CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

O/tivii /tioi				3012113112113
The C/OH Instruction	Guide explains how to com	plete this form.	er ID	2 Total pages filed: 8
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Jose	City	OFFICE USE ONLY Received
	NICKNAME	LAST Cabeza de Vaca	SUFFIX	Date 7/11/2025
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; AF P.O. Box 4111	PT / SUITE#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
Change of Address	McAllen, TX 78501			Date Processed Date Imaged
5 CAMPAIGN TREASURER NAME	MS/MRS/MR Mrs.	FIRST Brandy	MI	
	NICKNAME	LAST Voss	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	P.O. Box 4111	O BOX PLEASE);	APT / SUITE #; CITY; McAl	STATE; ZIP CODE len TX 78701
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO (956) 342-6720	ONE NUMBER EXTENS	SION	
8 REPORT TYPE	January 15 X July 15	30th day before election 8th day before election	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2025	THROUGI	Month Day H 06/30/202!	Year 5
10 ELECTION	ELECTION DATE Month Day Year	Primary General	ELECTION TYPE Runoff Special	Other
11 OFFICE	OFFICE HELD (if any) McAllen City Commissio McAllen Hidalgo	on Place 6 Place 6 Distric	12 OFFICE SOUGHT	(if known)
		GO TO PA	GE 2	

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

JOI T OKT	& IUIALS			2 of 8			
13 C / OH NAME	Cabeza de Vaca, Jos	6e	14 Filer ID				
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or officeholder POLITICAL consent. Candidates and officeholders are required to report this information only if they receive notice						
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME					
	SPECIFIC	COMMITTEE ADDRESS					
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 0.00			
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$ 0.00					
55	4. TOTAL POLITIC	AL EXPENDITURES		\$ 1,462.60			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	\$ 25,277.43					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	\$ 28.20					
AFFIX NOT	EDITH SHELTO Notary Public STATE OF TEXA Notary ID# 130426 My Comm. Exp. 11-02	Signature of	y of perjury, that the according information required to be considered to	be reported by me			
Sworn to and subscribed before me, by the said 08 (abc) and all which, this the day of 1997 and 1997 a							

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

		3 of 8
18 FILER NAME Cabeza de Vaca, Jose		
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	s	\$ 1,462.60
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	5	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS S	\$
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	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ons	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	RETURNED	\$

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense 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)

