		ICEHOLDER CE REPORT		FORM C/OH COVER SHEET PG 1
The C/OH Instruction	n Guide explains ho	w to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR. NICKNAME	FIRST ASON LAST LAST	MI	OFFICE USE ONLY Date Receive CTIONS AD 19
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BO		city: state: zip code Lio Ganciada Lily, TR 78587	Date Receipte CTIONS ADMINISTRATION OF THE PROPERTY OF THE PRO
Change of Address 5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	735 - 1580	EXTENSION	Date Hand gelisees of Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MKS- NICKNAME	FIRST Zalia LAST	MI SUFFIX	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	109 Ala	(NO PO BOX PLEASE): APT/SU Blanca Sl.	Hir Grande Lity	STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER 500 - 3132	EXTENSION	
9 REPORT TYPE	January 15	30th day before ele	tion Exceeded Modified	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year 2024	Reporting Limit Month THROUGH	Day Year 30 2024
11 ELECTION	ELECTION DAY	Year Primary General	Runoff Other Description	
2 OFFICE	OFFICE HELD (if any		13 OFFICE SOUGHT (if known)	Constable pc1. 3
4 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	COULDER. IHESE EXPENIMINALES N	CCEPTED OR POLITICAL EXPENDITURES MAL MAY HAVE BEEN MADE WITHOUT THE CANDID D TO REPORT THIS INFORMATION ONLY IF THE	E BY POLITICAL COMMITTEES TO SUPPORT
	COMMITTEE TYPE	COMMITTEE NAME		
Additional Pages	GENERAL	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREAS	NIDED NAME	
	SPECIFIC	COMMITTEE CAMPAIGN TREA		
	##	GO TO P	AGE 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	TOTAL UNITEMIZED POLITICAL C PLEDGES, LOANS, OR GUARANTI CONTRIBUTIONS MADE ELECTRO	EES OF LOANS, OR	\$	
	TOTAL POLITICAL CONTRIBUT (OTHER THAN PLEDGES, LOANS.		\$	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EX	(PENDITURE.	\$	
	4. TOTAL POLITICAL EXPENDITU	RES	\$ 4,000	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTION OF REPORTING PERIOD	S MAINTAINED AS OF THE LAST	/	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALI LAST DAY OF THE REPORTING PE	L OUTSTANDING LOANS AS OF TERIOD	THE \$	
18 SIGNATURE I sw requ	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 Cand	lidate or Officeholder	
	Please complete	either option below:		
		oution option bolom.		
(1) Affidavit				
NOTARY STAMP/SEAL				
Sworn to and subscribed be	efore me by	this the	day of,	
20, to certify wi	hich, witness my hand and seal of office.		,	
Signature of officer administerin	g oath Printed name of officer ad	ministering oath	Title of officer administering oath	
	OR			
(2) Unsworn Declaration	1			
My name is		, and my date of birth is		
My address is		,		
	(street)		e) (zip code) (country)	
Executed in	County, State of, or	the day of		
		(month)	(year)	
		Signature of Candidate	/Officeholder (Declarant)	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR FIRST MI 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** Mr. Jason NAME Date Received 2-26-2024 LAST SUFFIX NICKNAME A THE ELECTIONS TO THE FIRE THE FLECTIONS TO THE FIRE THE FLECTIONS TO THE FIRE THE FLECTION OF THE Venecia APT / SUITE #; 4 CANDIDATE / ADDRESS / PO BOX; CITY: STATE; ZIP CODE OFFICEHOLDER 109 Ala Blanca st. Rio Grande City, Tx. 78582 MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ OFFICEHOLDER (956)735-1850 PHONE FIRST MS / MRS / MR MΙ Action to the Contraction of the 6 CAMPAIGN TREASURER Zulia Mrs. Date Processed NAME SUFFIX NICKNAME LAST Date Imaged Saenz STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE 7 CAMPAIGN **TREASURER** Rio Grande City, TX. 78582 109 Ala Blanca st. **ADDRESS** (Residence or Business) **EXTENSION** 8 CAMPAIGN AREA CODE PHONE NUMBER **TREASURER PHONE** 500-3132 (956) 9 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Month COVERED 26 2024 THROUGH 2024 ELECTION TYPE ELECTION DATE 11 ELECTION Runoff Other Day Description General Special 13 OFFICE SOUGHT (if known) OFFICE HELD (if any) 12 OFFICE 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. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Jason Venecia		16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00		
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,000.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	\$ 0.00		
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* 0.00		
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 ZULIAI. SAENZ Sworm to and subscribed before me by this the 200 day of Flbruary this the 200 day of Flbruary to certify which, witness my hand and seal of office.				
Signature of officer administer	ring oath Printed name of officer administering oath	Title of officer administering oath		
organizate of byoth Bullimoto	OR			
(2) Unsworn Declarati	on			
My name is	, and my date of birth is			
		state) (zip code) (country)		
Executed in	County, State of , on the day of (month	, 20		
	Signature of Candid	date/Officeholder (Declarant)		

APPOINTMENT OF A CAMPAIGN TREASURER FORM CTA BY A CANDIDATE

PG 1

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	See	1 Total pages filed:		
2	CANDIDATE	MS / MRS / MR FIRST MI	OFFICE USE ONLY	
	NAME		Filer ID	
		Jason	C	
		NICKNAME LAST SUFFIX	Date Received	
		Venecia	Date Hand-de Research or Postmark en	
3	CANDIDATE	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	MAILING ADDRESS	129 Ala Blanca St.		
	ADDICESS	Rio Grande City, TX, 78582	A THE GOOD OF THE STATE OF THE	
		15.0 4.5.0	Date Hand-de Regard or Postmarket	
4	CANDIDATE	AREA CODE PHONE NUMBER EXTENSION	Receipt# Amount\$	
	PHONE	(956) 735-1580		
		(450) 733 730	Date Processed	
5	OFFICE		Date Imaged	
	HELD (if any)	La Grella Police Department		
6	OFFICE		Λ	
	SOUGHT (if known)	Starr County Constable's Of	Fice Pct.#3	
7	CAMPAIGN	MS/MRS/MR FIRST MI NICKNAME	LAST SUFFIX	
	TREASURER NAME			
		Zalia Zains.		
8	CAMPAICN	STREET ADDRESS; APT / SUITE #; CITY;	STATE; ZIP CODE	
0	CAMPAIGN TREASURER	10 - 10 - 10		
	STREET ADDRESS	109 Ala Blanca St. Rio Grande City, TX, 78582		
(residence or business)	Rio Grande City, 14, 7838C		
Ì		,		
9	CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION		
	TREASURER PHONE	(956) 600-3132		
		(434) \$ 00 313		
10	CANDIDATE			
	SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the	Texas Government Code.	
	I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.			
		the Election Code.		
	I am aware of the restrictions in title 15 of the Election Code on contributions			
		from corporations and labor organizations.	ar a	
			12/11/	
			12/05/2023	
		Signature of Candidate	Date Signed	
GO TO PAGE 2				