide explains how to complete this form.**

2 FILER NAME

**3 Filer ID (Ethics Commission Filers)**

9

**5 Date**

6 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

9 In-kind contribution  
description

750.  $\frac{a}{b}$

Contract Labor

7 Contributor address; City; State; Zip Code

620 N. Flores RHC TX 78582

☐ Check if travel outside of Texas. Complete Schedule T.

11 Employer (FOR NON-JUDICIAL)(See Instructions)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

**15** Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Date \_\_\_\_\_

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

In-kind contribution description

| Contributor address; | City; | State; | Zip Code |
|----------------------|-------|--------|----------|
|----------------------|-------|--------|----------|

☐ Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                             |                                                                                                                        |                                                                                 |                                                      |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                   |                                                                                                                        | 1 Total pages Schedule A2:                                                      |                                                      |
| 2 FILER NAME<br>Hernan WUNE Garza                                           |                                                                                                                        | 3 Filer ID (Ethics Commission Filers)                                           |                                                      |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |                                                                                                                        | \$                                                                              |                                                      |
| 5 Date<br>2-27-20                                                           | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>RioForward PAC 2.0                       | 8 Amount of Contribution \$<br>175.00                                           | 9 In-kind contribution description<br>Contract Labor |
| 7 Contributor address; City; State; Zip Code<br>620 N. Flores Bldg Tx 78582 |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                      |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                                                                        | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                      |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                                                        | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                      |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                                                        | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                      |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                                                        |                                                                                 |                                                      |
| Date                                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                                       | In-kind contribution description                     |
|                                                                             |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                      |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)       |                                                                                                                        | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                                      |
| Contributor's principal occupation (FOR JUDICIAL)                           |                                                                                                                        | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                                      |
| Contributor's employer/law firm (FOR JUDICIAL)                              |                                                                                                                        | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                      |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |                                                                                                                        |                                                                                 |                                                      |

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

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$

6 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

8 Amount of Contribution \$

| description     | quantity | unit | unit price | total price |
|-----------------|----------|------|------------|-------------|
| Contract Labor. |          |      |            |             |

**7** Contributor address;                      City;                      State;      Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

11 Employer (FOR NON-JUDICIAL)(See Instructions)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Date \_\_\_\_\_

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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|                                                                                     |                                                                            |  |                                                                                 |                                                             |                                                             |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                           |                                                                            |  |                                                                                 | 1 Total pages Schedule A2:                                  |                                                             |
| 2 FILER NAME <b>Hernan NUÑE Garza</b>                                               |                                                                            |  |                                                                                 | 3 Filer ID (Ethics Commission Filers)                       |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                               |                                                                            |  |                                                                                 | \$                                                          |                                                             |
| 5 Date<br><b>2-27-24</b>                                                            | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: |  |                                                                                 | 8 Amount of Contribution \$<br><b>500.00</b>                | 9 In-kind contribution description<br><b>Contract Labor</b> |
|                                                                                     | <b>Rio Forward PAC 2.0</b>                                                 |  |                                                                                 |                                                             |                                                             |
| 7 Contributor address; City; State; Zip Code<br><b>6020 N. Flores Bldg TX 78582</b> |                                                                            |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)            |                                                                            |  |                                                                                 | 11 Employer (FOR NON-JUDICIAL)(See Instructions)            |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                                |                                                                            |  |                                                                                 | 13 Contributor's job title (FOR JUDICIAL)(See Instructions) |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                   |                                                                            |  |                                                                                 | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)         |                                                                            |  |                                                                                 |                                                             |                                                             |

|                                                                          |                                                                          |  |                                                                                 |                                                          |                                  |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: |  |                                                                                 | Amount of Contribution \$                                | In-kind contribution description |
|                                                                          |                                                                          |  |                                                                                 |                                                          |                                  |
| Contributor address; City; State; Zip Code                               |                                                                          |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                          |                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                          |  |                                                                                 | Employer (FOR NON-JUDICIAL)(See Instructions)            |                                  |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                          |  |                                                                                 | Contributor's job title (FOR JUDICIAL)(See Instructions) |                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                          |  |                                                                                 | Law firm of contributor's spouse (if any) (FOR JUDICIAL) |                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                          |  |                                                                                 |                                                          |                                  |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

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|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                         |                                                                                                          | 1 Total pages Schedule A2:                                                      |                                                             |
| 2 FILER NAME <u>Herman NUNE Garza</u>                                             |                                                                                                          | 3 Filer ID (Ethics Commission Filers)                                           |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                             |                                                                                                          | \$                                                                              |                                                             |
| 5 Date<br><u>2-27-24</u>                                                          | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><u>Bio Forward PAC 2.0</u> | 8 Amount of Contribution \$<br><u>400.00</u>                                    | 9 In-kind contribution description<br><u>Contract Labor</u> |
| 7 Contributor address; City; State; Zip Code<br><u>620 N. Flores RHC TX 78580</u> |                                                                                                          | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)          |                                                                                                          | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                              |                                                                                                          | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                 |                                                                                                          | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)       |                                                                                                          |                                                                                 |                                                             |

|                                                                          |                                                                                                                                 |                                                          |                                                                                 |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>.....<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                | In-kind contribution description                                                |
|                                                                          |                                                                                                                                 |                                                          | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)   |                                                                                                                                 | Employer (FOR NON-JUDICIAL)(See Instructions)            |                                                                                 |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                                                                 | Contributor's job title (FOR JUDICIAL)(See Instructions) |                                                                                 |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                                                                 | Law firm of contributor's spouse (if any) (FOR JUDICIAL) |                                                                                 |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                                                                 |                                                          |                                                                                 |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                        |                                                                                                          | 1 Total pages Schedule A2:                                                      |                                                         |
| 2 FILER NAME<br><b>Hernan NUVE Garcia</b>                                        |                                                                                                          | 3 Filer ID (Ethics Commission Filers)                                           |                                                         |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                            |                                                                                                          | \$                                                                              |                                                         |
| 5 Date<br><b>2/27/26</b>                                                         | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Rio Forward PAC 2.0</b> | 8 Amount of Contribution \$<br><b>250.00</b>                                    | 9 In-kind contribution description<br><b>Contractor</b> |
| 7 Contributor address; City; State; Zip Code<br><b>620 N Flores Rte Tx 78582</b> |                                                                                                          | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                         |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)         |                                                                                                          | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                         |
| 12 Contributor's principal occupation (FOR JUDICIAL)                             |                                                                                                          | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                         |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                |                                                                                                          | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                         |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)      |                                                                                                          |                                                                                 |                                                         |

|                                                                          |                                                                                                                                 |                                                          |                                  |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------|
| Date                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>.....<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                | In-kind contribution description |
|                                                                          |                                                                                                                                 |                                                          |                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)    |                                                                                                                                 | Employer (FOR NON-JUDICIAL)(See Instructions)            |                                  |
| Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                                                                 | Contributor's job title (FOR JUDICIAL)(See Instructions) |                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                                                                 | Law firm of contributor's spouse (if any) (FOR JUDICIAL) |                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                                                                 |                                                          |                                  |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                                   |                                                                                                                        |                                                                                 |                                                             |
|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                         |                                                                                                                        | 1 Total pages Schedule A2:                                                      |                                                             |
| 2 FILER NAME <u>Hernan NUNE Garza</u>                                             |                                                                                                                        | 3 Filer ID (Ethics Commission Filers)                                           |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                             |                                                                                                                        | \$                                                                              |                                                             |
| 5 Date<br><u>2/27/26</u>                                                          | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><u>BioForward PAC 2.0</u>                | 8 Amount of Contribution \$<br><u>150.00</u>                                    | 9 In-kind contribution description<br><u>Contract Labor</u> |
| 7 Contributor address; City; State; Zip Code<br><u>620 N. Flores Rte TX 78588</u> |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)          |                                                                                                                        | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                              |                                                                                                                        | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                 |                                                                                                                        | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)       |                                                                                                                        |                                                                                 |                                                             |
| Date                                                                              | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                                       | In-kind contribution description                            |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)             |                                                                                                                        | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                                             |
| Contributor's principal occupation (FOR JUDICIAL)                                 |                                                                                                                        | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                                             |
| Contributor's employer/law firm (FOR JUDICIAL)                                    |                                                                                                                        | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                             |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)          |                                                                                                                        |                                                                                 |                                                             |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                                    |                                                                                                                        |                                                                                 |                                                             |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                          |                                                                                                                        | 1 Total pages Schedule A2:                                                      |                                                             |
| 2 FILER NAME <u>Hernan NUNE Garza</u>                                              |                                                                                                                        | 3 Filer ID (Ethics Commission Filers)                                           |                                                             |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                              |                                                                                                                        | \$                                                                              |                                                             |
| 5 Date<br><u>2/27/20</u>                                                           | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><u>Rio Forward PAC 2.0</u>               | 8 Amount of Contribution \$<br><u>150.00</u>                                    | 9 In-kind contribution description<br><u>Contract Labor</u> |
| 7 Contributor address; City; State; Zip Code<br><u>620 N. Flores Bldg TX 78589</u> |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)           |                                                                                                                        | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                             |
| 12 Contributor's principal occupation (FOR JUDICIAL)                               |                                                                                                                        | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                             |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                  |                                                                                                                        | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                             |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)        |                                                                                                                        |                                                                                 |                                                             |
| Date                                                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                                       | In-kind contribution description                            |
|                                                                                    |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                             |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)              |                                                                                                                        | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                                             |
| Contributor's principal occupation (FOR JUDICIAL)                                  |                                                                                                                        | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                                             |
| Contributor's employer/law firm (FOR JUDICIAL)                                     |                                                                                                                        | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                             |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)           |                                                                                                                        |                                                                                 |                                                             |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

|                                                                                    |                                                                                                                        |                                                                                 |                                                                                 |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                          |                                                                                                                        | 1 Total pages Schedule A2:                                                      |                                                                                 |
| 2 FILER NAME <b>Hernan NUNE GARZA</b>                                              |                                                                                                                        | 3 Filer ID (Ethics Commission Filers)                                           |                                                                                 |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                              |                                                                                                                        | \$                                                                              |                                                                                 |
| 5 Date<br><b>2/27/26</b>                                                           | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Rio Forward PAC 2-0</b>               | 8 Amount of Contribution \$<br><b>5,000.00</b>                                  | 9 In-kind contribution description<br><b>Consulting expense</b>                 |
| 7 Contributor address; City; State; Zip Code<br><b>1020 N. Flores Rte TX 78582</b> |                                                                                                                        | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                 |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)           |                                                                                                                        | 11 Employer (FOR NON-JUDICIAL)(See Instructions)                                |                                                                                 |
| 12 Contributor's principal occupation (FOR JUDICIAL)                               |                                                                                                                        | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)                     |                                                                                 |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                  |                                                                                                                        | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                                                 |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)        |                                                                                                                        |                                                                                 |                                                                                 |
| Date                                                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Contributor address; City; State; Zip Code | Amount of Contribution \$                                                       | In-kind contribution description                                                |
|                                                                                    |                                                                                                                        |                                                                                 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)              |                                                                                                                        | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                                                                 |
| Contributor's principal occupation (FOR JUDICIAL)                                  |                                                                                                                        | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                                                                 |
| Contributor's employer/law firm (FOR JUDICIAL)                                     |                                                                                                                        | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                                                 |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)           |                                                                                                                        |                                                                                 |                                                                                 |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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



## SCHEDULE A2

**The Instruction Guide explains how to complete this form.**

2 FILER NAME

**3 Filer ID (Ethics Commission Filers)**

\$

**5 Date**

6 Full name of contributor ☐ out-of-state PAC (ID#:

8 Amount of Contribution \$

9 In-kind contribution  
description

Rio Forward PAC 2.0

400.00

Contract  
Labor

7 Contributor address; City; State; Zip Code

620 N. Flores Rio Grande, TX 78582

☐ Check if travel outside of Texas. Complete Schedule T.

11 Employer (FOR NON-JUDICIAL)(See Instructions)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

**15** Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Date \_\_\_\_\_

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr. Hernan R.

NUNE Garza

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

104 H+H Drive  
Rio Grande City Tx 78582

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(956) 422-4188

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr. Gilbert

Falcon

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

509 N. San Antonio st.  
Rio Grande City Tx 78582

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(956) 320-6768

9 REPORT TYPE

☒

January 15

☐

30th day before election

☐

Runoff

☐

15th day after campaign  
treasurer appointment  
(Officeholder Only)

☐

July 15

☐

8th day before election

☐

Exceeded Modified  
Reporting Limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

Month

Day

Year

7 / 1 / 2025 THROUGH 12 / 31 / 2025

11 ELECTION

ELECTION DATE

Month

Day

Year

/ /

ELECTION TYPE

☐

Primary

☐

Runoff

☐

Other  
Description

☐

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐

GENERAL

COMMITTEE ADDRESS

☐

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION  
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR  
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 1,500.00

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 750.00

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$ 1283.74

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 0

18 SIGNATURE

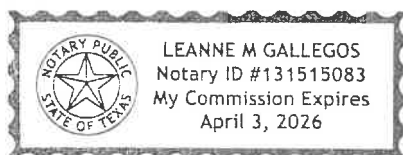
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*[Handwritten Signature]*

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Hernan B. Garza (WIFE) this the 15<sup>th</sup> day of January  
20 26, to certify which, witness my hand and seal of office.

Leanne M. Gallegos  
Signature of officer administering oath

Leanne M. Gallegos  
Printed name of officer administering oath

Notary  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

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