CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

			7		
The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Et	hics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST		V MI	OFFICE USE ONLY
IVAIVIE	NICKNAME	Valle		SUFFIX	Pate Received 16 18 10
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;		CITY; STA		JAN 19 2024 DENISE VALLES OFFIX COUNTY COUNTY, WARD CO., TEXAS Deputy
Change of Address	1/05	PHONE NUMBER	ahans Tu	79751	Clerk: P 7 2 Sopary
5 CANDIDATE/ OFFICEHOLDER PHONE		PHONE NUMBER ZZ7 5085		ENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR Figin	FIRST *	V	МІ	Receipt # Amount \$ Date Processed
NAIVIE	NICKNAME	LAST		SUFFIX	
	Va11	/e			Date Imaged
7 CAMPAIGN TREASURER ADDRESS	, , , , , , , , , , , , , , , , , , , ,	(NO PO BOX PLEASE); APT / SI		CITY;	STATE; ZIP CODE
(Residence or Business)	1103 5	· Gary	Mongho	ins	TX 75756
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER 432-227-5085	2	ENSION	
	(1)4	176 206 30			
9 REPORT TYPE	January 15	30th day before e	lection	Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before ele	ection	Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year		Month	Day Year
		/24/2023	THROUGH		15/2024
11 ELECTION	ELECTION DA		□ s«	ELECTION TYPE	2
	Month Day	Year Primary	Runoff	Other Description	
	03/05/	ZOZ3 General	Special		
12 OFFICE	OFFICE HELD (if any)		13 OFF	FICE SOUGHT (if known)
	Sheriff		5/	heritt	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	MAY HAVE BEEN M.	ADE WITHOUT THE CANL	ADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.
001111111111111111111111111111111111111	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME		
		COMMITTEE CAMPAIGN TRE	EASURER ADDRES	SS	
		GO TO	PAGE 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 PLEDGES, LOANS, OR GUARAN CONTRIBUTIONS MADE ELECT		/ \$
	2. TOTAL POLITICAL CONTRIBE (OTHER THAN PLEDGES, LOAN	UTIONS S, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL	EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDIT	URES	1\$ 10624.56
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTION OF REPORTING PERIOD	DNS MAINTAINED AS OF THE LAS	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF LAST DAY OF THE REPORTING	ALL OUTSTANDING LOANS AS OF PERIOD	THE \$
	vear, or affirm, under penalty of perjury, that uired to be reported by me under Title 15, Ele		e and correct and includes all information
		Signature of Ca	ndidate or Officeholder
		ete either option below	<i>y</i> :
(1) Affidavit NOTARY STAMP/SEAL	RAQUEL DE LA C NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 03/0 NOTARY ID 1342330	6/27	
	before me by Frarin Vall	e this the	19th day of January,
Raquel De	which, witness my hand and seal of office. Raquel	Do. La O	Notary Public
Signature of officer administer	ing oath Printed name of office	er administering oath	Title of officer administering oath
40.11		OR	
(2) Unsworn Declaration	on		
My name is		, and my date of birth is	•
My address is			
	(street)	(city) (s	state) (zip code) (country)
Executed in	County, State of	, on the day of(month	, 20 (year)
		Signature of Candid	date/Officeholder (Declarant)

LAPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Political	Committee 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 F4: 4	2 FILER NAME FLACIW Valle ZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 12.03.17
TO THE OTHER WILL	zed expenditures charged to a credit card \$ 1303, 17
5 Date	6 Payee name The Home Depot
7 Amount (\$)	8 Payee address; City; State; Zip Code
\$52.20	Midland Tinggon
9 TYPE OF EXPENDITURE	Political Non-Political
10	(a) Category (See Categories listed at the top of this schedule) (b) Description
FURPOSE OF EXPENDITURE	. Othor Mix Thens for 5 3 5 3 h 3
	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date 01/05/262 by	Payee name He Cheap Signs
Amount (\$)	Payee address; City; State; Zip Code
#521,18	+5 11525A Austin TX 78758
TYPE OF EXPENDITURE	Political Non-Political
PURPOSE OF	Category (See Categories listed at the top of this schedule) Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Advertising Expense

Accounting/Banking

Consulting Expense

5 Date

10

Contributions/Donations Made By

1 Total pages Schedule F4:

TYPE OF

EXPENDITURE

PURPOSE OF **EXPENDITURE**

(c)

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Polling Expense Travel In District **Printing Expense** Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Franchle 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 6 Payee name Zip Code 4509 Navero Drive Political Non-Political (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held

Date	Payee name	
01/05/24	Lowes	19
Amount (\$)	Payee address;	City; State; Zip Code
£48,60	3315 N. CP 250 M	idland (275707
TYPE OF EXPENDITURE	Political Nor	n-Political
	Category (See Categories listed at the top of this schedule	
PURPOSE OF	Beieus	Mist I Kms Synd buss
	Check if travel outside of Texas. Complete Schedule	T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Contributions/Donations Made By Candidate/Officeholder/Political	
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F4:	2 FILER NAME Frank Valle 3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED TO A CREDIT CARD \$
5 Date ////5/7023	6 Payee name Hune Depot
7 Amount (\$)	8 Payee address; City; State; Zip Code
490,79	5181 E42nd Ode856 TX A762
9 TYPE OF EXPENDITURE	Political Non-Political
10	(a) Category (See Categories listed at the top of this schedule) (b) Description
PURPUSE OF EXPENDITURE	Equipment to make & 5 ns Router
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date	Payee name
11/19/2023	Lowes
Amount (\$)	Payee address; City; State; Zip Code
495,17	4101 E 42 2 21p Code
TYPE OF EXPENDITURE	Political Non-Political
	Category (See Categories listed at the top of this schedule) Description
PURPOSE OF	Parts for signs Screws Washers
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political		Loan Kepayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
	The Instruction Guide expla	ins how to complete this form.	
1 Total pages Schedule F4:	2 FILERNAME Fraci Valle		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	ZED EXPENDITURES CHARGED	O TO A CREDIT CARD	\$
5 Date ///四/プレ゙ン	6 Payee name	- j	-
7 Amount (\$)	8 Payee address;	City;	State; Zip Code
\$255.71	4101 East 42	02(446	T2 79762
9 TYPE OF EXPENDITURE	Political	Non-Political	
10	(a) Category (See Categories listed at the top of th		
PURPOSE OF EXPENDITURE	Items for signs	Wood, sci	cous, glace, etc
	(c) Check if travel outside of Texas. Complete	te Schedule T. Check if A	austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
TYPE OF EXPENDITURE	Political	Non-Political	
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	Check if travel outside of Texas. Comple	ete Schedule T. Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS N	EEDED

EXPENDITURES MADE BY GREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGE	ED TO A CREDIT CARD	\$
5 Date	6 Payee name Nain Stelt		
7 Amount (\$)	8 Payee address;	City;	State; Zip Code
958.91	5010 priar	Wichett	TX 79754
9 TYPE OF EXPENDITURE	Political	Non-Political	
10	(a) Category (See Categories listed at the top of	this schedule) (b) Description	/
OF EXPENDITURE	0-ther	Parts Su	aplais 1 5/15
	(c) Check if travel outside of Texas. Compl	ete Schedule T. Check if A	ustin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
TYPE OF EXPENDITURE	Political	Non-Political	
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS N	EEDED

PERSONAL FUNDS

SCHEDULE G

Contributions Consider No. Contributions Con		EXPENDITURE CATEG	SORIES FOR BOX 8(a)	
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Prayse name	Total name Cahadula Co		o now to complete this form.	T
Amount (8) 2	4)	France Valle		3 Filer ID (Ethics Commission Filers)
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PURPOSE OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Candidate / Office holder name Office sought Office sought Office hold Of	745, ° 4	Payee address;	Dallas city;	State; Zip Code
Candidate / Officeholder name Candidate / Officeholder name Office sought Office held Date Payee name Cheap Signs Amount (\$) Payee address; City: State: Zip Code PURPOSE OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Office sought Office held Description Candidate / Officeholder name Office sought Office held Office held Date Payee name Mildian Amount (\$) Payee address: Candidate / Officeholder name Office sought Office sought Office held Date Payee name Mildian Amount (\$) Payee address: City: State: Zip Code Manabasas Amount (\$) Payee address: City: State: Zip Code Office held Date Payee name Mildian Office held Date Payee name Mildian Office held Date Date Cardegory (See Categories listed at the top of this schedule) Date Date Date Cardegory (See Categories listed at the top of this schedule) Description Description	PURPOSE OF	Other	Pens	
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PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Office Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office sought Office held Date Payee name Manaham News Amount (\$) Payee address; Office Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Office held Category (See Categories listed at the top of this schedule) Description Description Description			nson the Ch	Rap
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OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		Category (See Categories listed at the top of this s	chedule) Description	
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Monahars News Amount (\$) Payee address; City; State; Zip Code 107 W 2754 Monahars 79756 Populacial contributions intended Category (See Categories listed at the top of this schedule) Description	Complete Chilly if greet	Candidate / Officeholder name	Office sought	Office held
Amount (\$) Payee address; City; State; Zip Code 107 W Z 754 Monabers Ty 79756 Category (See Categories listed at the top of this schedule) Description	Date	Payee name		
PURPOSE 107 W Z 75 + Monabers 79756 Category (See Categories listed at the top of this schedule) Description	11/16/2023			
Description Category (See Categories listed at the top of this schedule) Description	Amount (\$)	2011		State; Zip Code
PURPOSE				
EXPENDITURE Advertisement Christmas Ad	Interided	Category (See Categories listed at the top of this se	chedule) Description	4 /
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	PURPOSE OF	Advertisement	Christmas	Ad

SCHEDULE G

PERSONAL	FUNDS		
If the requested inf	ormation is not applicable, DO NOT incl	ude this page in the re	port.
	EXPENDITURE CATEGO	RIES FOR BOX 8(a)	
Accounting/Bariking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment	Food/Beverage Expense Po By Gift/Awards/Memorials Expense Po	mice Overnead/Kental Expense olling Expense rinting Expense alaries/Wages/Contract Labor ow to complete this form.	I ransportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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4	Frank Valle		Ther ID (Ethics Commission Filers)
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11/27/2023	Marketson the Cha	a P	
Amount (\$)	7 Payee address;	City;	State; Zip Code
Reimbursement from	Magnetson the Cher 7 Payee address;	tin TV	
Buppose	(a) Category (See Categories listed at the top of this sched	lule) (b) Description	
PURPOSE OF EXPENDITURE	Magnets	Political,	Magnets
	(c) Check if travel outside of Texas. Complete Schedu		n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
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11/27/2023	Francis Valle		
Amount (\$)	Payee address; Choice out door Advertisi	City;	State; Zip Code
Anortica	Category (See Categories listed at the top of this sche	dula) Deportation	
PURPOSE OF EXPENDITURE	Other	Description Bill Board	1 Ad
	Check if travel outside of Texas. Complete Sched		n, TX, officeholder living expense
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Data 1-1 61 2			
Date 12/28/23	Cheap Signs		
Amount (\$)	Payee address;	City;	State; Zip Code
91921,98	Payee address;	- TX 787	
political contributions intended	. , , , , , , , , , , , , , , , , , , ,	10	
DIIDDOSE	Category (See Categories listed at the top of this sche	dule) Description	
PURPOSE OF	Yard Signs	Yeards	
EXPENDITURE	Check if travel outside of Texas. Complete Sched	ule T. Check if Austi	in, TX, officeholder living expense
expenditure to benefit C/OH	Consideration of the control of the	00 00 an an 1999	N. C.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PERSONAL FUNDS

SCHEDULE G

If the requested info	ormation is not applicable, DO NOT inclu	ıde this page in the re	eport.
	EXPENDITURE CATEGOR	RIES FOR BOX 8(a)	
Accounting/Baritarity Consulting Expense Contributions/Donations Made to Candidate/Officeholder/Politic Credit Card Payment	Food/Beverage Expense Po By Gift/Awards/Memorials Expense Pri	nice Overnead/Kental Expense Illing Expense Inting Expense Ilaries/Wages/Contract Labor ow to complete this form.	I ransportation Equipment & Related Expens Travel In District Travel Out Of District Other (enter a category not listed above)
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Y	Frenin Valle		
- Date	5 Payee name		
11/1 thou 1/1/24	Affordable Homes		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
# 929,12 Reimbursement from political contributions	800 S. Stockto-	Monahans	TX 79751
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedu	(b) Description	Ad.
	(c) Check if travel outside of Texas. Complete Schedule	e T. Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched	lule) Description	
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Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
political contributions intended			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched	lule) Description	
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expenditure to benefit C/OH		2500 to 11 .80	2°3 (\$\frac{1}{2}\cdots) = -4

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PERSONAL FUNDS

SCHEDULE G

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Total pages Schedule G:	2 FILER NAME Frank Valle		3 Filer ID (Ethics Commission Filers)
Amount (\$) 4 1777, 22 Reimbursement from collitical contributions	T Payee address;	City:	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the second seco	Yard sig.	in, TX, officeholder living expense
omplete <u>ONLY</u> if direct	Candidate / Officeholder name	Office sought	Office held
Date 0 1/02/2024 Amount (\$) \$ 447.99 Painture amount from	Payee name Adaptapase From Payee address; Monakans News	irih Valle city; Monahans	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of	Ad	tin, TX, officeholder living expense
Complete CINLY if direct	Candidate / Officeholder name	Office sought	Office held
Date 01/12/2024	Payee name Agra	County	
Amount (\$)	Payee address;	County City; Manahans,	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of		'5+