Garcia Gabriela "Gabby"

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

OFFICEHOLDER NAME Ms. Gabriela Ms. Gabriela Ms. Gabriela Ms. Gabriela Date Received Comercial Contents NICKNAME Gabby Garcia CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1104 E. 7th Street Suite A ADDRESS Brownsville , TX 78520 MS / MRS / MR FIRST TREASURER NAME MS / MRS / MR FIRST Mr. Antonio NICKNAME LAST Tony Flores TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP COT 1104 E. 7th Street Suite A Brownsville , TX 78520 AREA CODE PHONE NUMBER EXTENSION (956) 266-5050
3 CANDIDATE / OFFICEHOLDER NAME MS / MRS / MR FIRST Gabriela NICKNAME LAST SUFFIX Gabby Garcia 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Change of Address Change of Address MS / MRS / MR FIRST MICKNAME TREASURER NAME MS / MRS / MR FIRST MICKNAME TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP COT TO SUITE #; CITY; STATE; ZIP COT T
OFFICEHOLDER NAME Ms. Gabriela Ms. Gabriela Ms. Gabriela Date Received CAMERON COUNTY INCKNAME LAST SUFFIX Gabby Garcia CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1104 E. 7th Street Suite A 1104 E. 7th Street Suite A 1104 E. 7th Street Suite A Brownsville , TX 78520 MS / MRS / MR FIRST TREASURER NAME Mr. Antonio NICKNAME LAST Tony Flores STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP COT 1104 E. 7th Street SUFFIX TOTA 5 2028 Date Head-delivered of Case Position Kest Receipt # Position Receipt # Receipt # Receipt # Receipt # Position Receipt # Receipt # Receipt # Receipt # Position Receipt # Receipt # Receipt # Receipt # Position Receipt # Receipt #
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A CANDIDATE / Gabby Garcia 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered of Date Food-marked Date Imaged 5 CAMPAIGN TREASURER NAME 6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP COTE SUITE *; CITY; STATE; ZIP COTE SUITE *; CITY; STATE SUITE *; CITY; STATE; ZIP COTE SUITE *; CIT
A CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered of Cate Position Receipt # Date Processor Date Indianated Date Indianat
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered of Cate Position Kell Processor Date P
ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered of Cate Position Receipt # Date Processur Date Imaged MS / MRS / MR
MALLING ADDRESS Change of Address Brownsville , TX 78520 Brownsville , TX 78520 Brownsville , TX 78520 Brownsville , TX 78520 MS / MRS / MR
ADDRESS Change of Address Brownsville , TX 78520 Date Imaged
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5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI MI. Antonio NICKNAME LAST SUFFIX Tony Flores 6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP COT SUITE ADDRESS (Residence or Business) (Residence or Business) 7 CAMPAIGN TREASURER ADDRESS AREA CODE PHONE NUMBER EXTENSION (956) 266-5050
5 CAMPAIGN TREASURER NAME Mr. Antonio NICKNAME LAST SUFFIX Tony Flores 6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP COT 1104 E. 7th Street Suite A Brownsville , TX 78520 7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (956) 266-5050
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TREASURER NAME Mr. Antonio NICKNAME LAST SUFFIX Tony Flores 6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP COT SUITE ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (956) 266-5050
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Tony Flores 6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CONTROL ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (956) 266-5050
6 CAMPAIGN TREASURER ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER PHONE STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP COR STATE; ZIP COR 1104 E. 7th Street Suite A Brownsville , TX 78520 AREA CODE PHONE NUMBER EXTENSION (956) 266-5050
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ADDRESS (Residence or Business) Suite A Brownsville , TX 78520 7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (956) 266-5050
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7 CAMPAIGN TREASURER PHONE PHONE NUMBER EXTENSION (956) 266-5050
TREASURER (956) 266-5050 (956) 266-5050
TREASURER (956) 266-5050 (956) 266-5050
PHONE
8 REPORT
TYPE January 15 X 30th day before election Runoff 15th day after campaign treasurer
appointment (officeholder only) July 15 Sth day before election Exceeded \$500 limit Final Report (Attach C/OH-FR)
Saly 25 Carray Soloto Closson Control
9 PERIOD Month Day Year Month Day Year
COVERED 07/05/2020 THROUGH 09/24/2020
10 ELECTION ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff Other
X General Special
11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)
District Judge District 138
GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 10

13 C / OH NAME	Garcia, Gabriela (Ms	,	00083892	(Ethics Commission Filers)	
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.					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	***************************************		
GENERAL					
COMMITTEE ADDRESS					
SPECIFIC					
COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRESS	s		
16 CONTIBUTION TOTALS	LOANS, OR GUA	CAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TI ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$ 0.00	
		TICAL CONTRIBUTIONS PLEDGES LOANS OR GUARANTEES OF LOANS		\$ 3,500.00	
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTALS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED				\$ 0.00	
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 3,365.76	
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS OF THE LA ERIOD	AST DAY OF THE	\$ 310.18	
OUTSTANDING LOAN TOTALS					
17 AFFADAVIT			***************************************		
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.			
The state of the s	YVONNE RODRIG Notary Public, State o Comm. Expires 09-27 Notary ID 132190	of Texas 7-2023 Aabriel Aa	Ma_ Candidate or Officehol	lder	
AFFIX NO	TARY STAMP / SEAL ABO	OVE		•	
Sworn to and subscore	cribed before me, by the sa	ertify which, witness my hand and seal of office.	, this the $_{\underline{5}}$	day	
Signature of office	As administrating path	Vvonne Rodnavez	Title of officer	J. J. J. A. J. J. S. A. J. S. A. A.	
Зіўлаште от онк	cer administering oath	Printed name of officer administering oath	little of officer	r administering oath	

SUBTOTALS - JC/OH COVER SHEET PG 3 3 of 10 FILER NAME Garcia, Gabriela (Ms.) SCHEDULE SUBTOTALS FORM JC/OH COVER SHEET PG 3 3 of 10 (Ethics Commission Filers) 00083892

					3 of 10
18 FIL	ER NAM	AE.	19 Filer ID	(Ethics Con	nmission Filers)
Ga	ırcia, G	abriela (Ms.)	00083892		
20 SC	HEDUL	E SUBTOTALS			
NA	ME OF	SCHEDULE		SUBT	OTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	3,500.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	3,365.76
6,		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	-
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
					· · · · · · · · · · · · · · · · · · ·

MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/10
2 FILER NAME		· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
Garcia, Gab			00083892
4 Date 07/09/2020	5 Full name of contributor out-of-state PAC (ID#: LAW OFFICE OF CARLOS A. GARCIA		7 Amount of Contribution (\$)
01109/2020	6 Contributor address; City; State; Zip Code 1305 E Griffin Pkwy		\$2,000.00
	Mission, TX 78572		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
10 Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date 07/07/2020	Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$) \$1,500.00	
	Contributor address; City; State; Zip Code 855 West Price Rd Suite 9 Brownsville, TX 78520		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		**************************************
•			
		•	
orms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V1.1.0d3681a8

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1	Total pages Schedule F1: Sch: 1/4 Rpt: 5/10	Garcia, Gabriela (Ms.) 00083892			
4	Date 09/06/2020	5 Payee name CHEST POUND SCREEN PRINTING & EMBROIDERY			
6	Amount (\$) \$325.89	7 Payee address; City; State; Zip Code 3009 Monte Cristo Brownsville, TX 78520			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Shirts			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date 07/08/2020	Payee name GIO'S VILLA			
	Amount (\$) \$278.83	Payee address; City; State; Zip Code 2325 Central Blvd Brownsville, TX 78520			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Committee Meeting			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date 07/21/2020	Payee name GOURMET CENTRAL BY CEL			
	Amount (\$) \$62.95	Payee address; City; State; Zip Code 515 W 4th St			
		Brownsville, TX 78520			
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Committee Meeting			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Pol Credit Card Payment	litical Committee Legal Services	ge Expense Office polling demorials Expense Printing es Salarie	o Overhead/Rental Expense g Expense ng Expense ng Expense les/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
4 Tatal paras Cabadula E	The Instruc	ction Guide explains how to	complete this form.	
1 Total pages Schedule F				3 Filer ID (Ethics Commission Filers)
Sch: 2/4 Rpt: 6/10	Garcia, Gabriela (Ms.))	Ī	00083892
4 Date	5 Payee name		· · · · · · · · · · · · · · · · · · ·	
07/12/2020	LOWE'S			
6 Amount (\$)	7 Payee address; City;	- total 1 - ip (Code	
\$51.12	2 525 Ruben M Torres S	Sr Blvd		
	Brownsville, TX 78520	j		
8 PURPOSE	(a) Category (See Categories lis	sted at the top of this schedule)	(b) Description	
OF EXPENDITURE	Supplies	and are top or and contocology	Check if travel out	utside of Texas, Complete Schedule T.
			Check if Austin, T.	TX, officeholder living expense
			Stakes for Sign	ns
9 Complete ONLY if direct				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder nan OH	me Office so	ought	Office held
Date	Payee name			
07/14/2020	RGV MEDIA GROUP			
Amount (\$)	Payee address; City;	State; Zip C	code	
\$1,000.00	2108 Central Blvd			
	Brownsville, TX 78520			
PURPOSE			· · · · · · · · · · · · · · · · · · ·	
OF EXPENDITURE	(a) Category (See Categories liste Polling Expense	ad at the top of this schedule)	(b) Description	
EXPENDITORE	, omig mpono		Check if Austin, T)	side of Texas. Complete Schedule T. X, officeholder living expense
			Phone Banking	4 Officerolder living expense
		1		
Complete ONLY if direct	Candidate/Officeholder nam	ne Office sou	Inht	755 p. 1.1
expenditure to benefit C/OI	д Н		gire	Office held
Date	Payee name			
07/22/2020	RGV MEDIA GROUP			
Amount (\$)				
\$1,000.00	Payee address; City;	State; Zip Co	ıde	
Ψ±1000.00	2108 Central Blvd			
İ	ĺ			
	Brownsville, TX 78520			
PURPOSE OF	(a) Category (See Categories listed	d at the ton of this schedule)	(b) Description	
OF EXPENDITURE	Consulting Expense	at the top or the sortenity		ide of Texas. Complete Schedule T.
	1	J	Check if Austin, TX, o	officeholder living expense
	•	J	Campaign Strate	
				3,
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	e Office soug	aht	Office held
experience to position over a	i		***	Office ficial

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense

Transportation Equipment & Related Expense Travel in District Travel Out of District Printing Expense Salaries/Wages/Contract Labor Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 7/10 Garcia, Gabriela (Ms.) 00083892 4 Date Payee name 07/22/2020 RGV MEDIA GROUP 6 Amount (\$) Payee address; State; Zip Code \$500.00 2108 Central Blvd Brownsville, TX 78520 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description ΩE Consulting Expense Check if travel outside of Texas, Complete Schedule T, **EXPENDITURE** Check if Austin, TX, officeholder living expense Phone Banking Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/13/2020 **RIO BANK** Amount (\$) Payee address; City; State; Zip Code \$7.76 3401 Old Hwy 77 Brownsville, TX 78520 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Accounting/Banking **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Service Charge Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/14/2020 **RIO BANK** Amount (\$) Payee address; City; State; Zip Code \$7.76 3401 Old Hwy 77 Brownsville, TX 78520 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Accounting/Banking **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Service Charge Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 4/4 Rpt: 8/10 Garcia, Gabriela (Ms.) 00083892 4 Date Payee name 07/08/2020 WALMART 6 Amount (\$) Payee address; City; State; Zip Code 3500 W ALTON GLOOR BLVD \$106.39 Brownsville, TX 78520 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Food/Beverage Expense Check If travel outside of Texas, Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Beverages, Ice, Snacks for Volunteers Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/13/2020 WALMART Amount (\$) Payee address; City; State; Zip Code \$25.06 2721 Boca Chica Blvd Brownsville, TX 78521 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Food/Beverage Expense **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Beverages, Ice for Volunteers Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

OUTSTANDING LOANS SCHEDULE L 1 Total pages Schedule L: The Instruction Guide explains how to complete this form. Sch: 1/2 Rpt: 9/10 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Garcia, Gabriela (Ms.) 00083892 LENDER 4 Name of lender INFORMATION GARCIA, GABRIELA (Ms.) 5 Lender address; City; State; Zip Code 1104 E 7TH STREET SUITE A BROWNSVILLE, TX 78520 GUARANTOR 6 Name of guarantor INFORMATION X not applicable 7 Guarantor address; City; State; Zip Code LENDER Name of lender INFORMATION GARCIA, GABRIELA (Ms.) Lender address; City; State; Zip Code 1104 E 7TH STREET SUITE A BROWNSVILLE, TX 78520 **GUARANTOR** Name of guarantor INFORMATION X not applicable Guarantor address; City; State; Zip Code LENDER Name of lender INFORMATION GARCIA, GABRIELA (Ms.) Lender address; City; State; Zip Code 1104 E 7TH STREET SUITE A **BROWNSVILLE, TX 78520 GUARANTOR** Name of guarantor INFORMATION X not applicable Guarantor address; City; State; Zip Code

OUTSTANDING LOANS SCHEDULE L 1 Total pages Schedule L: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 10/10 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Garcia, Gabriela (Ms.) 00083892 LENDER 4 Name of lender INFORMATION GARCIA, GABRIELA (Ms.) 5 Lender address; City; State; Zip Code 1104 E 7TH STREET SUITE A BROWNSVILLE, TX 78520 **GUARANTOR** 6 Name of guarantor INFORMATION X not applicable 7 Guarantor address; City; State; Zip Code LENDER Name of lender INFORMATION GARCIA, GABRIELA (Ms.) Lender address; City; State; Zip Code 1104 E 7TH STREET SUITE A BROWNSVILLE, TX 78520 GUARANTOR Name of guarantor INFORMATION X not applicable Guarantor address; City; State; Zip Code LENDER Name of lender INFORMATION GARCIA, GABRIELA (Ms.) Lender address; City; State; Zip Code 1104 E 7TH STREET SUITE A BROWNSVILLE, TX 78520 **GUARANTOR** Name of guarantor **INFORMATION** X not applicable Guarantor address; City; State; Zip Code