CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to com	plete this form.	er ID	2 Total pages filed: 63
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	LAST	MI	OFFICE USE ONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; AF	Molina PT / SUITE #; CITY;	ZIP COD	Date Hand-delivered of Clate Postmarked Receipt # Amount Date Processed Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	First	MI	
	NICKNAME	Molina	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business) 7 CAMPAIGN	STREET ADDRESS (NO F	ONE NUMBER EXTEN		CITY; STATE; ZIP CODE
TREASURER PHONE 8 REPORT				
TYPE	January 15 July 15	30th day before election		15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Yea 10/24/2021	r THROUG		Day Year W2021
10 ELECTION	ELECTION DATE Month Day Yea 12/14/2021	Primary General	ELECTION TYP X Runoff Special	Other
11 OFFICE	OFFICE HELD (if any) : Place Edinburg D	istrict Mayor Hidalgo	12 OFFICE SOU Place Edink	JGHT (if known) burg District Mayor
- Mala	Guerra VI	GO TO PA	AGE 2	40.3077

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 63

					ASSAMBACES
13 C / OH NAME	Molina, Richard		14 Filer ID		
This box is for notice of political contributions accepted or political expenditures made by political committees FROM POLITICAL COMMITTEE(S) This box is for notice of political contributions accepted or political expenditures made by political committees candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's information only if they receive notice of su					nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE TYPE COMMITTEE NAME			
_	GENERAL				
400		COMMITTEE ADDRESS			
<i>::</i>	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
	1	COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
		3			
16 CONTRIBUTION TOTALS	TOTAL UNITEM OR GUARANTE	IZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELI	AN PLEDGES, LOANS, ECTRONICALLY)	\$	0.00
	2. TOTAL POLITIC (OTHER THAN I	CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$	64,955.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00
	10 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	CAL EXPENDITURES		\$	69,808.17
CONTRIBUTION BALANCE	REPORTING PE			\$	146,086.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS A RTING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT 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.					
ELIZABET RODRIGUEZ Notary Public, State of Texas Comm. Expires 03-14-2023 Notary ID 12848143-6 Signature of Candidate or Officeholder					
	TARY STAMP / SEAL AE		· th		
Sworn to and subscribed before me, by the said Richard Molina, this the day of December, 20 1, to certify which, witness my hand and seal of office.					
Signature of off	Enclos Elizabet Rodriquez Signature of officer administering Printed name of officer administering Title of officer administering oath				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	3 of 63							
	L8 FILER NAME Molina, Richard 19 Filer ID							
20 SCH NAM	HEDULE ME OF S	SUBT	FOTAL AMOUNT					
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	64,955.00			
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	5	\$	69,808.17			
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	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.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	149.32			
				<u> </u>				

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/14 Rpt: 4/63 3 Filer ID FILER NAME Molina, Richard Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) \$100.00 10/25/2021 523 Express Printing 6 Contributor address; City; State; Zip Code 523 W Schunior Edinburg, TX 78541 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) Date \$2,000.00 10/25/2021 Aboujamous, Riad Contributor address; City; State; Zip Code 1217 Fullerton Ave McAllen, TX 78504 Principal occupation / Job title (See Instructions) Employer (See Instructions) N.P Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$2,500.00 10/25/2021 Aguilar, Jose Contributor address; City; State; Zip Code 922 S Closner Blvd # C Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Dr Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/25/2021 \$100,00 Aguirre Family Limited Contributor address; City; State; Zip Code 1817 Sharm Drive Pharr, TX 78577 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 10/25/2021 Aguirre, T Contributor address; City; State; Zip Code 604 Wisteria Ave McAllen, TX 78504 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus. man

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/14 Rpt: 5/63 2 FILER NAME 3 Filer ID Molina, Richard 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 10/25/2021 Alliance In Health \$1,000.00 6 Contributor address; City; State; Zip Code 800 East Dove Ste J Mc Allen, TX 78504 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: 10/25/2021 Armando Guerra & Ass. \$400.00 Contributor address; City; State; Zip Code 113 N 9th Ave Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 Balderas, Raul \$2,000.00 Contributor address; City; State; Zip Code P.O.Box 1896 Edinburg, TX 78540 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus, Man Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 \$100.00 Ballesteros, Antonia Contributor address; City; State; Zip Code 361 Roundup Circle Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:_ Amount of Contribution (\$) 10/25/2021 Barbosa, Victor \$50,00 Contributor address; City; State; Zip Code 4821 S. Hummer Ln Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions) Banker

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/14 Rpt: 6/63 FILER NAME 3 Filer ID Molina, Richard Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 10/25/2021 \$1,000.00 Barrera, Lombardo 6 Contributor address; City; State; Zip Code 1108 La Palma Dr. Mission, TX 78572 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Bus Man Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/19/2021 \$1,000.00 Briseno, Martin (Mr.) Contributor address; City; State; Zip Code 505 E Seminola Ave Pharr, TX 78577 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus. Man Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$500.00 10/25/2021 Build A Prep Contributor address; City; State; Zip Code 901 Travis Ste 13 Mission, TX 78572 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor 10/25/2021 \$500.00 Canales, Ana Contributor address; City; State; Zip Code P.O. Box 3807 Edinburg, TX 78540 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus Man Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$2,500.00 10/25/2021 Cantu, Carlos Contributor address; City; State; Zip Code 4121 N 10th Ste 130 McAllen, TX 78504 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus. man

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/14 Rpt: 7/63 2 FILER NAME Filer ID Molina, Richard 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#; 10/25/2021 Cantu, Daniel \$300.00 6 Contributor address; City; State; Zip Code 100 E Nolana Ste 130 McAllen, TX 78504 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/19/2021 City of Edinburg \$175,00 Contributor address; City; State; Zip Code 415 W. University Dr Edinburg, TX 78540 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 Creative Lodging Group \$1,000.00 Contributor address; City; State; Zip Code 801 E Exp 83 McAllen, TX 78501 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/19/2021 Daniel Cantu Prime Investment group \$1,250.00 Contributor address; City; State; Zip Code 100 E Nolana STE 130 MCALLEN, TX 78504 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/19/2021 Daniel Cantu Prime Investment group \$1,250.00 Contributor address; City; State; Zip Code 100 E Nolana STE 130 MCALLEN, TX 78504 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET.	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 5/14 Rpt: 8/63
2	FILER NAME Molina, Richa		3 Filer ID
4	Date 10/25/2021	 5 Full name of contributor out-of-state PAC (ID#:) De Jesus, Ruben 6 Contributor address; City; State; Zip Code 1620 N Ahmagoza Dr Edinburg, TX 78541 	7 Amount of Contribution (\$) \$200.00
8	Principal occu Bus.man	pation / Job title (See Instructions) 9 Employer (See Instructions)	1.1111
	Date 10/25/2021	Full name of contributor out-of-state PAC (ID#:) Dimas, Edward Contributor address; City; State; Zip Code 1501 Heritage Oaks rd Edinburg, TX 78539	Amount of Contribution (\$) \$250.00
	Principal occu Bus Man	pation / Job title (See Instructions) Employer (See Instructions)	
	Date 10/25/2021	Full name of contributor out-of-state PAC (ID#:) Duffey, Shelly Contributor address; City; State; Zip Code 123 E Rogers Rd Edinburg, TX 78541	Amount of Contribution (\$) \$100.00
	Principal occu Bus Man	pation / Job title (See Instructions) Employer (See Instructions)	,
	Date 10/25/2021	Full name of contributor out-of-state PAC (ID#:) EZ Cuts LLC Contributor address; City; State; Zip Code 100 E Nolana Ave St 170 Mc Allen, TX 78501	Amount of Contribution (\$) \$140.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	
	Date 10/25/2021	Full name of contributor out-of-state PAC (ID#:) Edgar Vasquez Enterprises Contributor address; City; State; Zip Code P.O Box 173 Linn, TX 78563	Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	
 		in the state of th	· · · · · · · · · · · · · · · · · · ·

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/14 Rpt: 9/63 2 FILER NAME Filer ID Molina, Richard 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/25/2021 Edward Hernandez Tax Service \$500.00 6 Contributor address; City; State; Zip Code 309 W Nolana Edinburg, TX 78504 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 **G&S Glass** \$100.00 Contributor address; City; State; Zip Code 616 N Closner Blvd. Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 Garza, Patricio \$400.00 Contributor address; City; State; Zip Code 1212 S. 9th Ave. Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Man** Date Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: 10/25/2021 Garza, Veronica \$200.00 Contributor address; City; State; Zip Code 2020 W Saginaw Ave Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 Golden Property \$200.00 Contributor address; City; State; Zip Code 4119 Crosspoint Blvd Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETA	ARY POLITICAL CONTRIBUTIO	NS	SCHEDUI	E A1
The Instruc	tion Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/63	
2 FILER NAME Molina, Richa	urd		3 Filer ID	
4 Date 10/25/2021	 Full name of contributor out-of-state PAC (ID#:_ Hinojosa, Atanacio Contributor address; City; State; Zip Code 4429 Ensenada Ave McAllen, TX 78504)	7 Amount of Contribution (\$)	\$200.00
8 Principal occup Bus Man	oation / Job title (See Instructions)	9 Employer (See Instructions))	
Date 11/03/2021	Contributor address; City; State; Zip Code 201 Rio Grande Dr . Mission , TX 78572		Amount of Contribution (\$)	\$2,500.00
Principal occur Bus Man	oation / Job title (See Instructions)	Employer (See Instructions)	
Date 11/19/2021	Full name of contributor out-of-state PAC (ID#:_ Infinity Custom Construction Contributor address; City; State; Zip Code 3205 W Alberta Rd)	Amount of Contribution (\$)	\$500.00
Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions)	
Date 11/09/2021	Full name of contributor out-of-state PAC (ID#:_ Jorge L Salinas Camp Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$1,000.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Date 11/19/2021	Full name of contributor out-of-state PAC (ID#:_ Kasan, Pratiba Contributor address; City; State; Zip Code 312 W. Nolana loop Pharr, TX 78577		Amount of Contribution (\$)	\$1,000.00
Principal occu Bus Owner	pation / Job title (See Instructions)	Employer (See Instructions Dr.)	
230 0 11101				

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/14 Rpt: 11/63 2 FILER NAME Filer ID Molina, Richard 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 10/25/2021 Khush Lp \$500.00 6 Contributor address; City; State; Zip Code 2006 S Closner Blvd Edinburg, TX 78539 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 Kianikhozodani, Gholam \$2,500.00 Contributor address; City; State; Zip Code P.O.Box 720206 Mcallen, TX 78504 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus. Man Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 11/03/2021 LS Investments \$2,500.00 Contributor address; City; State; Zip Code 812 E Sundown McAllen, TX 78503 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 Law Office of Agustin Hernandez \$300.00 Contributor address; City; State; Zip Code 213 Interstate 2 Suite A Pharr, TX 78577 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date Amount of Contribution (\$) out-of-state PAC (ID#: 10/25/2021 Legacy Chapels \$1,000.00 Contributor address; City; State; Zip Code 4610 S Jackson Rd Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions)

WUNEI	ARY POLITICAL CONTRIBUTION	NS 	SCHEDUL	.E A1
The Instruc	ction Guide explains how to complete this fo	rm.	Total pages Schedule A1: Sch: 9/14 Rpt: 12/63	
FILER NAME Molina, Richa	ard	3	Filer ID	
Date 11/03/2021	 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$)	\$2,500.00
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Date 11/03/2021	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$2,500.00
Principal occu Bus Man	upation / Job title (See Instructions)	Employer (See Instructions)		
Date 11/19/2021	Full name of contributor out-of-state PAC (ID#: Los Lagos Development Contributor address; City; State; Zip Code 302 E Coma Ave		Amount of Contribution (\$)	\$2,500.00
Principal occu	Hidalgo, TX 78557 Upation / Job title (See Instructions)	Employer (See Instructions)		
Date 10/25/2021	Contributor address; City; State; Zip Code 943 N 8Th)	Amount of Contribution (\$)	\$100.00
Principal occu Bus Man	Edinburg, TX 78541 upation / Job title (See Instructions)	Employer (See Instructions)	:	
Date 10/25/2021	Full name of contributor out-of-state PAC (ID#:Luna, Ruben Contributor address; City; State; Zip Code 943 N 8Th		Amount of Contribution (\$)	\$350.00
Principal occu	Edinburg, TX 78541 upation / Job title (See Instructions)	Employer (See Instructions)	 	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/14 Rpt: 13/63 2 FILER NAME Filer ID Molina, Richard 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/25/2021 McGurk, Robert \$50.00 6 Contributor address; City; State; Zip Code 301 Enfield Rd Edinburg, TX 78539 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 Molina, Jesus \$100.00 Contributor address; City; State; Zip Code 31066 N Epw 281 Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/03/2021 Montemayor, David \$1,000.00 Contributor address; City; State; Zip Code 619 N Alteza Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 11/03/2021 Omariam MGMT \$1.800.00 Contributor address; City; State; Zip Code 6900 N 10th St STE 8 McAllen, TX 78504 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/03/2021 P&S Construction \$1,000.00 Contributor address; City; State; Zip Code 407 N M Rd Edinburg, TX 78542 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETA	ARY POLITICAL CONTRIBUTIO	NS	SCHEDUI	LE A1
The Instruc	tion Guide explains how to complete this fo	orm.	Total pages Schedule A1: Sch: 11/14 Rpt: 14/63	
2 FILER NAME Molina, Richa	ırd	3	3 Filer ID	
10/25/2021	 Full name of contributor out-of-state PAC (ID#:	7 Amount of Contribution (\$)	\$300.00	
8 Principal occup	Mcallen, TX 78501 action / Job title (See Instructions)	9 Employer (See Instructions)		
Date 10/25/2021	Full name of contributor out-of-state PAC (ID#:_Quintanilla, Alfonso (Mr.) Contributor address; City; State; Zip Code 100 E Emory Ave Edinburg, TX 78539)	Amount of Contribution (\$)	\$200.00
Principal occup Engineer	oation / Job title (See Instructions)	Employer (See Instructions)	=	
Date 10/25/2021	Full name of contributor out-of-state PAC (ID#:_ R.E. Garcia Contributor address; City; State; Zip Code 116 North 12th)	Amount of Contribution (\$)	\$100.00
Principal occur	Edinburg, TX 78541 pation / Job title (See Instructions)	Employer (See Instructions)		
Date 11/03/2021	Full name of contributor out-of-state PAC (ID#:_ Rafols, Rafael (Dr.) Contributor address; City; State; Zip Code 2701 Santa Laura		Amount of Contribution (\$)	\$1,600.00
Principal occup	Mission, TX 78572 pation / Job title (See Instructions)	Employer (See Instructions)		
Date 10/25/2021	Full name of contributor out-of-state PAC (ID#:_ Reys Premiere Const. Contributor address; City; State; Zip Code 2612 N M rd Edinburg, TX 78542		Amount of Contribution (\$)	\$100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	<u></u>	
<u></u>				

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 12/14 Rpt: 15/63 2 FILER NAME 3 Filer ID Molina, Richard 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 10/25/2021 Ruby Casas Insurance \$500.00 6 Contributor address; City; State; Zip Code 702 N Clsoner Blvd Edinburg, TX 78541 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 Saenz, Christina \$40.00 Contributor address; City; State; Zip Code 501 Haltic Ave Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus Man Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/19/2021 Simon & Simon Radiator sales \$300.00 Contributor address; City; State; Zip Code 121 W Palm Dr Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2021 \$1,000.00 Spamer, Joaquin Contributor address; City; State; Zip Code 6800 S International PKWY SUITE 10 MCALLEN, TX 78503 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus, Man Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ 11/19/2021 TREVINO, CARLOS \$2,000.00 Contributor address; City; State; Zip Code 806 Colorado ct Mission, TX 78572 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus, Man

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/14 Rpt: 16/63 3 Filer ID FILER NAME Molina, Richard 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/25/2021 \$2,500.00 Toic, John (Mr.) 6 Contributor address; City; State; Zip Code 49 Armond Way Hope, RI 02831 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Bus Man Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$2,500.00 10/27/2021 Torres, Fadi Contributor address; City; State; Zip Code 6900 N 10th St Suite b McAllen, TX 78501 Principal occupation / Job title (See Instructions) Employer (See Instructions) Dr Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$100.00 10/25/2021 Torres, Rene Contributor address; City; State; Zip Code 241 Ric Mar St Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus Man Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor 10/25/2021 \$100.00 Vera, Frank Contributor address; City; State; Zip Code 2220 River Drive Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus Man Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$3,500.00 10/25/2021 Vesser Contractors Contributor address; City; State; Zip Code 10620 Cibolo Dr. Edinburg, TX 78542 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	ARY POLITICAL CONTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this form	1 Total pages So Sch: 14/14 R			
2	FILER NAME			3 Filer ID		·
	Molina, Rich	ard				
4	Date 10/25/2021	5 Full name of contributor out-of-state PAC (ID#: Yarra, Subbaro		7 Amount of Cor	ntribution (\$)	\$1,500.00
		6 Contributor address; City; State; Zip Code 7703 N 2nd Ln Mcallen, TX 78504				
8	Principal occu Dr	pation / Job title (See Instructions) 9	5)			
Т	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Cor	ntribution (\$)	
	11/02/2021	Yarra, Subbaro			(,,	\$2,900.00
		Contributor address; City; State; Zip Code				•
		7703 N 2nd Ln				
		Mcallen, TX 78504				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Dr					
Fo	rms provided	by Texas Ethics Commission www.ethics.sta	afa fy lis		Version V1	1 ah070fn

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I 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 F1:	2 FILER NAME 3 Filer ID
Sch: 1/45 Rpt: 18/63	Molina, Richard
4 Date	5 Payee name
11/26/2021	492 BBq
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$70.62	1703 W Trenton
	Edinburg, TX 78539
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Food
	1 332
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Date	Payee name
11/01/2021	Academy Sports
Amount (\$)	Payee address; City; State; Zip Code
\$183.97	651 E Trenton Rd,
	Edinburg, TX 78539
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Event
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	2011011011011011011011011011011011011011
Data	
Date	Payee name
11/01/2021	Academy Sports
Amount (\$)	Payee address; City; State; Zip Code
\$96.31	651 E Trenton Rd,
	Edinburg, TX 78539
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Event
	Office country of the last of
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comm Credit Card Payment			Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category)				•	
			The Instruction Guide ex	kplains how to c	omplete ti	his form.		
1	Total pages Schedule F1: Sch: 2/45 Rpt: 19/63		R NAME na, Richard			3	Filer ID	
4	Date	5 Paye	e name					
	11/22/2021		lemy Sports					
6	Amount (\$)	7 Paye	e address; City;	State; Zip C	ode			
	\$224.79	651	E Trenton Rd,					
			burg, TX 78539		·			
8	PURPOSE OF		Ory (See Categories listed at the top of	of this schedule)		scription		
	EXPENDITURE	Eve	nt Expense		_ =	Check if Austin, T	tside of Texas. Complete Schedule T 'X, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		late/Officeholder name	Office so	ught		Office held	
	Date	Paye	e name					
	11/12/2021	Agu	lars Meat Market					
	Amount (\$)	Paye	e address; City;	State; Zip C	ode			
	\$112.46	130	East University					
		Edir	burg, TX 78539					
	PURPOSE	(a) Cate	GOTY (See Categories listed at the top of	of this schedule)	(b) De	scription		
	OF EXPENDITURE		l/Beverage Expense	,			tside of Texas, Complete Schedule T	- .
					_		X, officeholder living expense	
					BB	iŲ		
	Complete ONLY if direct	Candi	late/Officeholder name	Office	Loulot		Office held	
	expenditure to benefit C/OI		nateroniceriolder name	Office so	ugnt		Office held	
	Date	Paye	e name					
	10/26/2021	Alar	iz, Leonor					
	Amount (\$)	Paye	e address; City;	State; Zip C	ode			
	\$625.00	320	Round up Circle					
		Edir	burg, TX 78539					
\vdash	PURPOSE		GOTY (See Categories listed at the top of	of this schedule)	(b) De	scription		· · · · · · · · · · · · · · · · · · ·
	OF EXPENDITURE		ries/Wages/Contract Labor	i tilo sericadic)		Check if travel ou	tside of Texas. Complete Schedule T	
	EXPENDITORE		-		_		X, officeholder living expense	
1					Co	ntract Labor	•	
_	Complete ONLY if altered		doto/Officehalder na	Offi · ·			0461-12	
	Complete ONLY if direct expenditure to benefit C/OI		date/Officeholder name	Office so	ugnt		Office held	
_							<u></u>	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (April 2) a category not listed above)

	Candidate/Officenoider/Political	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 3/45 Rpt: 20/63	Molina, Richard
4	Date	5 Payee name
	11/15/2021	Alonso, Arnold
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3719 Reel David
		Brownville , TX 78521
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPLINITIONS	Contract Mark
l		Contract Work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Date	Dalvas nome
	11/01/2021	Payee name Armando Pizza
_		
	Amount (\$) \$86.85	Payee address; City; State; Zip Code 1902 W University
	Ψ00.05	1302 W Gillversity
		Edinburg, TX 78539
_		
	PURPOSE OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/15/2021	Armando Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.85	1902 W University
		Edinburg, TX 78539
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		food
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/45 Rpt: 21/63	Molina, Richard
4	Date	5 Payee name
	11/18/2021	Bank of America
6	Amount (\$)	7 Payee address; City; State; Zip Code
_	\$50.15	1500 W. University Dr.
		2000 W Sintersity 2
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas, Complete Schedule T.
		Checks Checks
l		CHECKS
Ļ		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	11/17/2021	Bobcat Pride Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	2600 E Wisconsin Rd
		Edinburg, TX 78542
_		-
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Capatilla vision of Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	D-4-	
	Date	Prayee name
	11/08/2021	Brand Boosters
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	301 N McColl Rd Suite G
		McAllen, TX 78501
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Prints
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	л

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donation

Fees
Food/Beverage Expense
Gift/Awards/Memorials Ex

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	_
_	Sch: 5/45 Rpt: 22/63	Molina, Richard	
4	Date	5 Payee name	
	11/23/2021	Brand Boosters	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5,000.00	301 N McColl Rd Suite G	
	73,213.00		
		McAllen, TX 78501	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		prints	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	11/17/2021	Carmelita's Mexican Restaurant	
⊢		Payee address; City; State; Zip Code	
	Amount (\$)		
	\$400.00	1026 E. University Dr.	
		Edinburg, TX 78539	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF		
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Event	
⊢	Olate ONII V if diseast	Candidate/Officeholder name Office sought Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	\mathbf{J}	
L			
	Date	Payee name	
	12/02/2021	Chick-Fil-A	
┢	Amount (\$)	Payee address; City; State; Zip Code	
	\$85.38	1201 W. University Dr.	
		Edinburg, TX 78539	
┢	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	
		Food	
1			
\vdash	Complete ONLY if direct	Condidate/Officeholder name Office sought Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
L	- portation to borrow Oro		
1			
1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense Legal Services Candidate/Officeholder/Political Committee 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: 2 FILER NAME Filer ID Sch: 6/45 Rpt: 23/63 Molina, Richard 4 Date 5 Payee name 11/04/2021 City of Edinburg 6 Amount (\$) Payee address; State; Zip Code City; \$250.00 415 West University Drive Edinburg, TX 78539 8 **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 **Edinburg Cares** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/22/2021 Columbia Sport Amount (\$) Payee address; City; State; Zip Code \$112.92 5001 E Expressway 83 #844, Mercedes, TX 78570 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense shirts (Event) Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/01/2021 Cruz, Raul Amount (\$) Payee address; City; State; Zip Code \$83.00 213 S 24th McAllen, TX 78501 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Contract Labor 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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	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 F1:	2 FILER NAME 3 Filer ID
	Sch: 7/45 Rpt: 24/63	Molina, Richard
4	Date	5 Payee name
	11/23/2021	Cultura Agency
6	Amount (\$) \$4,000.00	7 Payee address; City; State; Zip Code 3223 W Alberta Rd
		Edinburg, TX 78539
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 radio, ad
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	11/03/2021	Diana's Mexican Cafe
	Amount (\$) \$287.62	Payee address; City; State; Zip Code 3012 N Closner Blvd
		Edinburg, TX 78539
i i	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 Food
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
L	11/08/2021	ENHS Band Boosters
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 3101 N Closner Blvd.
L		Edinburg, TX 78541
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Printing Expense Printing Expense Printing Expense Printing Expense Printing Expense Printing Expense Travel in District Travel Out of District 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
	Sch: 8/45 Rpt: 25/63		Molina, Richard
4	Date	5	Payee name
	10/26/2021		Facebk Advertising
6	Amount (\$) \$600.00	7	Payee address; City; State; Zip Code 1 Hacker way Menlo Park, CA 94025
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 Ad
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office sought Office held
	Date		Payee name
	11/01/2021		Facebk Advertising
	Amount (\$) \$69.27		Payee address; City; State; Zip Code 1 Hacker way
			Menlo Park, CA 94025
	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 Ad
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office sought Office held
	Date 11/29/2021		Payee name Facebk Advertising
	Amount (\$) \$600.00		Payee address; City; State; Zip Code 1 Hacker way
		L	Menlo Park, CA 94025
	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 Ad
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	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 F1:	2 FILER NAME 3 Filer ID
	Sch: 9/45 Rpt: 26/63	Molina, Richard
4	Date	5 Payee name
	12/01/2021	Facebk Advertising
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.87	1 Hacker way
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Ad
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Daves name
	11/24/2021	Payee name Fiscal, Edith
ŀ	Amount (\$)	Payee address; City; State; Zip Code
	\$380.00	918 E Van Week St
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		taquizas
		taqui = 0.0
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨		
	Date	Payee name
	11/19/2021	Flores, Mary
	Amount (\$)	Payee address; City; State; Zip Code
	\$431.00	724 W Caffery St
l		
		Pharr, TX 78577
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor
		Contract Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
<u> </u>		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Fees
Fond/Reverage 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:	2 FILER NAME 3 Filer ID
	Sch: 10/45 Rpt: 27/63	Molina, Richard
4	Date	5 Payee name
	11/29/2021	Flores, Mary
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$316.00	724 W Caffery St
ĺ		
		Pharr, TX 78577
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXI LIVETIONE	Check if Austin, TX, officeholder living expense
		Contract Labor
Ļ		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
L	<u> </u>	
	Date	Payee name
	11/08/2021	Flying J
	Amount (\$)	Payee address; City; State; Zip Code
	\$83.00	1305 E Monte Cristo Rd,
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Drinks
		Dilliks
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
<u> </u>	12/01/2021	Garza, Carmina
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	4028 South 28 th
L		Edinburg, TX 78541
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract
		Contract
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
┝		
L		

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committ Credit Card Payment			Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract L				e		Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Credit Card Payment		The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1: Sch: 11/45 Rpt: 28/63		FILER NAMI Molina, Ric						3	Filer ID
4			·						<u> </u>	
4	Date 11/15/2021		Payee name Garza, Iren							
6	Amount (\$)	7	Payee addre	ess; City;	State:	; Zip Cod	le			
	\$1,000.00		1018 E. Mo	cIntyre						
			Edinburg, 7	TX 78539						
8	PURPOSE OF EXPENDITURE			See Categories listed at th ages/Contract La		nedule)	(b)	므	n, TX	side of ⊤exas. Complete Schedule T. K, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	(Office soug	ht			Office held
_	Date		Payee name	5					•	
ĺ	11/22/2021		Garza, Irer	ne (Mrs.)						
	Amount (\$)		Payee addre	ess; City;	State	; Zip Cod	le			
	\$1,500.00		1018 E. Mo	cintyre						
				•						
			Edinburg,	TX 78539						
	PURPOSE	(a)	Category (See Categories listed at th	ne top of this sch	nedule)	(b)	Description		
	OF EXPENDITURE		Salaries/W	/ages/Contract La	abor	·		-	n, TX	side of Texas. Complete Schedule T. K, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	(Office soug	jht		•	Office held
	Date		Payee name	9						
	11/09/2021		Garza, Rai	mon (Mr.)						
	Amount (\$) \$2,000.00		Payee addre	-	State	; Zip Coo	le			
			Edinburg,	TX 78539						
	PURPOSE OF EXPENDITURE	(a)		See Categories listed at the lages/Contract La		nedule)	(b)	LI	n, TX	side of Texas. Complete Schedule T. K, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	(Office soug	jht			Office held

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor					Transportation Equipment & Related Ex Travel in District Travel Out of District OTHER (enter a category not listed about		
				The Instruction Guide explai	ins how to d	omple	ete this form.	,		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	
	Sch: 12/45 Rpt: 29/63		Molina, Rich	ard						
4	Date	5	Payee name							
	11/29/2021		Garza, Ram	on (Mr.)						
6	Amount (\$)	7	Payee addres	s; City; St	ate; Zip (Code				· · · · · · · · · · · · · · · · · · ·
	\$2,000.00		813 S 21st							
			Edinburg, TX	X 78539						
8	PURPOSE	(a)	Category (se	e Categories listed at the top of this	cohodula)	(b)	Description			
	OF			ges/Contract Labor	s scriedule)	`		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE	i		9					officeholder living expense	
							Contract Lab	or		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	Office so	ought			Office held	
	Date		Payee name				111111111111111111111111111111111111111			
	11/29/2021		Gutierrez, A	raceli						
	Amount (\$)		Payee addres	ss; City; St	ate; Zip (Code				********
	\$300.00		5608 Sugarl	and						
			Edinburg, TX	X 78539						
	PURPOSE	(a)	Category (Se	e Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE			ges/Contract Labor	.,				de of Texas, Complete Schedule T.	
	EXI ENDITORE			Check if Austin, TX, officeholder living expense Contract Labor						
							Contract Lab	or		
┡	Carrolata ONII V if dinant	Ļ	2	ceholder name	0#:		1		O#: 11-1	
	Complete ONLY if direct expenditure to benefit C/OI		zandidate/Offic	cenoider name	Office so	ougnt			Office held	
⊨								····		
	Date	1	Payee name							
<u> </u>	12/02/2021		H.E.B							
	Amount (\$)		Payee addres	r	ate; Zip (Code				
	\$16.64	ĺ	1212 S Clos	sner Biva,						
			Edinburg, T	X 78539						
	PURPOSE OF		•	e Categories listed at the top of this	schedule)	(b)	Description			
	EXPENDITURE		Food/Bevera	age Expense			<u> </u>		de of Texas. Complete Schedule T. officeholder living expense	
							Waters	, ,,,,	omodificati sving expense	
										,
\vdash	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ought			Office held	
	expenditure to benefit C/OI	4								
Т										<u></u>
L										

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide explain	•	es/Contract Labor	OTHER (enter a category not listed	above)			
1	Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID				
Ĺ	Sch: 13/45 Rpt: 30/63	Molina, Ric								
4	Date	5 Payee name	e							
	11/04/2021	Hello RGV								
6	Amount (\$) \$600.00	7 Payee addr 3413 N 22		e; Zip Code						
		Mcallen, T	X 78501							
8	PURPOSE	(a) Category (See Categories listed at the top of this s	chedule) (b) Description					
	OF EXPENDITURE	Advertising	g Expense		<u> </u>	outside of Texas. Complete Schedule T.				
				1	_	n, TX, officeholder living expense				
					FaceBook					
9	Complete ONLY if direct	Candidate/Ot	fficeholder name	Office sough	t	Office held				
Ĺ	expenditure to benefit C/OI		modified fidite	Since Sough		Since new				
Γ	Date	Payee nam	e							
	11/09/2021	I Shop RG	iV							
	Amount (\$)	Payee addr	ess; City; Sta	te; Zip Code			·			
	\$1,300.00	1919 Ash Cir.								
ĺ										
		Edinburg,								
	PURPOSE OF		See Categories listed at the top of this s	schedule) (b	Description	autoide of Toyon Consulate Oaked 1- T				
	EXPENDITURE	Printing Ex	xpense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense AdS					
	Complete ONLY if direct		fficeholder name	Office sough	t	Office held				
	expenditure to benefit C/O	H 					·			
	Date	Payee nam								
	10/26/2021	Igescias, S	<u> </u>							
	Amount (\$)	Payee addr	ress; City; Sta	te; Zip Code	•					
	\$500.00	1025 W. F	ay							
L		Edinburg,	TX 78539							
	PURPOSE		(See Categories listed at the top of this	schedule) (k	Description					
	OF EXPENDITURE	Salaries/V	Vages/Contract Labor		<u></u>	outside of Texas. Complete Schedule T.				
					Contract Lab	n, TX, officeholder living expense				
ĺ					Contract Lab	JOI				
┝	Complete ONLY if direct	Candidate/O	fficeholder name	Office sough	ıt	Office held				
	expenditure to benefit C/O									
\vdash										
1										

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 OTHER (enter a category not listed above)

Candidate/Officeholder/Political Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID			
	Sch: 14/45 Rpt: 31/63	Molina, Ric									
4	Date	5 Payee name	е								
	11/01/2021	Igescias, S	Sylvia								
6	Amount (\$) \$100.00	7 Payee addr 1025 W. F Edinburg,	ay	State; Zip C	ode						
8	PURPOSE OF EXPENDITURE		See Categories listed at the /ages/Contract Lab		(b)	<u> </u>	, TX, c	e of Texas. Complete Schedule T. officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office held			
	Date	Payee name	e								
	11/29/2021	Jason's De	eli								
	Amount (\$) \$176.22		niversity Dr.	State; Zip C	ode						
		Edinburg,			- 						
	PURPOSE OF EXPENDITURE		See Categories listed at the erage Expense	top of this schedule)	(b)			e of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office held			
	Date	Payee name	e								
	11/29/2021	Jasso, Yol	anda								
	Amount (\$) \$750.00	Payee addr 1412 Sam	-	State; Zip C	ode						
		Edinburg,	TX 78539								
	PURPOSE OF EXPENDITURE		See Categories listed at the /ages/Contract Lab		(b)		ı, TX, c	e of Texas. Complete Schedule T. Ifficeholder living expense			
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office held			
								· · · · · · · · · · · · · · · · · · ·			

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Political Credit Card Payment	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 F1:	2 FILER NAME 3 Filer ID
_	Sch: 15/45 Rpt: 32/63	Molina, Richard
4	Date	5 Payee name
	11/08/2021	La Cabana Pollos Asados
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.02	3502 S. Sugar Closner Blvd.
		Edinburg, TX 78539
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/17/2021	Lamar Advertising
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,251.86	P.O. Box 96030
	. ,	
		Baton Rouge, LA 70896
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
ŀ		Ads
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-i
H	Date	Payee name
ĺ	11/19/2021	Law office of Carlos Garcia
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$1,100.00	1305 E Griffin Pkwy
	+-,	
		Mission, TX 78572
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Legal Services Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Fees
L	O	Constitute (Office helder name)
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	-	
ĺ		
ĺ		

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 16/45 Rpt: 33/63	Molina, Richard
4	Date	5 Payee name
L	11/03/2021	Little Ceasar
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.13	1410 South Closner
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		1 000
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
<u> </u>	12/01/2021	Little Ceasar
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.63	1410 South Closner
		Ediah w. TV 70500
		Edinburg, TX 78539
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Reverage Fynense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	CAPERICICIE TO DETICIT C/OI	
	Date	Payee name
	11/15/2021	Los Mismos Tacos
	Amount (\$)	Payee address; City; State; Zip Code
	\$103.99	4830 S Jackson Rd
		Edinburg, TX 78539
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Tacos (Food)
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
_		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

tement Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
abor OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guid			/Contract Labor	C	THER (enter a category not listed ab	oove)
1	Total pages Schedule F1:						3 ⊢	iler ID	
	Sch: 17/45 Rpt: 34/63	Molina, R	ichard						
4	Date	5 Payee nar	ne						
	11/12/2021	Macias, (Orlando						
6	Amount (\$) \$50.00	7 Payee add	lress; City;	State; Zip	Code				
8	PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description			
	OF EXPENDITURE	Salaries/	Wages/Contract Lab	oor			ı, TX, of	of Texas. Complete Schedule T. ficeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Officeholder name	Office	sought			Office held	
Г	Date	Payee nar	ne						
	11/18/2021	Martinez	, Veronica						
	Amount (\$)	Payee add	dress; City;	State; Zip	Code				
	\$1,050.00	4420 Twi	n Cir.						
	20222		, TX 78541		Las.				
ı	PURPOSE OF EXPENDITURE	(a) Category Printing E	(See Categories listed at the Expense	top of this schedule)	(a)		n, TX, of	of Texas. Complete Schedule T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Officeholder name	Office	sought			Office held	
	Date	Payee nar	me						
l	10/28/2021	McAllen	Digital Media						
	Amount (\$) \$700.00	Payee add		State; Zip	Code				
١		Edinburg	, TX 78541						
	PURPOSE OF EXPENDITURE		(See Categories listed at the ng Expense	top of this schedule)	(b)			of Texas, Complete Schedule T. fficeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Office	sought			Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID		
	Sch: 18/45 Rpt: 35/63	Molina, Richard		
4	Date	5 Payee name		
	11/03/2021	McAllen Digital Media		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$500.00	204 E Cano		
		Edinburg, TX 78541		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Advertising Expense		
		Check if Austin, TX, officeholder living expense		
		Ad		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
3	expenditure to benefit C/OI	= ···· - ··· - ··· - ··· - · · · · · · ·		
	Date			
	11/26/2021	Payee name McAllen Digital Media		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$1,000.00	204 E Cano		
		Edinburg, TX 78541		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Advertising Expense		
		Check if Austin, TX, officeholder living expense		
		aus		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
_	Date	Dove years		
	11/30/2021	Payee name McAllen Digital Media		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$700.00	204 E Cano		
	Ψ100.00	ZOT E, OUTO		
		Edinburg, TX 78541		
	DUDDOOR			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Advertising Expense Check if Austin, TX, officeholder living expense		
		Ad		
Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI			
_	me provided by Toyee F	this Commission		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manage/Contract Labor

	Candidate/Officeholder/Politica dit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Tota	al pages Schedule F1:	2 FILER NAME 3 Filer ID	
	n: 19/45 Rpt: 36/63	Molina, Richard	
4 Date	9	5 Payee name	
10/2	29/2021	Molina, Brenda	
6 Amo	ount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	4225 N Denkhaus Blvd	
		Edinburg, TX 78541	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EX	PENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Contract Labor	
9 Con	nplete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH			
Date	^	Davisa nama	
	9 13/2021	Payee name Molina, Brenda	
Amo	ount (\$)	Payee address; City; State; Zip Code 4225 N Denkhaus Blvd	
	\$500.00	4225 N Defikriaus Bivu	
		Edinburg, TX 78541	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
ΕX	(PENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Contract Labor	
Cor	mplete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		
Dot			
Dat	e 02/2021	Payee name Molina, Brenda	
Am	ount (\$)	Payee address; City; State; Zip Code	
	\$500.00	4225 N Denkhaus Blvd	
		Edinburg, TX 78541	
ļ	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
E	OF KPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
ļ		Contract Labor	
C01	mplete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
	enditure to benefit C/O		
<u> </u>			
Į.			

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Con C Cred	sulting Expense tributions/ Donations Made By Candidate/Officeholder/Politica dit Card Payment	l Committee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Salaries	Expens /Wages	e /Contract Labor	Travel in District Travel Out of District OTHER (enter a category	/ not listed above)
	I pages Schedule F1: : 20/45 Rpt: 37/63	2 FILER NAM Molina, Ri					3 Filer ID	
	· · · · · · · · · · · · · · · · · · ·	,						
4 Date		5 Payee nam						
	05/2021	Montes, T				**********		
6 Amo	` '	7 Payee addr	=	State; Zip C	Code			
	\$200.00	3302 Pres	LWICK					
		Edinburg,	TX 78541					
8 F	PURPOSE		See Categories listed at the to	op of this schedule)	(b)	Description		
FX	OF PENDITURE	Contribution	ons/Donations Made	: Ву		Check if travel o	outside of Texas. Complete Sch	
		Candidate	/Officeholder/Politica	al Committee		Contribution	TX, officeholder living expense	e
						Continuation		
9 Com	plete ONLY if direct	Candidate/Ot	fficeholder name	Office so	Light		Office held	
	enditure to benefit C/OI		moon order marrie	Omod do	-agnt		Office field	
Date		Payee nam	e					
11/1	.5/2021	Mundo Gr	ocery n Meat					
Amo	ount (\$)	Payee addr	ess; City;	State; Zip C	ode			
	\$48.39	2510 East	Monte Cristo Rd					
		Edinburg,	TX 78542					
F	PURPOSE	(a) Category (See Categories listed at the to	op of this schedule)	(b)	Description		•
EX	OF PENDITURE	Food/Beve	erage Expense				outside of Texas. Complete Sch TX, officeholder living expense	
						Tacos	rx, unicenduer living expense	•
	plete <u>ONLY</u> if direct enditure to benefit C/OI		ficeholder name	Office so	ught		Office held	
ехре	enditure to benefit C/Oi	I						
Date		Payee nam	е					
11/2	23/2021	Murphy						
Amo	unt (\$)	Payee addr	-	State; Zip C	ode			
	\$75.00	1720 W. U	Iniversity Drive					
		Edinburg,	TX 78539					
F	PURPOSE OF		See Categories listed at the to	pp of this schedule)	(b)	Description		1.1 **
EX	PENDITURE	Food/Beve	erage Expense				outside of Texas. Complete Sch TX, officeholder living expense	
						waters drinks	5 ,	
	plete ONLY if direct		ficeholder name	Office so	ught		Office held	
expe	enditure to benefit C/O	7						

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		•	•	Polling Expe Printing Expe Salaries/Wag	nse ense ges/C	Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
			The Instruction Guid	le explains	how to com	plet		
1	Total pages Schedule F1: Sch: 21/45 Rpt: 38/63	2	FILER NAME Molina, Richard				3	Filer ID
4	Date 11/22/2021	5	Payee name Nike Factory Store					
6	Amount (\$) \$206.92	7	Payee address; City; 5001 E Expressway 83, Suite Mercedes, TX 78570		; Zip Code	Э		
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Advertising Expense	top of this sch	nedule) (I	[side of Texas. Complete Schedule T. K, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	(Office sough	nt		Office held
	Date		Payee name					
	11/01/2021		Nino, Luis (Mr.)					
	Amount (\$) \$400.00		Payee address; City; 919 E Lovett St.	State	; Zip Cod	е		
			Edinburg, TX 78541					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Salaries/Wages/Contract Lab		hedule) (<u></u>	side of Texas. Complete Schedule T. K, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	(Office soug	ht		Office held
F	Date	Ī	Payee name					
L	12/01/2021		Nino, Luis (Mr.)		. <u> </u>			
	Amount (\$) \$500.00		Payee address; City; 919 E Lovett St.	State	e; Zip Cod	е		
			Edinburg, TX 78541					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Salaries/Wages/Contract Lal	-	hedule) (—	side of Texas. Complete Schedule T. K, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	(Office soug	ht		Office held
H							-,,,-	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Reverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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 F1:	FILER NAME	3 Filer ID
	Sch: 22/45 Rpt: 39/63	Molina, Richard	
4	Date	Payee name	
	11/01/2021	Nino, Yolanda (Mrs.)	
6	Amount (\$)	Payee address; City; State; Zip Code	7,447
	\$400.00	919 E Lovett St. Edinburg, TX 78541	
8	PURPOSE OF EXPENDITURE	Calatics, Wages, Contract Eabor	utside of Texas. Complete Schedule T. TX, officeholder living expense DT
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/29/2021	Nino, Yolanda (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,750.00	919 E Lovett St. Edinburg, TX 78541	
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 11/04/2021	Payee name Orth, Donald	
	Amount (\$) \$316.00	Payee address; City; State; Zip Code 2510 W Sprague St	
		Edinburg, TX 78539	
l	PURPOSE OF EXPENDITURE	Salaries/ Wages/ Sortifiaet Eabor	utside of Texas. Complete Schedule T. TX, officeholder living expense IT
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees 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: 23/45 Rpt: 40/63	Molina, Richard
4 Date 11/01/2021	5 Payee name Ovalle, Jaime
6 Amount (\$) \$700.00	7 Payee address; City; State; Zip Code 502 Carlisle Ave., Apt. 1 Edinburg, TX 78539
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date 11/15/2021	Payee name Ovalle, Jaime
Amount (\$) \$700.00	Payee address; City; State; Zip Code 502 Carlisle Ave., Apt. 1 Edinburg, TX 78539
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 11/29/2021	Payee name Ovalle, Jaime
Amount (\$) \$700.00	Payee address; City; State; Zip Code 502 Carlisle Ave., Apt. 1 Edinburg, TX 78539
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Firiting Expense Firiting Expense Frinting Expense Salaries/Wages/Contract Labor					Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
				The Instruction Guide explains	how to co	omple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID		
	Sch: 24/45 Rpt: 41/63		Molina, Rich	nard							
4	Date	5	Payee name								
	11/29/2021		Palenque G	rill							
6	Amount (\$)	7	Payee addres	ss; City; State	e; Zip Co	ode					
	\$301.10		615 E Trent	•	•						
		l	Edinburg, T	Y 78530							
_						145					
8	PURPOSE OF	(a)		ee Categories listed at the top of this sc	hedule)	(b)	Description		ida at Taura Cannolata Cabadula T		
	EXPENDITURE		Event Expe	nse			<u> </u>		de of Texas. Complete Schedule T. officeholder living expense		
l							Event	, 174	omeeneder living expense		
9	Complete ONLY if direct	Ц		ceholder name	Office sou	ıaht			Office held		
	expenditure to benefit C/O		Sarialaate/Oni	centidel hame		agin			Office Field		
	Date		Payee name								
	11/30/2021		Pena, Ana								
	Amount (\$)		Payee addres	ss; City; State	; Zip Co	ode					
	\$160.00		222 N Pase	-	•						
				•							
			Mission, TX	78572							
	PURPOSE	(a)	Category (Se	ee Categories listed at the top of this sc	hedule)	(b)	Description				
	OF			ages/Contract Labor				outsi	de of Texas, Complete Schedule T.		
	EXPENDITURE	ļ		Ť			_		officeholder living expense		
							Contract Lab	or			
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office sou	ught			Office held		
	expenditure to benefit C/OI	7									
	Date		Payee name								
	11/01/2021		Point Blank	Political							
	Amount (\$)	\vdash	Payee addres	ss; City; State	e; Zip Co	ode				*****	
	\$335.00		238 Wilshirt	•	,,						
	4-5-100										
			Cassalbarn	, EL 22707							
		_	Casselberry								
	PURPOSE OF	(a)		ee Categories listed at the top of this so	hedule)	(b)	Description				
	EXPENDITURE		Polling Expe	ense			<u></u>		de of Texas. Complete Schedule T. officeholder living expense		
							polls	, , ,,,	omeenoider living expense		
		1					l				
	Complete ONLY if direct	Ц	Candidate/Offic	ceholder name	Office sou	laht			Office held		
	expenditure to benefit C/O		Januara Olli	osholder harne	J.1100 300	agiit			Onice riciu		
L											

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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/Political Credit Card Payment	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 F1:	2 FILER NAME 3 Filer ID
	Sch: 25/45 Rpt: 42/63	Molina, Richard
4	Date	5 Payee name
	11/30/2021	Point Blank Political
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$340.00	238 Wilshirt Blvd., #155
	·	
		Casselberry, FL 32707
0	BUDDOCT	·
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Ad
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	12/01/2021	Point Blank Political
	Amount (\$)	Payee address; City; State; Zip Code
	\$380.00	238 Wilshirt Blvd., #155
	4000.00	
		Casselberry, FL 32707
\vdash	DUDDOCT	·
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, afficeholder living expense
		ad
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Payee name
	11/19/2021	Quintanilla, Mireya
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,800.00	1017 Sundance
	·	
		Edinburg, TX 78541
┞	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract labor
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
1		
L		

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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 F1:	FILER NAME	3 Filer ID
	Sch: 26/45 Rpt: 43/63	Molina, Richard	
4	Date	Payee name	
	11/26/2021	Radio United	
6	Amount (\$) \$892.50	Payee address; City; State; Zip Code 1201 N. Jackson Rd., Suite 900	
		McAllen, TX 78501	
8	PURPOSE OF EXPENDITURE	/ dvertising Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/22/2021	Ramos, Aimee	
	Amount (\$) \$270.00	Payee address; City; State; Zip Code 902 S. 19th Ave.	
		Edinburg, TX 78539	
	PURPOSE OF EXPENDITURE	Salaries/ Wages/ Contract Eabor	outside of Texas. Complete Schedule T. TX, officeholder living expense DT
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date 11/30/2021	Payee name Ramos, Aimee	
	Amount (\$) \$240.00	Payee address; City; State; Zip Code 902 S. 19th Ave.	
L		Edinburg, TX 78539	
	PURPOSE OF EXPENDITURE	Salaries/ Wages/Contract Eabor	outside of Texas. Complete Schedule T. TX, officeholder living expense D f
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 27/45 Rpt: 44/63	Molina, Richard
4	Date	5 Payee name
l	12/03/2021	Rio Outdoor
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1217 S Closner Blvd
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense Ad
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
┝	Date	Dolvo namo
1	12/01/2021	Payee name Rios, Elizabeth
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.00	213 S 24th
		McAllen, TX 78501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	11/28/2021	Rios, Ruben
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$110.00	213 A 24th
	Ψ110,00	
		Meallon TV 79501
L		Mcallen, TX 78501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Salaries/Wages/Contract Lahor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
Т	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	н
Н		
1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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 F1:	FILER NAME	3 Filer ID
	Sch: 28/45 Rpt: 45/63	Molina, Richard	
4	Date	Payee name	
	11/29/2021	Rodriguez, Brenda (Mrs.)	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	5608 SugarLand Edinburg, TX 78539	
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin	, TX, officeholder living expense
		Contract Lab	OI
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/22/2021	Rodriguez, Frank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	317 N Closner	
		Edinburg, TX 78541	
	PURPOSE OF EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule ⊤. , TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	****
	12/02/2021	Rodriguez, Lupe (Mr.)	
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 906 W. Puente St	
		Edinburg, TX 78541	
	PURPOSE OF EXPENDITURE	Salaries/ Wages/ Contract Eabor	outside of Texas. Complete Schedule T. , TX, officeholder living expense Of
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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/Political Credit Card Payment	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 F1:	2 FILER NAME 3 Filer ID
	Sch: 29/45 Rpt: 46/63	Molina, Richard
4	Date	5 Payee name
	11/29/2021	Rodriguez, Rosendo (Mrs.)
ь	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	5608 SugarLand
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
_	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/22/2021	Rojas, Gabriela
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	6701 N 7th Ct. Apt C
		·
		McAllen, TX 78504
		-
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Contract labor
		Contract labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitare to benefit or or	
	Date	Payee name
	10/29/2021	Salinas, Pedro
_	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	2318 Dinastia Dorada
	\$600.00	2310 Dillastia Dolada
		Edinburg, TX 78541
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C			nmittee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	oense	Polling Ex Printing E	xpense Expens			Travel in District Travel Out of District OTHER (enter a category not listed about	
	Credit Card Payment		The Instruction Guide explains how to complete this form.					te this form.			
1	Total pages Schedule F1:	2	FILER NAME	Ξ					3	Filer ID	
	Sch: 30/45 Rpt: 47/63		Molina, Ric	hard							
4	Date	5	Payee name								
	11/29/2021		Sams								
6	Amount (\$)	7	Payee addre	ss; City;	State:	Zip Co	ode				
	\$93.12		7601 N 10t		,	•					

			McAllen, T	x 78504							
8	PURPOSE	(2)			·		(b)	Description			
ľ	OF	(α)		ee Categories listed at the to	op of this sch	edule)	(10)	Description Check if travel	outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE		roou/beve	rage Expense						, officeholder living expense	
								Drinks water:	s,		
9	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ught			Office held	
	expenditure to benefit C/O	4									
	Date	Г	Payee name								
	11/15/2021		Sanchez, J	ohn (Mr.)							
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	ode				
	\$350.00		121 Northe	n Dancer							
			Edinburg, T	X 78539							
	PURPOSE	(2)					(h)	Description			
	OF	۱۵۶	Advertising	ee Categories listed at the t	op of this sch	edule)	(6)	-	outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE	ł	Advertising	Схрепзе				<u></u>		, officeholder living expense	
								Design			
	•										
	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ught			Office held	
	expenditure to benefit C/OI	1									
	Date		Payee name	· · · · · · · · · · · · · · · · · · ·							
	11/01/2021		Sanchez, J	orge							
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	ode				
	\$500.00		308 Keysto	ne St							
		ŀ									
ŀ			Edinburg, 1	TX 78541							
\vdash	PURPOSE	(a)		See Categories listed at the t	on of this set	adula)	(b)	Description			
	OF	 		ages/Contract Lab		-uuic)			outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE			3						, officeholder living expense	
								Contract Lab	or		
		$ldsymbol{ldsymbol{ldsymbol{ldsymbol{L}}}$					<u> </u>				
	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ught			Office held	
	expenditure to benefit C/Ol										
				· 							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees 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/Political Credit Card Payment	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 F1:	2 FILER NAME 3 Filer ID
	Sch: 31/45 Rpt: 48/63	Molina, Richard
4	Date	5 Payee name
	11/22/2021	Serna, Norma
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	917 Stonehaven
		Edinburg, TX 78541
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor
_	Consolida ONUMERICA	Out that 10th about 10
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/30/2021	Silva, Ramiro
	Amount (\$)	Payee address; City; State; Zip Code
	\$210.00	302 N Saint Mary
		Mission, TX 78572
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	11/03/2021	Solis, Roel (Mr.)
_	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 2671
	4000.00	
		Edinburg, TX 78540
_	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1

SCHEDULE F1

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Offit/Awards/Memorials Expense Frinting Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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 F1:		B Filer ID
•	Sch: 32/45 Rpt: 49/63	Molina, Richard	, the is
4	Date 11/03/2021	Payee name Solis, Roel (Mr.)	
6	Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 2671 Edinburg, TX 78540	
8	PURPOSE OF EXPENDITURE	Calarics/ Wages/ Contrast Eabor	ntside of Texas. Complete Schedule T. 'X, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 10/26/2021	Payee name Solis, Roel	
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O.Box 2671 Edinburg, TX 78540	
	PURPOSE OF EXPENDITURE	Salaries/ Wages/ Contract Eabor	ntside of Texas, Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/03/2021	Solis, Roel	
	Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O.Box 2671	· · · · · · · · · · · · · · · · · · ·
		Edinburg, TX 78540	
	PURPOSE OF EXPENDITURE		ntside of Texas. Complete Schedule T. X, officeholder living expense r
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donati Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

	Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 33/45 Rpt: 50/63	Molina, Richard
4	Date	5 Payee name
	11/08/2021	Solis, Roel
6	Amount (\$)	7 Payee address; City; State; Zip Code
Ĭ	\$200.00	P.O.Box 2671
	Ψ255,55	1 IO.BOX EUT
		Edinburg, TX 78540
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Contract Labor
		Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/19/2021	Solis, Roel
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O.Box 2671
		Edinburg, TX 78540
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Salaries/Wages/Contract Labor
		Labor work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	11/05/2021	Sosa, Maria Elena
T	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	10731 Hernandez Dr.
		Edinburg, TX 78539
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
l	2/11/2/11/2/12	Contract Labor
		Contract Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	• • • • • • • • • • • • • • • • • • •
\vdash		
1		

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services	Polli e Prin	ing Expen ting Expe			Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed al	
	•			The Instruction Guide ex	plains how	to comp	lete this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	
	Sch: 34/45 Rpt: 51/63	ŀ	Molina, Ricl	hard				İ		
4	Date	5	Payee name							
	10/30/2021		Square							
6	Amount (\$)	7	Payee addre	ss; City;	State; Zip	Code	!			
	\$2,166.50		1455 Marke	et Street Suite 600						
			San Francis	sco, CA 94103						
8	PURPOSE OF	(a)	Category (S	ee Categories listed at the top o	f this schedule)	, (b	Description			
l	EXPENDITURE		Fees				쁘		de of Texas. Complete Schedule T.	
							CC Cneck if Austi	ın, IX,	officeholder living expense	
9	Complete ONLY if direct	Ц	Candidato/Offi	ceholder name	Office	sough	+		Office held	
9	expenditure to benefit C/O		Januiuale/Oiii	centique name	Office	sougn	ı.		Office field	
	Date		Payee name							
	11/01/2021		Stripes							
	Amount (\$)		Payee addre	ss; City;	State; Zip) Code	:			
	\$74.00		1606 E. Ric	hardson Rd.						
			Edinburg, T	X 78539						
_	PURPOSE	(2)				T/b) Description			
	OF	رس		ee Categories listed at the top o rage Expense	f this schedule)	' '		l outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		1 Oou/Devel	age Expense					officeholder living expense	
							Drinks Ice W	/ate	rs	
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office	sough	t		Office held	
	expenditure to benefit C/OI	-1								
	Date		Payee name							
	11/09/2021		Stripes							
	Amount (\$)	-	Payee addre	ss; City;	State; Zip	Code	·			
	\$38.23		-	hardson Rd.						
	7-5-1									
			Edinburg, T	Y 78520						
<u> </u>		_				1	.			
	PURPOSE OF	(a)		ee Categories listed at the top o	f this schedule)) (b	Description	d outo:	de of Texas. Complete Schedule T.	
	EXPENDITURE		Food/Bever	age Expense					officeholder living expense	
							Food	,	↓ · ∤ · · · · · · · · · · · · · · · · · · ·	
	Complete ONLY if direct	<u> </u>	Candidate/Offi	iceholder name	Office	sough	t		Office held	,
	expenditure to benefit C/OI				J 2	9**				
L.										

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Lecal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Gift/Awards/Memorials Legal Services The Instruction Gu	S		ges/	Contract Labor		OTHER (enter a category not listed above	e)
1	Total pages Schedule F1:	2 1	II ER NAME						3	Filer ID	
_	Sch: 35/45 Rpt: 52/63		Molina, Rich							THE ID	
4	Date	5 F	ayee name								
	11/12/2021		Stripes								
6	Amount (\$) \$74.00	-	Payee addres 1606 E. Ric Edinburg, T	hardson Rd.	State;	Zip Cod	е				
8	PURPOSE	(a) (Category (Se	ee Categories listed at th	ne top of this schedu	ule) (b)	Description			
	OF EXPENDITURE		-ood/Bever	age Expense						de of Texas. Complete Schedule T. officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offi	ceholder name	Off	fice soug	ht			Office held	
	Date	Ī	Payee name		<u> </u>						_
	11/15/2021	;	Stripes								
	Amount (\$) \$74.00	:	Payee addre 1606 E. Ric Edinburg, T	hardson Rd.	State;	Zip Cod	le				
	PURPOSE OF EXPENDITURE			ee Categories listed at th age Expense	he top of this sched	lule) (b)	므		de of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offi	ceholder name	Off	fice soug	ht			Office held	
┢	Date		Payee name								
	11/23/2021		Stripes								
	Amount (\$) \$29.89		Payee addre 1606 E. Ric Edinburg, T	hardson Rd.	State;	Zip Cod	le				
	PURPOSE OF EXPENDITURE			ee Categories listed at t age Expense	he top of this sched	lule)	(b)	<u> </u>		de of Texas, Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offi	ceholder name	Off	fice soug	ht			Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services	Office Overhe Polling Expen Printing Exper Salaries/Wage	nse es/Contract Labor	Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed a	
	-		The Instruction Guide explains	s how to comp	lete this form.		
1	Total pages Schedule F1:					3 Filer ID	
	Sch: 36/45 Rpt; 53/63	Molina, Ric	hard				
4	Date	5 Payee name					
	11/29/2021	Stripes					
6	Amount (\$)	7 Payee addre	•	e; Zip Code			
	\$33.18	1606 E. Rid	hardson Rd.				
		Edinburg, T	X 78539				
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this so	chedule) (b	Description		
	OF EXPENDITURE	Food/Beve	age Expense		<u></u>	outside of Texas, Complete Schedule T.	
					Food	ı, TX, officeholder living expense	
9	Complete ONLY if direct	Candidate/Off	ceholder name	Office sought	 t	Office held	
	expenditure to benefit C/OF						
	Date	Payee name					
	11/29/2021	Stripes					
	Amount (\$)	Payee addre	ss; City; Stat	e; Zip Code			
	\$51.53	1606 E. Rid	hardson Rd.				
		Edinburg, T	X 78539				
	PURPOSE	(a) Category (S	ee Categories listed at the top of this so	chedule) (b) Description		·
	OF EXPENDITURE		rage Expense		<u></u>	outside of Texas. Complete Schedule T.	
					Waters Coke	r, TX, officeholder living expense	
					VILLOID OOKE	0, 100	
-	Complete ONLY if direct	Candidate/Off	iceholder name	Office sough		Office held	
	expenditure to benefit C/OI			~~~			
-	Date	Payee name			· · · · · · · · · · · · · · · · · · ·		
	12/01/2021	Stripes					
	Amount (\$)	Payee addre	ss; City; Stat	e; Zip Code			
	\$47.52	-	ss, City, Stati chardson Rd.	o, zip code			
	Ψ-11.02	1000 2,700					
		Edinburg, T	X 78539				
_	PURPOSE			harran lab) Description		
	OF		ee Categories listed at the top of this so age Expense	chequie)		outside of Texas. Complete Schedule T.	
	EXPENDITURE	. 300,000			ш	, TX, officeholder living expense	
					Food		
<u> </u>							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		iceholder name	Office sough	į	Office held	
	experience to better G/OI	•				Wasser	

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeholder/Political Credit Card Payment	ı Comr	•	Salaries/V de explains how to co		/Contract Labor OTHER (enter a category not listed above) ete this form.
1	Total pages Schedule F1:	2 F	FILER NAME			3 Filer ID
	Sch: 37/45 Rpt: 54/63		Molina, Richard			
4	Date		Payee name			
	10/27/2021	9	StrongBlue			
6	Amount (\$)	7 F	Payee address; City;	State; Zip Co	de	
	\$600.00	7	700 West Cano			
		E	Edinburg, TX 78539			
8	PURPOSE	(a) (Category (See Categories listed at the	top of this schedule)	(b)	Description
	OF EXPENDITURE		Salaries/Wages/Contract Lab			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Ī						Contract Labor
		1				
9	Complete ONLY if direct	l C:	andidate/Officeholder name	Office sou	ght	Office held
ľ	expenditure to benefit C/O			5.mec 30t	۰٬۰۱۰ ان	5
⊨	Date	,	Payee name			
	11/12/2021		StrongBlue			
\vdash	Amount (\$)	Ь—	Payee address; City;	State; Zip Co	nde	
	\$1,000.00	i	Payee address; City; 700 West Cano	οιαιε, Διρ Οί	.uc	
	Ψ±,000.00	'	. DO VVOOL OUNO			
		 	Edinburg, TX 78539			
┢	PURPOSE	(a) (Category (See Categories listed at the	top of this schedule)	(b)	Description
	OF EXPENDITURE		Salaries/Wages/Contract Lal			Check if travel outside of Texas, Complete Schedule T.
•	LA LIVETIONE					Check if Austin, TX, officeholder living expense Contract Labor
						CONTRACT EASO
	Complete ONLY if direct		andidate/Officeholder name	Office sou	lah+	Office held
Ī	expenditure to benefit C/Ol		анинате/оппсенонег пате	Office sot	gut	Office Held
<u> </u>	Data		Javon nama			
Ī	Date 11/29/2021		Payee name StrongBlue			
		L		State: 7' 5	od -	
	Amount (\$)	1	Payee address; City;	State; Zip Co	ae	
	\$1,000.00		700 West Cano			
		 -	Edinburg, TX 78539			
	PURPOSE OF		Category (See Categories listed at the		(b)	Description Check if travel outside of Taxas, Complete Schedule T
	EXPENDITURE	;	Salaries/Wages/Contract Lal	bor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
						Contract Labor
		1			1	
Т	Complete ONLY if direct		andidate/Officeholder name	Office sou	ght	Office held
	expenditure to benefit C/O					
1						

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica		
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 38/45 Rpt: 55/63	Molina, Richard	
4	Date	5 Payee name	_
	10/26/2021	Subway	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$96.87	2005 S. Closner Blvd.	
	·		
		Edinburg, TX 78539	
_	PURROSE		
8	PURPOSE OF	(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.	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Food	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	H	
_	Date	Payee name	_
	10/25/2021	Sunoco	
-	Amount (\$)	Payee address; City; State; Zip Code	—
	\$51.32	1606 East Richardson	
	,		
		Edinburg, TX 78541	
	PURPOSE		
ŀ	OF	(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.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		Ice, Waters Drinks	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	11/09/2021	Sunoco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.00	1606 East Richardson	
		Edinburg, TX 78541	
	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.	
	EXPENDÎTURE	Check if Austin, TX, officeholder living expense	
		Food	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiulture to beliefit C/OI		
			_

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 39/45 Rpt: 56/63	Molina, Richard
4	Date	5 Payee name
	11/22/2021	Sunoco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$74.00	1606 East Richardson
		Edinburg, TX 78541
8	PURPOSE	
0	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	<u></u>
	Date .	Payee name
	11/01/2021	Switcher Studio
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$45.00	1302 Clear Springs Trace
		Louisville, KY 40223
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Video
		Video
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
\vdash	Data	Davis name
	Date 12/01/2021	Payee name Switcher Studio
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.00	1302 Clear Springs Trace
		Louisville, KY 40223
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Ad
	Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	11:	
L		

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 40/45 Rpt: 57/63	Molina, Richard	
4	Date	5 Payee name	
	11/30/2021	The Monitor	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$550.00	1400 E Nolana Ave,	
		McAllen, TX 78504	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		AD	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	_
	12/01/2021	The Monitor	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,000.00	1400 E Nolana Ave,	
	,		
		McAllen, TX 78504	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Contract Labor	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
_	D-40	T a	_
	Date	Payee name Troving David	
	11/01/2021	Trevino, David	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	1602 N Armagoten Dr	
l		Edinburg, TX 78541	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	-	Candidate/Officeholder/Political Committee Candidate/Officeholder living expense	
		Contribution	
_			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	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 F1:	
	Sch: 41/45 Rpt: 58/63	Molina, Richard
4	Date	5 Payee name
	11/15/2021	UMW
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	715 E University
		Edinburg, TX 78541
_	DUDDOCE	-
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	11/03/2021	Valdez, Victor
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	801 Greenbriar
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas, Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/22/2021	Walk-ons Bistreaux
	Amount (\$)	Payee address; City; State; Zip Code
	\$361.68	415 W Trenton Rd
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Food
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ì	expenditure to benefit C/Ol	
\vdash		

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 42/45 Rpt: 59/63	2 FILER NAME Molina, Richard 3 Filer ID
4	Date	
4	11/02/2021	5 Payee name Whataburger
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$76.75	1717 East University Dr
		Edinburg, TX 78541
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/08/2021	Whataburger
	Amount (\$)	Payee address; City; State; Zip Code
	\$107.47	1717 East University Dr
		Edinburg, TX 78541
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/08/2021	Whataburger
	Amount (\$) \$3.29	Payee address; City; State; Zip Code 1717 East University Dr
		Edinburg, TX 78541
	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 Food
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 43/45 Rpt: 60/63	Molina, Richard
4	Date	5 Payee name
	11/15/2021	Whataburger
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.45	1717 East University Dr
		Edinburg, TX 78541
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food
		Food
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	oxportations to bottom over	
	Date	Payee name
	11/22/2021	Whataburger
	Amount (\$)	Payee address; City; State; Zip Code
	\$65.11	1717 East University Dr
		Edinburg, TX 78541
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		1 000
L.	Owner ONLY Williams	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	11/26/2021	Whataburger
	Amount (\$)	Payee address; City; State; Zip Code
	\$68.77	1717 East University Dr
		Edinburg, TX 78541
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ŀ	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Food
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
<u>.</u>	experience to beliefit C/O	•

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 44/45 Rpt: 61/63 Molina, Richard 4 Date Payee name 11/29/2021 Whataburger 6 Amount (\$) Payee address; City; State; Zip Code \$104.41 1717 East University Dr Edinburg, TX 78541 8 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/25/2021 Willie B's BBQ Amount (\$) Payee address; City; State; Zip Code \$164.24 114 E Loeb St Edinburg, TX 78541 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/01/2021 Willie B's BBQ Amount (\$) Payee address; City; State; Zip Code \$213.05 114 E Loeb St Edinburg, TX 78541 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Committee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	pense Printing Salaries	expense Expense Expe	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID
	Sch: 45/45 Rpt: 62/63	Molina, Richard				
4	Date	5 Payee name	е			
	11/24/2021	Xpress Pri	nting			
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip 0	Code	
	\$601.33 3017 Sugar Rd					
		Edinburg,	TX 78539			
8	PURPOSE	(a) Category (See Categories listed at the	top of this schedule)	(b) Description	
	OF EXPENDITURE	Advertising Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
					Shirts	un, 1 X, omcenolaer living expense
	•				Similar Simila	
9	Complete ONLY if direct	Candidate/Ot	fficeholder name	Office so	 ought	Office held
expenditure to benefit C/OH						

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 63/63 2 FILER NAME 3 Filer ID Molina, Richard 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 11/12/2021 Sam Cub \$149.32 6 Address of person from whom amount is received; City; State; Zip Code 7601 N Jackson St McAllen, TX 78501 7 Purpose for which amount is received ☐ Check if political contribution returned to filer Refund