7 -Eleven 5 Amount (\$) 7 -Eleven 7 -Eleven 7 -Eleven 7 -Eleven 7 -Eleven 7 - Payee address; City; State; Zip Code 2400 S, McColl Rd, McAllen, TX 78503 8 - PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) 10 - Complete QNLY if direct expenditure to benefit C/OH Payee name 05/07/2025 Payee address; City; State; Zip Code 205 W Amy San Juan, TX 78589 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder name Office sought Office sought Office held Office held Office held Payee address; City; State; Zip Code 205 W Amy San Juan, TX 78589 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Office sought Office held Office held Payee address; City; State; Zip Code 4200 N. Main St. McAllen, TX 78504 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Candidate/Officeholder name Office sought Office held		Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.	
Date O6/27/2025 Fayee name 7-Eleven	1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID	
7 -Eleven 5 Amount (\$) 7 -Eleven 7 -Eleven 7 -Eleven 7 -Eleven 7 -Eleven 7 - Payee address; City; State; Zip Code 2400 S, McColl Rd, McAllen, TX 78503 8 - PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) 10 - Complete QNLY if direct expenditure to benefit C/OH Payee name 05/07/2025 Payee address; City; State; Zip Code 205 W Amy San Juan, TX 78589 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder name Office sought Office sought Office held Office held Office held Payee address; City; State; Zip Code 205 W Amy San Juan, TX 78589 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Office sought Office held Office held Payee address; City; State; Zip Code 4200 N. Main St. McAllen, TX 78504 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Candidate/Officeholder name Office sought Office held		Sch: 1/5 Rpt: 4/8	Cabeza de Vaca, Jose			
Suppose	4					
OF EXPENDITURE Travel In District Trave In District	6		2400 S. McColl Rd.	de		
Date 05/07/2025	8	OF	(cor our general material and top of any contention)	(b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Date O5/28/2025 Amount (\$) Date O5/28/2025 Amount (\$) Payee address; City; State; Zip Code Candidate/Officeholder name O5/28/2025 Amount (\$) Payee address; City; State; Zip Code (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct expenditure to benefit C/OH Date O5/28/2025 Amount (\$) Payee name Camp University Amount (\$) Payee address; City; State; Zip Code 4200 N. Main St. McAllen, TX 78504 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Event Expense (b) Description (b) Description (check if Aussin, TX, officeholder Texas. Complete Schedule T. Check if Aussin, TX, officeholder Inving expense Camp Sponsorship Complete ONLY if direct Camp Sponsorship	9			ght	Office held	
S50.00 San Juan, TX 78589 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense YCA Team 8U Sponsorship						
Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct expenditure to benefit C/OH Date 05/28/2025 Amount (\$) Payee address; City; State; Zip Code \$250.00 Payee address; City; State; Zip Code \$250.00 Purpose Office Sought Office held Candidate/Officeholder name Office Sought Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Camp University Amount (\$) Payee address; City; State; Zip Code \$250.00 Purpose Office Sought Office held (a) Category (see Categories listed at the top of this schedule) Event Expense Camp Sponsorship Complete ONLY if direct Candidate/Officeholder name Office sought Office held			205 W Amy	de		
Date 05/28/2025 Camp University Amount (\$) Payee address; City; State; Zip Code \$250.00 \$250.00 Addlen, TX 78504 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Event Expense Camp Sponsorship Complete ONLY if direct Candidate/Officeholder name Office sought Office held		OF	Contributions/Donations Made By	(b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
O5/28/2025 Camp University Payee address; City; State; Zip Code \$250.00 \$250.00 McAllen, TX 78504 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense Camp University Payee address; City; State; Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Camp Sponsorship Complete ONLY if direct Candidate/Officeholder name Office sought Office held				ght	Office held	
\$250.00 4200 N. Main St. McAllen, TX 78504 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Camp Sponsorship Complete ONLY if direct Candidate/Officeholder name Office sought Office held		5 570 0				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Camp Sponsorship Complete ONLY if direct Candidate/Officeholder name Office sought Office held			4200 N. Main St.	de		
		OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
expenditure to benefit C/OH		Complete ONLY if direct expenditure to benefit C/O		ght	Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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)

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Gu		_	es/Contract Labor		OTHER (enter a category not listed a	pove)	
1	Total pages Schedule F1:	2	FILER NAMI	E				3	Filer ID	
	Sch: 2/5 Rpt: 5/8		Cabeza de	Vaca, Jose						
4	Date	5	Payee name							
L	04/08/2025		Circle K							
6	Amount (\$)	7	Payee addre	ess; City;	State; Zip	Code				
	\$55.09		3912 N. Mo	Coll Rd.						
l										
			McAllen, T	X 78501						
8	PURPOSE	(a)	Category (S	ee Categories listed at th	ne top of this schedule)	(b) Description			
	OF EXPENDITURE		Travel In D						de of Texas, Complete Schedule T,	
	EXPERIMENT						_	n, TX,	officeholder living expense	
							Gasoline			
9	Complete ONLY if direct		Candidate/Off	iceholder name	Office :	sough	t		Office held	
	expenditure to benefit C/OI	H								
┢	Date		Payee name							
	05/24/2025		Exxon Mob							
H	Amount (\$)	_	Payee addre	ess; City;	State; Zip	Code				
	\$61.14		3113 S. 10		O	0000				
	Ψ01.14		0110 0. 10							
				. 70500						
L			McAllen, T	K 78503						
	PURPOSE OF	(a)	Category (S	ee Categories listed at th	ne top of this schedule)	(b) Description			
	EXPENDITURE		Travel In D	istrict					de of Texas. Complete Schedule T.	
	Check if Austin, TX, onicendited fiving expense									
	Gasoline									
L	Complete ONLY if direct	Ļ	Condidate/Off	iceholder name	Office	ough	•		Office held	
	Complete ONLY if direct expenditure to benefit C/Oi		zanuluate/OII	icenoider name	Office :	sougri	ı		Office field	
L	·	_								
	Date		Payee name							
	06/20/2025		Exxon Mob	ile						
Г	Amount (\$)		Payee addre	ss; City;	State; Zip	Code				
	\$55.92		3113 S. 10	h St.						
			McAllen, TX	< 78503						
Г	PURPOSE	(a)	Category (S	ee Categories listed at th	ne top of this schedule)	(b) Description			
	OF		Travel In Di		as the 1 contraction to the second			outsic	le of Texas. Complete Schedule T.	
	EXPENDITURE							n, TX,	officeholder living expense	
							Gasoline			
L										
	Complete ONLY if direct		Candidate/Off	iceholder name	Office s	sought	t		Office held	
	expenditure to benefit C/O	1								
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

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)

Legal Services OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/5 Rpt: 6/8 Cabeza de Vaca, Jose Date Payee name 04/22/2025 Fuentes, David 6 Amount (\$) Payee address; State; Zip Code City; \$100.00 505 S. Texas Weslaco, TX 78596 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation for Basketball team sponsorship Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 04/24/2025 H-E-B Gas/Carwash State; Zip Code Amount (\$) Payee address; City; \$60.96 200 W Expressway 83 Bldg B McAllen, TX 78501 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Gasoline Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/18/2025 McArthy, Michael Payee address; City; State; Zip Code Amount (\$) \$100.00 5114 Hudson Edinburg, TX 78542 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee McAllen Mavericks Sponsorship Football Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Git/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salariae Mense/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

Candidate/Officeholder/Political Committee 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. Total pages Schedule F1: 2 FILER NAME Filer ID Cabeza de Vaca, Jose Sch: 4/5 Rpt: 7/8 4 Date Payee name 01/13/2025 Microsoft 6 Amount (\$) Payee address; City; State; Zip Code \$75.76 One Microsoft Way Redmond, WA 98052 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Software Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/18/2025 Sosa, Rey Payee address; State; Zip Code Amount (\$) City; \$120.00 1424 Ozark Ave. McAllen, TX 78504 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Sponsorship Grizzlies Football Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/28/2025 Tamez, Adrian Amount (\$) Payee address; City; State; Zip Code \$200.00 101 E. Hackberry McAllen, TX 78501 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsorship McAllen Memorial Football Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
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)

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/	Wages	s/Contract Labor	OTHER (enter a categor	ory not listed above)
L			The Instruction Guide	explains now to co	ompi			
1	Total pages Schedule F1: Sch: 5/5 Rpt: 8/8	2 FILER NAME Cabeza de				3	Filer ID	
4	Date 02/22/2025	5 Payee name Tejano Mar	t					
6	Amount (\$) \$54.82	7 Payee addre 620 E. Ridç McAllen, TX	e Road	State; Zip Co	ode			
8	PURPOSE OF EXPENDITURE	(a) Category (s Travel In Di	ee Categories listed at the to Strict	p of this schedule)	(b)		side of Texas, Complete S K, officeholder living expen	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		ceholder name	Office sou	ıght		Office held	
	Date 03/13/2025	Payee name Valero						
	Amount (\$) \$58.61	Payee addre 721 N. McC McAllen, TX	roll Rd.	State; Zip Co	ode			
	PURPOSE OF EXPENDITURE	(a) Category (so Travel In Di	ee Categories listed at the to S trict	p of this schedule)	(b)	므	side of Texas. Complete S (, officeholder living expen	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offi I	ceholder name	Office sou	ight		Office held	
	Date 02/24/2025	Payee name Young Cats	Academny					
	Amount (\$) \$175.00	Payee addre: 1206 Aruba Edinburg, T	St. Apt. 2	State; Zip Co	ode			
	PURPOSE OF EXPENDITURE	Contribution	ee Categories listed at the top Is/Donations Made Officeholder/Politica	Ву	(b)	The second less ten	side of Texas. Complete S (, officeholder living expen	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Offi I	ceholder name	Office sou	ight		Office held	
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