

ELIZABETH V.

GARZA

**SEMI-ANNUAL
REPORT
JANUARY 18, 2022**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filter ID (Ethics Commission Filers)	2 Total pages filed: 12
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Elizabeth	MI V.
	NICKNAME	LAST Garza	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; 1105 E. 6th St. BROWNSVILLE TX 78520	APT / SUITE #;	CITY; STATE; ZIP CODE
	AREA CODE (956)	PHONE NUMBER 372-1190	EXTENSION
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR Mrs.	FIRST Cerise	MI
	NICKNAME	LAST Reyna de Garduno	SUFFIX
6 CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 748 E. Van Buren St., Brownsville, TX 78520		
	AREA CODE (956)	PHONE NUMBER 546-4646	EXTENSION
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
	Month Day Year 07 / 16 / 2021	THROUGH	Month Day Year 12 / 31 / 2021
8 CAMPAIGN TREASURER PHONE	ELECTION DATE Month Day Year 03 / 01 / 2022		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special
	12 OFFICE OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Justice of the Peace Precinct 2, Place 2	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

OFFICE USE ONLY
DEPARTMENT OF ELECTIONS & CAMPAIGN REGISTRATION

Date Received: **JAN 18 2022**
2:35pm

RECEIVED
By: *[Signature]*

Date Hand-delivered or Date Postmarked

Receipt #	Amount \$
Date Processed	
Date Imaged	

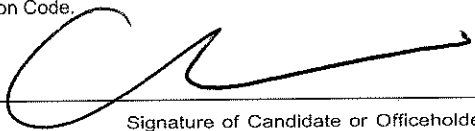
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME ELIZABETH GARZA		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)	\$ 5,325.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,325.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 7,934.59
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,934.59
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2551.41
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,000.00

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 SEAL

Sworn to and subscribed before me by Maria Villegas this the 18th day of January 2022, 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 _____, 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

ELIZABETH GARZA

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$5,325.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$7,934.59
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	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.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME ELIZABETH GARZA		3 Filer ID (Ethics Commission Filers)
4 Date 10/28/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerie Garcia	7 Amount of contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 8418 Summer View Court Harlingen, TX 78552		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 11/1/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maria Linda Gonzalez	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code 3455 Heritage Circ. Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 10/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julianna Sosa	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code 600 E. St. Charles St., Ste. 700 Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Attorney		Employer (See instructions) Self Employed
Date 10/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daisy Gracia	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3775 International Blvd. Brownsville, 78520		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self Employed
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1: 5
2 FILER NAME ELIZABETH GARZA		3 Filer ID (Ethics Commission Filers)
4 Date 11/04/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Priscilla Niedzwiedz	7 Amount of contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 905 E. Jackson St. Brownsville, TX 78520		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 11/5/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dan Sanchez	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 501 E. Tyler Ave., Harlingen, TX 78550		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 11/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cory Bryan	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code 2227 Central Blvd. Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 10/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christina Garceau Perez	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 302 ins Hwy, Ste. 111 Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self Employed
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME ELIZABETH GARZA		3 Filer ID (Ethics Commission Filers)
4 Date 10/27/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Israel Rodriguez	7 Amount of contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 1332 Janet Ln. Brownsville, TX 78520		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self Employed
Date 10/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie Castro	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code 1216 E. Madison St. Ste. C Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 11/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eder Hernandez	Amount of contribution (\$) \$350.00
Contributor address; City; State; Zip Code 800 E. Alton Gloor, Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 11/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cerise Reyna de Garduno	Amount of contribution (\$) \$750.00
Contributor address; City; State; Zip Code 748 E. Van Buren St., Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME ELIZABETH GARZA		3 Filer ID (Ethics Commission Filers)
4 Date 11/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Efrain Zamora	7 Amount of contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 3009 Monte Cristo, Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self Employed
Date 11/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omar Hernandez	Amount of contribution (\$) \$275.00
Contributor address; City; State; Zip Code 49 Angel Dr. Brownsville, TX 78521		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 11/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy Galvan	Amount of contribution (\$) \$125.00
Contributor address; City; State; Zip Code 5271 Ridgeline Rd. Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) PNC
Date 11/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Gonzalez	Amount of contribution (\$) \$125.00
Contributor address; City; State; Zip Code 2532 Deer Trail, Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1: 5
2 FILER NAME ELIZABETH GARZA		3 Filer ID (Ethics Commission Filers)
4 Date 11/13/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoli Ruiz Perez	7 Amount of contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 6424 Padre Island Hwy, Brownsville, TX 78521		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self Employed
Date 11/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernie Hernandez	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 905 E. Los Ebanos Blvd. Ste. D, Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raul Viada	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 265 Calle Jacaranda, Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME ELIZABETH GARZA	3 Filer ID (Ethics Commission Filers)
4 Date 09/29/2021	5 Payee name Fiesta Graphics	
6 Amount (\$) \$422.29	7 Payee address; City; State; Zip Code 205 Paredes Line Rd, Brownsville, TX 78521	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Political Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held ELIZABETH GARZA Justice of the Peace Precinct 2, Place 2	
Date 10/07/2021	Payee name Fiesta Graphics	
Amount (\$) \$650.00	Payee address; City; State; Zip Code 205 Paredes Line Rd, Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Political Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held ELIZABETH GARZA Justice of the Peace Precinct 2, Place 2	
Date 10/14/2021	Payee name Lowe's	
Amount (\$) \$290.15	Payee address; City; State; Zip Code 525 E. Ruben M. Torres Blvd. Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Stakes and Zip Ties
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held ELIZABETH GARZA Justice of the Peace Precinct 2, Place 2	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME ELIZABETH GARZA	3 Filer ID (Ethics Commission Filers)
4 Date 10/22/2021	5 Payee name Fiesta Graphics	
6 Amount (\$) \$811.87	7 Payee address; City; State; Zip Code 205 Paredes Line Rd, Brownsville, TX 78521	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Political Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held ELIZABETH GARZA Justice of the Peace Precinct 2, Place 2	
Date 11/05/2022	Payee name Big E's	
Amount (\$) \$756.67	Payee address; City; State; Zip Code 205 Paredes Line Rd, Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description Food for Fund Raising Event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held ELIZABETH GARZA Justice of the Peace Precinct 2, Place 2	
Date 11/05/2021	Payee name Fiesta Graphics	
Amount (\$) \$1169.10	Payee address; City; State; Zip Code 205 Paredes Line Rd, Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs/Door Hangers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held ELIZABETH GARZA Justice of the Peace Precinct 2, Place 2	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME ELIZABETH GARZA	3 Filer ID (Ethics Commission Filers)
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4 Date 12/2/2021	5 Payee name Fiesta Graphics
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6 Amount (\$) \$838.93	7 Payee address; 205 Paredes Line Rd, Brownsville, TX 78521	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Political Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ELIZABETH GARZA	Office sought Justice of the Peace Precinct 2, Place 2	Office held
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Date 11/12/2021	Payee name Lowe's
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Amount (\$) \$90.80	Payee address; 525 E. Ruben M. Torres Blvd.	City; Brownsville, TX	State; 78520	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Stakes
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ELIZABETH GARZA	Office sought Justice of the Peace Precinct 2, Place 2	Office held
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Date 11/13/2021	Payee name Solice Technologies
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Amount (\$) \$304.00	Payee address; 4115 Old Highway 77, Brownsville, TX 78520	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ELIZABETH GARZA	Office sought Justice of the Peace Precinct 2, Place 2	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME ELIZABETH GARZA	3 Filer ID (Ethics Commission Filers)
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4 Date 11/13/2021	5 Payee name Loma Alta Trap & Skeet
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6 Amount (\$) \$2,000.00	7 Payee address; Old Port Isabel Rd, Brownsville, TX 78526	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Event Location
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ELIZABETH GARZA	Office sought Justice of the Peace Precinct 2, Place 2	Office held
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Date 12/30/2021	Payee name Fiesta Graphics
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Amount (\$) \$552.07	Payee address; 205 Paredes Line Rd, Brownsville, TX 78521	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs/Door Hangers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ELIZABETH GARZA	Office sought Justice of the Peace Precinct 2, Place 2	Office held
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Date 08/30/2021	Payee name Chest Pound Screen Printing
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Amount (\$) \$48.71	Payee address; 3009 Monte Cristo, Brownsville, TX 78526	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Design
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ELIZABETH GARZA	Office sought Justice of the Peace Precinct 2, Place 2	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED