CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Buide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	M\$/MR\$/MR Mr. NICKNAME	FIRST Alex LAST Ochoa	Dean Suffix	FER 75 and		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY; STATE, ZIP COLE 602 Kate St Refugio TX 78377 FEB 2 6 2024 ELECTIONS ADMINISTRATOR REFUGIO COUNTY, TEXAS					
5 CANDIDATE/ OFFICEHOLDER PHONE	(361) 54	PHONE NUMBER 13 - 0926	EXTENSION	Date Hand-delivered or Date Postmarked Receipt # Amount \$		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Jennifer LAST Ford	MI A SUFFIX	Date Processed Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASÉ); APT / SU	Refugio	STATE, ZIP CODE TX 78377		
8 CAMPAIGN TREASURER PHONE	AREA CODE (361) 67	рноме NUMBER 6 - 1107	EXTENSION			
9 REPORT TYPE	January 15 July 15	30th day before elec	Constant Medified	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month 01	Day Year / 26 / 2024	THROUGH 02	Day Year 24 / 2024		
11 ELECTION	ELECTION DATE Month Day Year Primary Runoff Other Description 03 05 2024 General Special					
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (If know Refugio County S			
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'S KNOWLEDGE OR CONSENT. CANDIDATE'S ON OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE COMMITTEE NAME					
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TRE	ASUKEK ADUKESS			
		GO TO I	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Alex Dean Ochoa	16	Filer ID (Ethics Commission Filers)			
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00			
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,700.00			
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00			
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,000.58			
CONTRIBUTION BALANCE	j. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAT				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	s 0.00			
	Signature of Candid	date or Officeholder			
(1) Affidavit		date or Officeholder			
(1) Affidavit		date or Officeholder			
(1) Affidavit NOTARY STAMP/SEA	Please complete either option below:	date or Officeholder			
NOTARY STAMP/SEA	Please complete either option below:	date or Officeholder day of			
NOTARY STAMP/SEAL	Please complete either option below:				
NOTARY STAMP/SEAL	Please complete either option below: L before me by this the which, witness my hand and seal of office.	day of,			
NOTARY STAMP/SEAI Sworn to and subscribed 20, to certify	Please complete either option below: L before me by this the which, witness my hand and seal of office.				
NOTARY STAMP/SEAL Swom to and subscribed 20, to certify Signature of officer administe (2) Unsworn Declaration	Please complete either option below: before me by this the which, witness my hand and seal of office. ering oath Printed name of officer administering oath OR	day of, Title of officer administering oath			
NOTARY STAMP/SEAL Sworn to and subscribed 20, to certify Signature of officer administe (2) Unsworn Declaration My name is	Please complete either option below: L before me by	day of, Title of officer administering oath			
NOTARY STAMP/SEAL Swom to and subscribed 20, to certify Signature of officer administe (2) Unsworn Declaration	Please complete either option below: L before me by	Title of officer administering oat arch 9, 1978 78377 USA			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER Alex De	NAME ean Ochoa	20 Filer ID (Ethics Co	mmiss	ion Filers)		
21 SCHEE NAME	SUBTOTAL AMOUNT					
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,700.00		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS			0.00		
4.	SCHEDULE E: LOANS	\$	0.00			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			0.00		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			0.00		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD					
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			2,000.58		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	\$	0.00			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	\$	0.00			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER					

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

	288 18			
The	Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1:	
2 FILER NAME Alex Dear	n Ochoa		3 Filter ID (Ethics Commission Filers)	
4 Date 02/05/2024	5 Full name of contributor		7 Amount of contribution (\$)	
	6 Contributor address; City; 954 Co Rd 422 Beeville	State; Zip Code TX 78102	\$1000.00	
8 Principal occu Self Emp	pation / Job title (See Instructions)	9 Employer (See Instruction Medio Group I		
Date		C (ID#:)	Amount of contribution (\$)	
02/13/2024	Matthew J. Grayson Contributor address; City; PO Box 1075 Woodsboro		\$500.00	
Principal occup	oation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date 02/01/2024	Full name of contributor		Amount of contribution (\$)	
	Contributor address; City; 2510 Platinum Chase Dr Rosha	\$200.00		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date	Full name of contributor		Amount of contribution (\$)	
	Contributor address; City;	State; Zip Code		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimb Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Fund/Beverage Expense Consulting Expense Poling Expense Travel In District Contributions/Dunations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Legal Services Other (enter a category not listed above) Credit Card Payment The instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Alex Dean Ochoa 4 Date 5 Payee name 01/29/2024 Grunwald Printing Co 7 Payee address: 6 Amount (\$) City: State: Zip Code \$333.41 1418 Morgan Avenue Corpus Christi TX 78404 political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE Political Signs** Advertising Expense OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense (c) Candidate / Officeholder name Office sought Office held Complete ONLY if direct Refugio County Sheriff's Office Alex Dean Ochoa expenditure to benefit C/OH Payee name 02/12/2024 **Grunwald Printing Co** Amount (\$) Payee address; City; State: Zip Code \$936.37 Reindursement from Corpus Christi 1418 Morgan Avenue TX 78404 X political contributions intended Description Category (See Categories listed at the top of this schedule) **PURPOSE** OF **Political Signs** Advertising Expense **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Alex Dean Ochoa Refugio County Sheriff's Office Payee name 02/20/2024 **US Postal Service** Pavee address: Amount (\$) City; State; Zip Code \$730.80 Reinbursament from Refugio 78377 507 Osage TX X political contributions intended Category (See Categories listed at the top of this schedule) Description **PURPOSE** OF Advertising Expense Postage for mail out adverting **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Refugio County Sheriff's Office Alex Dean Ochoa

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED