CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains hov	v to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR MS. NICKNAME	FIRST Claudia LAST Alcazar	MI M SUFFIX	Date Received 10-7-2024
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	P. O. Boc 63 Rio Grande	X; APT / SUITE #; C	CITY; STATE: ZIP CODE	Date Received 7. 2024
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (956)	PHONE NUMBER 867-4222	EXTENSION	Date Hono columned or Date County COUNTY Receipt #
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MS. NICKNAME	FIRST Maria LAST Alcazar	MI M SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	P. O. Box 63 Rio Grande		UITE #; CITY;	STATE: ZIP CODE
8 CAMPAIGN TREASURER PHONE	(956)	PHONE NUMBER 739-0042	EXTENSION	
9 REPORT TYPE	January 15 July 15	30th day before elec	Constitutions.	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month 7	Day Year / 1 / 24	THROUGH 9	Day Year / 26 / 24
11 ELECTION	Month Day	Year Primary	Runoff Other Description	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Tax Assessor ar	
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES :	MAY HAVE BEEN MADE WITHOUT THE CAND. ED TO REPORT THIS INFORMATION ONLY IF TH	ADE BY POLITICAL COMMITTEES TO SUPPORT IDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR SEY RECEIVE NOTICE OF SUCH EXPENDITURES.
		COMMITTEE CAMPAIGN TREA	ASURER ADDRESS	
		GO TO F	PAGE 2	

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME		1	16 Filer I	ID (Ethics	Commission Filers)
17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$	100.00
	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		\$	100.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY	\$	100.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE	\$	0.00
		affirm, under penalty of perjury, that the accompanying report is true e reported by me under Title 15. Election Code.	and con	rect and in	cludes all information

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit					
NOTARY STAMP/SEAL					
Sworn to and subscribed before me by				day of	,
20, to certify which, witness my hand	and seal of office.				
Signature of officer administering oath	Printed name of officer ad	ministering oath		Title of offic	er administering oath
	OR				
(2) Unsworn Declaration					
My name is Claudia M. Alcazar		, and my date of b	irth is 11/2	27/1967	
My address is 135 Old US HWY 83	5	Rio Grande City			USA
(street)		(city)	(state)	(zip code)	(country)
Executed in Starr County, State	, _{of} <u>Texas</u> , _{on}	the 7 day of O	ctober	20 <mark>24 (year)</mark>	
		Signature of (Candidate/Of	ficeholder (De	clarant)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

			111		
The C/OH Instruction (Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Claudia	мі М	OFFICE USE ONLY	
NAME	NICKNAME	LAST Alcazar	SUFFIX	JUL 1.5 202	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	P. O. Box 63 Rio Grande		THE ELECTIONS OF THE ELECTIONS OF THE PLANT		
	AREA CODE	PHONE NUMBER	EXTENSION	3.3	
5 CANDIDATE/ OFFICEHOLDER PHONE	(956)	867-4222	EXTENSION	Date Hand deliver to Postman	
6 CAMPAIGN TREASURER	MS / MRS / MR Ms.	_{FIRST} Maria	мі М	Date Processed **********************************	
NAME	NICKNAME Minnie	Alcazar	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY; STATE: ZIP CODE P.O. Box 632 Rio Grande City, TX 78582				
8 CAMPAIGN TREASURER PHONE	(956)	739-0042	EXTENSION		
9 REPORT TYPE	January 15	30th day before 6	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Altach C/OH - FR)	
10 PERIOD COVERED	Month 1	Day Year / 1 / 24	THROUGH 6	Day Year 24	
11 ELECTION	ELECTION D. Month Day 11 / 5	Year	Runoff Other Description	E	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (If know Tax Assessor a		
14 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER: THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME ProjectRedTX				
Additional Pages	GENERAL COMMITTEE ADDRESS 1108 Lavaca Street, #110-610				
	specific Committee campaign treasurer name Wayne Hamilton				
		COMMITTEE CAMPAIGN TR			
		GO TO	PAGE 2		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	1	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)	\$ 4,327.23				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 4,327.23				
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,327.23				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST 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						
NOTARY STAMP/SEA	-					
Sworn to and subscribed	before me by this the	day of,				
20, to certify which, witness my hand and seal of office.						
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath				
	OR					
(2) Unsworn Declaration	on					
My name is Claudia N	A. Alcazar, and my date of birth is _	11.27.1967				
My address is P. O. Bo	ox 632 / 135 Old US 83 RGC TC	78582 USA				
Executed in Starr	County, State of Texas , on the 15 day of July (month)	tate) (zip code) (country), 2024 (year) ate/Officeholder (Declarant)				