FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Total pages filed: Filer ID The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Richard NAME Date Receive NICKNAME LAST SUFFIX Molina ZIP CODE CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; OFFICEHOLDER MAILING Receipt # **ADDRESS** Change of Address Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI **TREASURER** NAME Richard NICKNAME LAST SUFFIX Molina ZIP CODE STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; APT / SUITE #; CAMPAIGN **TREASURER ADDRESS** (Residence or Business) CAMPAIGN PHONE NUMBER EXTENSION AREA CODE **TREASURER** 956-929-1155 PHONE REPORT TYPE 15th day after campaign treasurer January 15 30th day before election Runoff appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified reporting limit 9 PERIOD Month Day Year Month Day Year COVERED 07/01/2021 THROUGH 09/23/2021 **ELECTION DATE ELECTION TYPE** 10 ELECTION Other Runoff Month Day Year Primary 11/02/2021 Special X General 11 OFFICE 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) CITY OF EDINBURG, MAYOR CITY OF EDINBURG, MAYOR GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 87

13 C / OH NAME	Molina, Richard	14 Fi	ler ID			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditures ma These expenditures may have been made without the cal officeholders are required to report this information only	ndidate's or officeholder's k	knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
—y,	GENERAL	9				
40		COMMITTEE ADDRESS	MITTEE ADDRESS			
	SPECIFIC					
1		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
16 CONTRIBUTION TOTALS	TOTAL UNITEM OR GUARANTE	LIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLE ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRO	EDGES, LOANS, DNICALLY) \$	0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	62,204.50		
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00			
	4. TOTAL POLITIC	AL EXPENDITURES	\$	79,690.50		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST I RIOD	\$	159,931.25		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T ITING PERIOD	THE LAST DAY \$	0.00		
Note	LIZABET RODRIGUEZ ary Public, State of Texa mm. Expires 03-14-2023 lotary ID 12848143-6		erjury, that the accompany smation required to be repo	ing report is orted by me		
	OTARY STAMP / SEAL AE		21			
Sworn to and subs	ccribed before me, by the	said Kichard Moline. ertify which, witness my hand and seal of office.	this the	day		
Signature of off	icer administering	Elizabet Rodrianez Printed name of officer admiristering	Title of officer adminis	stering oath		
				on V1 1 101bEcd		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				The street of th	3 of 87
8 FILER NAM Molina, R		and ship strip and of	19 Filer ID	SHOP OF	Street BITT
	E SUBTOTALS SCHEDULE	9		SUBTO	TAL AMOUNT
1. X	SCHEDULE A1: MONETAR	Y POLITICAL CONTRIBUTIONS	Mary Tally Unit	\$	62,204.50
2.	SCHEDULE A2: NON-MON	ETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED C	ONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS			\$	
5. X	SCHEDULE F1: POLITICAL	EXPENDITURES FROM POLITICAL CONTRIBUTIO	NS	\$	79,690.50
6.	SCHEDULE F2: UNPAID IN	CURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASI	OF INVESTMENTS FROM POLITICAL CONTRIBUT	TIONS	\$	
8.	SCHEDULE F4: EXPENDIT	URES MADE BY CREDIT CARD		\$	their still
9.	SCHEDULE G: POLITICAL	EXPENDITURES FROM PERSONAL FUNDS	d'aminger	\$	Establish .
10.	SCHEDULE H: PAYMENT F	ROM POLITICAL CONTRIBUTIONS TO A BUSINES:	S OF C/OH	\$	
11.	SCHEDULE I: NON-POLITIC	AL EXPENDITURES FROM POLITICAL CONTRIBUT	TIONS	\$	rical posts
12.	SCHEDULE K: INTEREST, O TO FILER	CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	\$	

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: 1/9 Rpt: 4/87	
FILER NAME			3	Filer ID	
Molina, Richa	ard				
07/07/2021	 Full name of contributor out-of-state PAC (ID#:_ Acero Investments Consulting Contributor address; City; State; Zip Code 2101 Pecos St)	7	Amount of Contribution (\$)	\$2,500.00
	Mission, TX 78572				
Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Date 09/09/2021	Full name of contributor out-of-state PAC (ID#:_ Aguirre, Antonio Contributor address; City; State; Zip Code 413 Nightingale			Amount of Contribution (\$)	\$1,000.00
	McAllen, TX 78504				
Principal occup Bus. man	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date 08/24/2021	Full name of contributor out-of-state PAC (ID#:_ All Valley Innovations Group LLC Contributor address; City; State; Zip Code 1207 E. Bugambilia Ave		Amount of Contribution (\$)	\$2,500.0	
Principal occup	Hidalgo, TX 78557-2652 pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date 08/24/2021	it :			Amount of Contribution (\$)	\$1,000.0
	317 s mcallen, TX 78501				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date 07/22/2021	Full name of contributor out-of-state PAC (ID#:_ Bank of America Contributor address; City; State; Zip Code 1500 W University Dr			Amount of Contribution (\$)	\$4.50
Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions	5)		
orms provided	by Texas Ethics Commission www.ethics	s.state.tx.us		Version V1	1.191h5c

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/9 Rpt: 5/87 FILER NAME 3 Filer ID Molina, Richard 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) \$10,000.00 07/07/2021 Border Health PAC 6 Contributor address; City; State; Zip Code 612 W. Nolana 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 (\$) 08/24/2021 \$1,000.00 Casas, Gustavo Contributor address; City; State; Zip Code 1314 Castille Court Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Man** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/09/2021 \$5,000.00 Cerda, Julio (Mr.) Contributor address; City; State; Zip Code 1602 Solar Dr Mission, TX 78572 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/28/2021 \$1,000.00 Daniec, Victor Contributor address; City; State; Zip Code P.O.Box 2604 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 (\$) 07/07/2021 \$1,500.00 De Jesus, Ruben Contributor address; City; State; Zip Code 1620 N Ahmagoza Dr Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus.man

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/9 Rpt: 6/87 2 FILER NAME 3 Filer ID Molina, Richard 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$1,000.00 08/24/2021 EZ Cuts LLC Contributor address; City; State; Zip Code 100 E Nolana Ave St 170 Mc Allen, TX 78501 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$250.00 Fairlie, Brandon 08/24/2021 Contributor address; City; State; Zip Code P.O.Box 3913 McAllen, TX 78502 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Man** Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 08/24/2021 \$1,000.00 Frisby, J. Gary Contributor address; City; State; Zip Code P.O. Box 1000 Mission, TX 78573-1000 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Man** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 07/28/2021 \$1,000.00 Frisiby, J Gary Contributor address; City; State; Zip Code P.O. Box 1000 Mission, TX 78573 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$500.00 07/28/2021 Garza, Adalberto (Dr.) Contributor address; City; State; Zip Code P.O. Box 3246 Edinburg, TX 78540 Principal occupation / 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: 4/9 Rpt: 7/87 3 Filer ID FILER NAME Molina, Richard 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 08/24/2021 \$250.00 Garza, Enrique 6 Contributor address; City; State; Zip Code 1614 Woodland Dr. Weslaco, TX 78596 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Man** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID# 08/24/2021 Garza, Patricio \$1,000.00 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 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/24/2021 \$500.00 Hernandez, Michael Contributor address; City; State; Zip Code 4301 Vida Grande Weslaco, TX 78596 Principal occupation / Job title (See Instructions) Employer (See Instructions) Business Man Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$500.00 07/28/2021 Janik, Marion Contributor address; City; State; Zip Code P.O.BOX 1373 Edinburg, TX 78540 Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor ut-of-state PAC (ID#: Amount of Contribution (\$) 08/24/2021 Jeffrey Erickson Construction LLC \$500.00 Contributor address; City; State; Zip Code 3520 Buddy Owens Avenue McAllen, TX 78504 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/9 Rpt: 8/87 3 Filer ID 2 FILER NAME Molina, Richard 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 09/09/2021 \$500.00 Kanaan, Hazem Contributor address; City; State; Zip Code 4915 June Dr. 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 (\$) 07/07/2021 Kasan, Pratiba \$3,000.00 Contributor address; City; State; Zip Code 312 W. Nolana loop Pharr, TX 78577 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus Owner Dr. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/09/2021 \$2,000.00 Leal, Mateo Contributor address; City; State; Zip Code 1445 W. Monte Cristo Rd 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 (\$) \$2,500.00 07/28/2021 Linebarger Goggan Blair Contributor address; City; State; Zip Code Po Box 17428 Austin, TX 78760 Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/24/2021 \$200.00 Luna, San Juanita (Mrs.) Contributor address; City; State; Zip Code 5810 W Chapin St Edinburg, TX 78541 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus. Woman

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/9 Rpt: 9/87 FILER NAME 3 Filer ID Molina, Richard 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 08/24/2021 Mahtani, Shavi \$3,500.00 6 Contributor address; City; State; Zip Code 8133 N 1ST ST MCALLEN, TX 78504 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) **BUSINESS MAN** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/28/2021 Maldonado, Samuel (Mr.) \$1,000.00 Contributor address; City; State; Zip Code 2236 Arlina Edinburg, TX 78542 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus. Man Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/24/2021 \$1,000.00 Mays, John Robert Contributor address; City; State; Zip Code 76 Saint Stephens School Rd Austin, TX 78748-2624 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Man** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/24/2021 \$1,000.00 **PEGA JPS Utilities** Contributor address; City; State; Zip Code 24105 Brushline Rd Edinburg, TX 78542 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Date Full name of contributor Amount of Contribution (\$) 08/24/2021 **PinPoint** \$1,000.00 Contributor address; City; State; Zip Code 4824 S Jackson Edinburg, TX 78539 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/9 Rpt: 10/87 3 Filer ID 2 FILER NAME Molina, Richard out-of-state PAC (ID#: 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor \$1,000.00 08/24/2021 RBR Development & Investments LLC Contributor address; City; State; Zip Code 931 S. McColl Rd., Ste A Edinburg, TX 78539 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 08/24/2021 Rej Excavation & Site prep Contributor address; City; State; Zip Code 8919 state hwy 107 Edinburg, TX 78540 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 08/24/2021 \$1,000.00 Rhodes, Michael (Mr.) Contributor address; City; State; Zip Code 1020 Allen View Dr New Braunfels, TX 78132 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus.Man Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 08/24/2021 \$1,000.00 Ruppert, Kyle (Mr.) Contributor address; City; State; Zip Code 3821 Hobbs 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 (\$) \$1,500.00 09/09/2021 Ruppert, Kyle (Mr.) Contributor address; City; State; Zip Code 3821 Hobbs Edinburg, TX 78539 Employer (See Instructions) Principal occupation / Job title (See Instructions) Bus. Man

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/9 Rpt: 11/87 FILER NAME 3 Filer ID Molina, Richard 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) \$1,000.00 07/28/2021 Ruppert, Richard (Mr.) 6 Contributor address; City; State; Zip Code 2810 North Closner Edinburg, TX 78539 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus. Man Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID# \$3,500.00 09/09/2021 Ruppert, Richard (Mr.) Contributor address; City; State; Zip Code 2810 North Closner 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 (\$) 08/24/2021 \$1,000.00 Salinas, Emigdio (Mr.) Contributor address; City; State; Zip Code 2013 N 47th st Mcallen, TX 78501 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bus man Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$500.00 08/24/2021 Sorrells, Daniel Contributor address; City; State; Zip Code P.O. Box 2307 Edinburg, TX 78540 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Man** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$500.00 08/24/2021 The 3.0 Consulting Group Contributor address; City; State; Zip Code 924 W. Nolana Loop Ste. E Pharr, TX 78577 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/87
FILER NAME Molina, Richard	3 Filer ID
Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Business Man	
orms provided by Texas Ethics Commission www.ethics.state.tx.us	Version V1.1.191b5cdc

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 1/75 Rpt: 13/87 Molina, Richard Date Payee name 08/12/2021 Los Pinos Amount (\$) Payee address; City; State; Zip Code \$576.33 1445 W Monte Cristo Rd Edinburg, TX 78542 **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 Lumbar Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Los Pinos 08/18/2021 Amount (\$) Payee address; City; State; Zip Code \$400.00 1445 W Monte Cristo Rd Edinburg, TX 78542 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lumbar Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 08/18/2021 Los Pinos Amount (\$) Payee address; City; State; Zip Code \$239.02 1445 W Monte Cristo Rd Edinburg, TX 78542 **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 Lumbar 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 Glft/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 2/75 Rpt: 14/87	2 FILER NAME Molina, Richard 3 Filer ID
4 Date 09/09/2021	5 Payee name Los Pinos
6 Amount (\$) \$538.53	7 Payee address; City; State; Zip Code 1445 W Monte Cristo Rd Edinburg, TX 78542
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 Lumbar
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 07/19/2021 Amount (\$)	Payee name 107 Cafe Payee address; City; State; Zip Code
\$368.00	4129 W. University Dr. Edinburg, TX 78539
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/Event
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 09/13/2021	Payee name A & E Sports
Amount (\$) \$96.88	Payee address; City; State; Zip Code 1106 S Closner Blvd, Edinburg, TX 78539
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 Shirts
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 Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 3/75 Rpt: 15/87	2 FILER NAME Molina, Richard
4 Date 07/01/2021	5 Payee name Academy Sports
6 Amount (\$) \$97.34	7 Payee address; City; State; Zip Code 651 E Trenton Rd, Edinburg, TX 78539
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 Shirts
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date 07/06/2021	Payee name Academy Sports
Amount (\$) \$38.93	Payee address; City; State; Zip Code 651 E Trenton Rd, Edinburg, TX 78539
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 Shirts
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 07/23/2021	Payee name Academy Sports
Amount (\$) \$173.17	Payee address; City; State; Zip Code 651 E Trenton Rd, Edinburg, TX 78539
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Shirts
Complete ONLY 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:	An indicated and produced in the control of the produced and the control of the produced and the control of the				
•	Sch: 4/75 Rpt: 16/87	Molina, Richard				
4	Date	5 Payee name				
	07/06/2021	Aguilars Meat Market				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
646	\$55.36 1306 East University					
		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.				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
		Food/Event				
	-2					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	experience to belieff 6/01	···				
	Date	Payee name				
	07/06/2021	Aguilars Meat Market				
Г	Amount (\$)	Payee address; City; State; Zip Code				
	\$149.40	1306 East University				
	PERMITTER AND VIOLENCE	\$500 \$400 \$400 \$400 \$400 \$400 \$400 \$400				
		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						
		Check if Austin, TX, officeholder living expense Food/Event				
ı		T SOULTON				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O					
⊨	ALDEW VENERAL CONTRACTOR OF THE PROPERTY OF TH					
ı	Date	Payee name				
L	07/06/2021	Aguilars Meat Market				
	Amount (\$)	Payee address; City; State; Zip Code				
ı	\$35.90	1306 East University				
ı						
ı		Edinburg, TX 78539				
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
ı	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.				
ı	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Food/Event				
L						
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	H ,				
Г						
1						

SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Political Committee Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 5/75 Rpt: 17/87 Molina, Richard Date Payee name 08/02/2021 Aguilars Meat Market Payee address; Amount (\$) City; State; Zip Code \$87.47 1306 East University Edinburg, TX 78539 **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 Meat Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/03/2021 Aguilars Meat Market Amount (\$) Payee address; City; State; Zip Code \$120.00 1306 East University Edinburg, TX 78539 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meat Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 08/13/2021 Aguilars Meat Market Amount (\$) Payee address; City; State; Zip Code \$175.76 1306 East University Edinburg, TX 78539

PURPOSE

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

(b) Description

Meat

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

(a) Category (See Categories listed at the top of this schedule)

Food/Beverage Expense

Candidate/Officeholder name

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: 6/75 Rpt: 18/87	2 FILER NAME Molina, Richard 3 Filer ID
4	Date 08/26/2021	5 Payee name Aguilars Meat Market
6	Amount (\$) \$99.60	7 Payee address; City; State; Zip Code 1306 East University Edinburg, TX 78539
8	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 Meat
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 08/30/2021	Payee name Aguilars Meat Market
	Amount (\$) \$92.67	Payee address; City; State; Zip Code 1306 East University Edinburg, TX 78539
	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 Meat
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 09/15/2021	Payee name Aguilars Meat Market
	Amount (\$) \$233.54	Payee address; City; State; Zip Code 1306 East University Edinburg, TX 78539
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meat
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
Tatal access Cabadula Etc	The Instruction Guide explains how to complete this form.
	2 FILER NAME Molina Richard
Sch: 7/75 Rpt: 19/87	Molina, Richard
Date	5 Payee name
07/23/2021	Alamo Digital Agency
Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 8601 N. 21st Street McAllen, TX 78504
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(video)
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/24/2021	Alfaro, Veronica
Amount (\$)	Payee address; City; State; Zip Code
\$150.00	1603 Nassau St., Apt. B
	Edinburg, TX 78539
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/06/2021	Alvarez, Joshua (Mr.)
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1901 Oasis Ave Mission, TX 78572
	mission, 17, 16072
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/Oh	Candidate/Officeholder name Office sought Office held H

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
Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Lahor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (expense a steepen pot listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 8/75 Rpt: 20/87	Molina, Richard
4	Date	5 Payee name
	09/03/2021	Anitas Cafe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$45.09	2102 N McColl Rd,
	i i	
		Edinburg, TX 78541
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ı	OF EXPENDITURE	Food/Beverage Expense
ı		Check if Austin, TX, officeholder living expense Food/event
ı		Food/event
Ļ	Commiste CNII V if diseast	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
⊨	Dete	
ı	Date 09/22/2021	Payee name
L		Baeza Carrera, Maria Angelica
ı	Amount (\$)	Payee address; City; State; Zip Code
ı	\$264.00	2510 Sunset Blvd
ı		MINITED BY COMMING THE PROPERTY.
L		Mission, TX 78574
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ı	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food/Ice cream/event
ı		7 334/103 3/34/1/3/3/1
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ı	expenditure to benefit C/O	
H	Date	Payee name
ı	08/16/2021	Bank of America
H	Amount (\$)	
ı	\$180.00	Payee address; City; State; Zip Code 1500 W. University Dr.
ı	Φ100.00	1300 W. Offiversky Dr.
ı		Ediphura TV 70E20
L	DUBECCE	Edinburg, TX 78539
ı	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T.
ı	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
ı		Bank Fees
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
Γ		

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Contice Overlead/Rental Expense Fransportation Equipment & Related Expense Fransportation Expense Fransportation Equipment & Related Expense Fransportation Expense Fransportatio
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 9/75 Rpt: 21/87	Molina, Richard
4 Date	5 Payee name
09/02/2021	Bank of America
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50.15	1500 W. University Dr.
	Edinburg, TX 78539
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense Bank Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/09/2021	Brand Boosters
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 301 N McColl Rd Suite G McAllen, TX 78501
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 Signs
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 07/06/2021	Payee name Carillo, Rafaela
Amount (\$) \$300.00	Payee address; City; State; Zip Code 3621 S. Monte Video 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 ONLY if direct expenditure to benefit C/C	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		Legal S		se Printing E Salaries/V xplains how to co	Vages	/Contract Labor	Travel Out of District OTHER (enter a cate	gory not listed above)
1	Total pages Schedule F1: Sch: 10/75 Rpt: 22/87		R NAME na, Richard				3	Filer ID	
4	Date 07/13/2021	Anna Laborator	ee name melita's Mexic	an Restaurant					
6	Amount (\$) \$23.69	102	ee address; 6 E. Universit nburg, TX 785		State; Zip Co	ode			
8	PURPOSE OF EXPENDITURE		gory (See Categ d/Beverage E	ories listed at the top xpense	of this schedule)	(b)		side of Texas. Complete K, officeholder living exp	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		date/Officehold	er name	Office sou	ight		Office held	
	Date 08/09/2021	100	ee name melita's Mexid	an Restaurant					
	Amount (\$) \$274.95	102	ee address; 6 E. Universit nburg, TX 785	- Carronnos Defendas	State; Zip Co				
	PURPOSE OF EXPENDITURE	10000000	egory (See Categ nt Expense	ories listed at the top	of this schedule)	(b)		side of Texas. Complete K, officeholder living exp	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Date 08/09/2021		ee name melita's Mexid	an Restauran	t				
	Amount (\$) \$22.94	102	ee address; 6 E. Universit nburg, TX 785		State; Zip Co	ode			
	PURPOSE OF EXPENDITURE	N 10 (C) (C)	egory (See Cateç d/Beverage E	ories listed at the top Expense	of this schedule)	(b)		side of Texas. Complet K, officeholder living exp	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		idate/Officeholo	ler name	Office sou	ight		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

	Constituing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID							
	Sch: 11/75 Rpt: 23/87	Molina, Richard							
4	Date	5 Payee name							
	07/06/2021	Case, Sharon							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$500.00	1216 E Staples							
		Edinburg, TX 78539							
В	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							
_	Consulate ONLY if direct	Condidate/Officeholder name Office ball							
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	07/26/2021	Case, Sharon							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	1216 E Staples							
		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.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		Contract Labor							
_									
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	08/06/2021	Case, Sharon							
_	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	1216 E Staples							
		Edinburg, TX 78539							
_	PURPOSE	in proposition to recommend							
	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/O	H and the second							
_									

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees Food/Beverage 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: 12/75 Rpt: 24/87	2 FILER NAME Molina, Richard 3 Filer ID
4 Date 08/16/2021	5 Payee name Case, Sharon
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1216 E Staples 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/O	Candidate/Officeholder name Office sought Office held H
Date 09/01/2021	Payee name Case, Sharon
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1216 E Staples Edinburg, TX 78539
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor 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 09/20/2021	Payee name Case, Sharon
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1216 E Staples 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

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	Food/Beverage Expense Polling Expense Travel in District y - Glft/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
L ·	Total pages Schedule F1:	2 FILER NAME 3 Filer ID					
	Sch: 13/75 Rpt: 25/87	Molina, Richard					
1	Date	5 Payee name					
(07/01/2021	Castilleja, Leo (Mr.)					
-	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$1,000.00	1420 E. Fay					
		Edinburg, TX 78541					
	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 Trailers					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	08/20/2021	Castilleja, Leo (Mr.)					
-	Amount (\$) \$1,090.00	Payee address; City; State; Zip Code 1420 E. Fay					
		Edinburg, TX 78541					
	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 Trailers					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	Date 07/19/2021	Payee name Chick-Fil-A					
7	Amount (\$) \$128.88	Payee address; City; State; Zip Code 1201 W. University Dr.					
_		Edinburg, TX 78539					
	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/Event					
		•					

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		Clitt/Awards/Memorials Exper Legal Services The Instruction Guide 6	Salaries/V	ages	/Contract Labor	OTHER (enter a categor	y not listed above)
1	Total pages Schedule F1:	2 FILER NA	ME			3	Filer ID	
	Sch: 14/75 Rpt: 26/87	Molina, F	ichard					
4	Date	5 Payee nar	ne					
	07/19/2021	Chick-Fil-	-A					
6	Amount (\$)	7 Payee add	lress; City;	State; Zip Co	de			
	\$12.45	1201 W.	University Dr.					
		Edinburg	, TX 78539					
8	PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE	Food/Bev	erage Expense				tside of Texas. Complete So	
						Food/Event	"X, officeholder living expens	se
						. 500,21011		
9	Complete ONLY if direct		Officeholder name	Office sou	ght		Office held	
L	expenditure to benefit C/O	1						
Γ	Date	Payee na	me					
L	08/13/2021	Chick-Fil	-A					
Γ	Amount (\$)	Payee add		State; Zip Co	de			×1.1
	\$77.86	1201 W.	University Dr.					
ı								
ı		Edinburg	, TX 78539					
Г	PURPOSE OF	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description		
ı	EXPENDITURE	Food/Beverage Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
ı			l L			Food/event		
ı								
H	Complete ONLY if direct		Officeholder name	Office sou	ght		Office held	
expenditure to benefit C/OH								
F	Date	Payee na	me					
	08/20/2021	Chick-Fil						
Г	Amount (\$)	Payee ad	dress; City;	State; Zip Co	de			
	\$130.36	1201 W.	University Dr.					
		Edinburg	, TX 78539					
Γ	PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description	e 1900 - 1800, de - 1800, de -	97 700733 0025
١	OF EXPENDITURE	Food/Be	verage Expense				itside of Texas. Complete So FX, officeholder living expens	
						Food/event	A, onicenduer living expens	3 0
H	Complete ONLY if direct	Candidate/	Officeholder name	Office sou	ght		Office held	
	expenditure to benefit C/O		0.000					
H								
١								
1								

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1		2 FILER NAME 3 Filer ID							
	Sch: 15/75 Rpt: 27/87	Molina, Richard							
4	Date	5 Payee name							
	09/07/2021	Chick-Fil-A							
6	Amount (\$) \$126.64	7 Payee address; City; State; Zip Code 1201 W. University Dr. Edinburg, TX 78539							
8	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/Event							
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
_	Date	Payee name							
	08/06/2021	Circle K							
	Amount (\$) \$60.33	Payee address; City; State; Zip Code 2204 W. Trenton Rd.							
		Editibuty, 17 76559							
	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 Drinks/Water/Ice							
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	07/07/2021	City of Edinburg							
	Amount (\$) \$225.00	Payee address; City; State; Zip Code 415 West University Drive							
		Edinburg, TX 78539							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rental Fees							
	Complete ONLY 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel in District Consulting Expense Contributions/ Donations Made By Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 3 Filer ID FILER NAME Sch: 16/75 Rpt: 28/87 Molina, Richard 4 Date Payee name 07/07/2021 Coffee Zone 6 Amount (\$) Payee address; City; State; Zip Code 1108 S. McColl Rd. \$35.10 Edinburg, TX 78539 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food/Event Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 07/12/2021 Coffee Zone Amount (\$) Payee address; City; State; Zip Code \$44,78 1108 S. McColl Rd. Edinburg, TX 78539 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food/Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/25/2021 Denny's Amount (\$) Payee address; City; State; Zip Code \$28.01 2301 W University Drive Edinburg, TX 78539 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food/event 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

EXPENDITURE CATEGORIES FOR BOX 8(a) **Event Expense**

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor 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 3 Filer ID Sch: 17/75 Rpt: 29/87 Molina, Richard Date Payee name 07/21/2021 Domino's City; 6 Amount (\$) Payee address; State; Zip Code \$99.50 1522 W University Dr, Edinburg, TX 78539 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/Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/21/2021 Domino's Amount (\$) Payee address; City; State; Zip Code \$17.30 1522 W University Dr, Edinburg, TX 78539 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food/Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/21/2021 **ENHS** Amount (\$) Payee address; City; State; Zip Code \$100.00 3101 N Closner Blvd. Edinburg, TX 78541 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation/Dance Team Complete ONLY if direct Candidate/Officeholder name Office sought Office held

expenditure to benefit C/OH

SCHEDULE F1

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

Travel Out of District

Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Solicitation/Fundraising Expense Transportation Equipment & Related Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense
Contributions/ Donations Made By -Travel in District Legal Services Candidate/Officeholder/Political Committee Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 3 Filer ID FILER NAME Sch: 18/75 Rpt: 30/87 Molina, Richard Date Payee name 08/13/2021 **ENHS Band Boosters** 6 Amount (\$) Payee address; State; Zip Code \$400.00 3101 N Closner Blvd. 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. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Sponsor Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/02/2021 **ENHS Basketball Booster** Amount (\$) Payee address; City; State; Zip Code \$1,000.00 3101 N. Closner Blvd. Edinburg, TX 78541 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation/Fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/22/2021 Echavarria, James Amount (\$) Payee address; State; Zip Code City; \$500.00 2901 N Main Mc Allen, TX 78501 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsorship/Podcast Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Polling Expense Travel in District Travel Out of District Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
Total pages Schedule F1:	The property of the comment with the comment of the
Sch: 19/75 Rpt: 31/87	Molina, Richard
Date	5 Payee name
08/26/2021	Edinburg Crime stopper
Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1702 S Closner Blvd Edinburg, TX 78539
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 <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/28/2021	Edinburg Lions Club
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3801 S Bus. Hwy 281 Edinburg, TX 78539
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 Golf Tournament
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 07/07/2021	Payee name El Patio Cafe
Amount (\$) \$50.13	Payee address; City; State; Zip Code 2207 S. Closner Blvd. Edinburg, TX 78539
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/Event
	·

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/Political Credit Card Payment	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 20/75 Rpt: 32/87	2 FILER NAME Molina, Richard 3 Filer ID						
4	Date 08/06/2021	5 Payee name El Patio Cafe						
	Amount (\$) \$40.74	7 Payee address; City; State; Zip Code 2207 S. Closner Blvd. Edinburg, TX 78539						
8	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/event						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date 07/01/2021	Payee name Facebk Advertising						
Amount (\$) Payee address; City; State; Zip Code \$41.99 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 Facebook						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date 08/02/2021	Payee name Facebk Advertising						
	Amount (\$) Payee address; City; State; Zip Code \$465.00 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 ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

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

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

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

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

Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 21/75 Rpt: 33/87 Molina, Richard Date Payee name 08/30/2021 **Facebk Advertising** Amount (\$) Payee address; City; State; Zip Code \$600.00 1 Hacker way Menlo Park, CA 94025 **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 Ad Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/01/2021 **Facebk Advertising** Amount (\$) Payee address; City; State; Zip Code \$160.00 1 Hacker way Menlo Park, CA 94025 **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 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/05/2021 Fernandez, Misty Amount (\$) Payee address; City; State; Zip Code \$250.00 932 Bunker Edinburg, TX 78539 **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** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation/Funeral Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Sch: 22/75 Rpt: 34/87 Molina, Richard 4 Date Payee name 09/07/2021 Flying J 6 Amount (\$) Payee address; City; State; Zip Code \$65.55 1305 E Monte Cristo Rd, Edinburg, TX 78539 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Drinks/Ice Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 07/09/2021 Garcia, Joel Payee address; City; State; Zip Code Amount (\$) \$500.00 713 Melo's Lane Palmview, TX 78574 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Fundraiser Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 07/22/2021 Garza, Brenda State; Zip Code Amount (\$) Payee address; City; \$100.00 16203 Cantu Rd Edinburg, TX 78539 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense

Candidate/Officeholder name

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Check if Austin, TX, officeholder living expense

Office held

Ad (video)

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

Contributions/ Donations Candidate/Officeholde Credit Card Payment								
Total pages Schedu	le F1: 2 FILER NAME 3 Filer ID							
Sch: 23/75 Rpt: 3	Molina, Richard							
Date	5 Payee name							
07/19/2021	Garza, Irene (Mrs.)							
Amount (\$)	7 Payee address; City; State; Zip Code							
\$1,00	00.00 1018 E. McIntyre							
	Edinburg, TX 78539							
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 dexpenditure to bene								
Date	Payee name							
09/03/2021	Garza, Irene (Mrs.)							
Amount (\$) \$50	Payee address; City; State; Zip Code 1018 E. McIntyre							
	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 ONLY if dexpenditure to bene								
Date 08/19/2021	Payee name Garza, Ramona (Mrs.)							
Amount (\$) Payee address; City; State; Zip Code \$500.00 813 S 21st 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 ONLY if despenditure to bene								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Advertising Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Polling Expens Printing Expen Salaries/Wage	se s/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NA			Is	Filer ID
•	Sch: 24/75 Rpt: 36/87	Molina, F				, The ID
4	Date	5 Payee na	me .			
Ť	09/16/2021		amona (Mrs.)			
6	Amount (\$) \$500.00	7 Payee add 813 S 21 Edinburg	(EG)	te; Zip Code		
8	PURPOSE OF EXPENDITURE	(a) Category	(See Categories listed at the top of this s Wages/Contract Labor	schedule) (b)		oitside of Texas. Complete Schedule T. FX, officeholder living expense r
9	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Office sought		Office held
	Date	Payee na	me			
	09/16/2021	Gomez,	Leo (Mr.)			
	Amount (\$) \$300.00	\$200 \$10 KI	Aile 17 rd	te; Zip Code		
			ј, ТХ 78542			
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this to wages/Contract Labor	schedule) (b)		utside of Texas. Complete Schedule T. TX, officeholder living expense r
	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Office sought		Office held
	Date	Payee na	me			
	09/23/2021	Gonzale	z, Alberto			
	Amount (\$) \$500.00	Payee ad 410 Pan	dress; City; Sta tera Drive	ite; Zip Code		25
		Alamo, 7	TX 78516			
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this ing Expense	schedule) (b)		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Office sought		Office held
			Oniceroider Haine	Onice sough		Office field

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental 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: 25/75 Rpt: 37/87	Molina, Richard							
4	Date	5 Payee name							
	07/08/2021	Gonzalez, Chandra							
5	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$500.00	2812 Maria Luisa Dr.							
		Edinburg, TX 78539							
3	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							
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
ő	expenditure to benefit C/O								
=	Date	Payee name							
	08/16/2021	Gonzalez, Chandra							
-	Amount (\$)	Payee address; City; State; Zip Code							
	\$300.00	2812 Maria Luisa Dr.							
	φοσο.σσ	2012 Iviana Luisa Di.							
		Ediphusa TV 70520							
_		Edinburg, TX 78539							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes, 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							
		3,000 (300 (300 (300 (300 (300 (300 (300							
-	Complete ONLY if direct	f direct Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O	H THE CONTROL OF THE							
	Date	Payee name							
	08/02/2021	Gonzalez, Del							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$20.00	808 S 15th Ave.							
		Edinburg, TX 78539							
	PURPOSE	Agendants (1997) - Popular Contract data							
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		Event/Moonjump							
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
_	experience to benefit C/O								
_									

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	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 26/75 Rpt: 38/87	2 FILER NAME Molina, Richard 3 Filer ID
4	Date 09/07/2021	5 Payee name Gonzalez, Iris
6	Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 605 Eastwood Lane Edinburg, TX 78542
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
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 09/21/2021	Payee name Gonzalez, Iris
	Amount (\$) \$400.00	Payee address; City; State; Zip Code 605 Eastwood Lane Edinburg, TX 78542
	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/O	Candidate/Officeholder name Office sought Office held
	Date 09/16/2021	Payee name Gonzalez, Matthew
	Amount (\$) \$720.00	Payee address; City; State; Zip Code 700 E. Sprague Edinburg, TX 78539
	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/Event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Travel in District Travel Out of District

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Printing Expense Salaries/Wages/Contract Labor Legal Services 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 3 Filer ID Sch: 27/75 Rpt: 39/87 Molina, Richard Date Payee name 09/07/2021 Gonzalez, Matthew Amount (\$) Payee address; State; Zip Code City; \$48.00 700 E. Sprague Edinburg, TX 78539 **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 Truck/Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/19/2021 Gutierrez, Mayra Amount (\$) Payee address; City; State; Zip Code \$500.00 504 N. 8th Street 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. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Consultant Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/28/2021 H.E.B Amount (\$) Payee address; City; State; Zip Code \$36.10 1212 S Closner Blvd, Edinburg, TX 78539 **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 Drinks/Waters/Ice

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

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 Legal Services

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
TTELE (Chapters extensive to the Property of Chapters)

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 28/75 Rpt: 40/87	2 FILER NAME Molina, Richard 3 Filer ID						
4		5 Payee name						
	08/11/2021	H.E.B						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$43.89	1212 S Closner Blvd,						
L		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						
		Drinks						
		20040400						
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held						
Г	Date	Payee name						
	09/13/2021	H.E.B						
Г	Amount (\$)	Payee address; City; State; Zip Code						
	\$39.13	1212 S Closner Blvd,						
L		Edinburg, TX 78539						
Γ	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						
		Drinks/Ice						
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
L	expenditure to benefit C/OI							
ſ	Date	Payee name						
L	07/09/2021	Hernandez, Brandon						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$200.00	4009 East Curve Road						
L		Edinburg, TX 78542						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor 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						
	2	Contract Labor						
Γ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
L	expenditure to benefit C/OI	H						
Γ								

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 29/75 Rpt: 41/87 Molina, Richard Date Payee name 08/09/2021 Hernandez, Brandon Payee address; 6 Amount (\$) City; State; Zip Code \$200.00 4009 East Curve Road Edinburg, TX 78542 **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 Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 07/30/2021 I Shop RGV Amount (\$) Payee address; City; State; Zip Code \$1,000.00 1919 Ash Cir. Edinburg, TX 78539 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Salaries/Wages/Contract Labor 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/OH Date Payee name 08/27/2021 I Shop RGV Amount (\$) Payee address; City; State; Zip Code \$1,500.00 1919 Ash Cir. Edinburg, TX 78539 **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

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/Political Credit Card Payment		
1	Total pages Schedule F1: Sch: 30/75 Rpt: 42/87	2 FILER NAME Molina, Richard 3 Filer ID	
	07/26/2021	5 Payee name Ihop	
6	\$54.97	7 Payee address; City; State; Zip Code 2716 W University Dr Edinburg, TX 78539	
8	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/Event	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
	Date 07/26/2021	Payee name Ihop	
	Amount (\$) \$43.10	Payee address; City; State; Zip Code 2716 W University Dr Edinburg, TX 78539	27
	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/Event	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date 07/30/2021	Payee name Ihop	
	Amount (\$) \$21.67	Payee address; City; State; Zip Code 2716 W University Dr Edinburg, TX 78539	
	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/event	
Γ	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.
Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 31/75 Rpt: 43/87	Molina, Richard
Date	5 Payee name
08/10/2021	Ihop
Amount (\$) \$70.80	7 Payee address; City; State; Zip Code 2716 W University Dr Edinburg, TX 78539
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/event
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/27/2021	lhop Page 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Amount (\$) \$140.30	Payee address; City; State; Zip Code 2716 W University Dr Edinburg, TX 78539
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/Event
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/08/2021	Ihop Indiana I
Amount (\$) \$184.29	Payee address; City; State; Zip Code 2716 W University Dr Edinburg, TX 78539
PURPOSE	
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/event
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

Event 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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor 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: 2 FILER NAME 3 Filer ID Sch: 32/75 Rpt: 44/87 Molina, Richard 4 Date Payee name 08/16/2021 Jason's Deli 6 Amount (\$) Payee address; City; State; Zip Code 1604 W. University Dr. \$103.48 Edinburg, TX 78539 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food/event Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/23/2021 Jason's Deli Payee address; City; State; Zip Code Amount (\$) \$104.79 1604 W. University Dr. Edinburg, TX 78539 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food/event Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/02/2021 Jason's Deli Payee address; City; State; Zip Code Amount (\$) 1604 W. University Dr. \$104.17 Edinburg, TX 78539 **PURPOSE** Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food/event Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District y - Glift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.							
6	Total pages Schedule F1:	2 FILER NAME 3 Filer ID							
	Sch: 33/75 Rpt: 45/87	Molina, Richard							
)	Date	5 Payee name							
	09/13/2021	Jason's Deli							
	Amount (\$) \$169.61	7 Payee address; City; State; Zip Code 1604 W. University Dr.							
_	PURPOSE	Edinburg, TX 78539							
	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/event							
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
=	Date	Payee name							
	09/03/2021	Jasso, Yolanda (Ms.)							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 1412 Samano St. 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							
	Date 09/09/2021	Payee name Juniors Supermarket							
2	Amount (\$) \$33.53	Payee address; City; State; Zip Code 3621 N Closner Blvd							
		Edinburg, TX 78541							
	PURPOSE	Edinburg, TX 78541 (a) Category (see Categories listed at the top of this schedule) (b) Description							
_	PURPOSE OF EXPENDITURE	Edinburg, TX 78541 (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/Water/Ice							

SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Glft/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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1 Total pages Schedule F1: Sch: 34/75 Rpt: 46/87	2 FILER NAME Molina, Richard 3 Filer ID							
4 Date 07/07/2021	5 Payee name La Cabana Pollos Asados							
6 Amount (\$) \$64.91	7 Payee address; City; State; Zip Code 3502 S. Sugar Closner Blvd. Edinburg, TX 78539							
8 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/event							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H							
Date 08/16/2021	Payee name Lamar Advertising							
Amount (\$) \$1,874.00	Payee address; City; State; Zip Code P.O. Box 96030 Baton Rouge, LA 70896							
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 Vinyls							
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
Date 09/15/2021	Payee name Lamar Advertising							
Amount (\$) \$3,048.00	Payee address; City; State; Zip Code P.O. Box 96030 Baton Rouge, LA 70896							
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 Billboard							
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel in District Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule F1: 2 3 Filer ID Sch: 35/75 Rpt: 47/87 Molina, Richard Date Payee name 07/16/2021 Linn-San Manuel Fire Department Amount (\$) Payee address; State; Zip Code City; \$200.00 21661 TX-186 Edinburg, TX 78542 **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 Firefighter Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/16/2021 Little Ceasar Amount (\$) Payee address; City; State; Zip Code \$43.30 1410 South Closner Edinburg, TX 78539 **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/event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/10/2021 Los Lagos Golf Club & Putter's Grill State; Zip Code Amount (\$) Payee address; City; \$51.36 1720 S. Raul Longoria Rd Edinburg, TX 78542 **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/event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Contributions/ Donations Made Candidate/Officeholder/Poli Credit Card Payment	By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F: Sch: 36/75 Rpt: 48/8	The second secon
4 Date 09/02/2021	5 Payee name Los Mismos Tacos
6 Amount (\$) \$304.5	7 Payee address; City; State; Zip Code 4830 S Jackson Rd Edinburg, TX 78539
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/Event
Complete ONLY if direct expenditure to benefit C	
Date 08/24/2021	Payee name Lowe's
Amount (\$) \$200.1	Payee address; City; State; Zip Code 2802 W University Dr Edinburg, TX 78539
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 Lumber
Complete <u>ONLY</u> if direc expenditure to benefit C	
Date 08/09/2021	Payee name Lowe's
Amount (\$) \$44.6	Payee address; City; State; Zip Code 2802 W University Dr Edinburg, TX 78539
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 Signs/Material
Complete ONLY if direct expenditure to benefit C	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Contril Car	ulting Expense butions/ Donations Made By ndidate/Officeholder/Politica Card Payment	Food/Beverage Expense Polling Expense Travel In District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.							
Total	pages Schedule F1:	2 FILER NAME 3 Filer ID							
Sch:	37/75 Rpt: 49/87	Molina, Richard							
Date		5 Payee name							
08/31	./2021	Luna, Belen							
Amou	nt (\$) \$200.00	7 Payee address; City; State; Zip Code 12431 N M Rd. Edinburg, TX 78541							
PL	JRPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF ENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee							
	lete <u>ONLY</u> if direct diture to benefit C/OI	Candidate/Officeholder name Office sought Office held							
Date		Payee name							
09/08	3/2021	Martinez, Efrain (Mr.)							
Amou	nt (\$) \$500.00	Payee address; City; State; Zip Code 1105 N Montevideo Edinburg, TX 78541							
	IDDOCE	Zambarg, 17 100-12							
	JRPOSE OF ENDITURE	(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							
	elete <u>ONLY</u> if direct editure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
Date 07/19	0/2021	Payee name McAllen Digital Media							
Amou	nt (\$) \$500.00	Payee address; City; State; Zip Code 204 E Cano Edinburg, TX 78541							
DI	JRPOSE	-							
	OF ENDITURE	(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(videos)							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

4 Date 5 Payee name				Gift/Awards/Memorials E Legal Services The Instruction Guid	Sa		ages/	/Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	
	Sch: 38/75 Rpt: 50/87		Molina, Rich	nard							
4	7.45.77	5	Payee name								
	09/07/2021		McAllen Dig								
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	ip Cod	le				
	\$900.00		204 E Cano	·	8						
			Edinburg, T	X 78541							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this schedule	le) ((b)	Description	AND MARK		
	OF EXPENDITURE		Accounting/	'Banking						ide of Texas. Complete Schedule T. , officeholder living expense	
								Ad(videos)		,	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Offic	ce soug	tht			Office held	
	expenditure to benefit C/OF	Н									
Г	Date	Γ	Payee name								
	07/13/2021		McCoys								
Г	Amount (\$)	Г	Payee addre	ss; City;	State; Z	zip Coc	de				
	\$32.46		2901 W Un	iversity Dr							
	2		Edinburg, TX 78541								
PURPOSE			(a) Category (See Categories listed at the top of this schedule) (b) Description							NO SEE SEE SE SE SE SE	
	OF EXPENDITURE	-			vi.ce(3)						
	1301.1426-470496 <u>11.55</u> 1.741.7451.7561		Signs					_	, 1X	, omcenduel living expense	
H	Complete ONLY if direct		Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/Ol						matili			DANAGERS SECTION	
F	Date	Т	Pavee name				_				
	07/06/2021										
H	Amount (\$)	T			State; Z	Zip Cod	de				
	\$600.00		(7)			600					
		Dunt (\$) Payee address; City; State; Zip Code ### State									
H	PURPOSE	(a		ingo sasanan	e top of this schedul	le)	(b)	Description			
١	OF			10.75% J. J. J. J.		*		Check if travel			
l	EXPENDITORE									(, officeholder living expense	
								Contract Lab	or		
\vdash	Complete ONLY if direct	上	Candidata/Off	iceholder name	Offic	ce soug	ıh+		_	Office held	
	expenditure to benefit C/O		Januale/UII	ioenoluei name	Oill	<i>จ</i> จ จบน(9116			Silled Held	
H		_					_		_		
1											

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 39/75 Rpt: 51/87	Molina, Richard
Date	5 Payee name
07/19/2021	Molina, Brenda
Amount (\$)	7 Payee address; City; State; Zip Code
\$600.00	4225 N Denkhaus Blvd
	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 Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/05/2021	Molina, Brenda
Amount (\$) \$600.00	Payee address; City; State; Zip Code 4225 N Denkhaus Blvd Edinburg, TX 78541
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/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/17/2021	Molina, Brenda
Amount (\$) \$600.00	Payee address; City; State; Zip Code 4225 N Denkhaus Blvd
	Edinburg, TX 78541
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
	Candidate/Officeholder name Office sought Office held

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
Legal Services

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 (orders street) and listed above)

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/	Wages.	Contract Labor	OTHER (enter a category no	t listed above)	
1	Total pages Schedule F1:	2 FILER NAM	1E				3 Filer ID		
	Sch: 40/75 Rpt: 52/87	Molina, Ri	chard						
4	Date	5 Payee nam	e						
	07/22/2021	Moonlight	Cafe						
6	Amount (\$)	7 Payee add	ess; City;	State; Zip Co	ode				
	\$33.70	3911 S. B	usiness, US 281						
		9							
		Edinburg,	TX 78539						
8	PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description		120020	
	OF EXPENDITURE	Food/Bev	erage Expense		l		outside of Texas. Complete Sched , TX, officeholder living expense	ule T.	
					l	Food/Event	TA, unicertaider living expense		
9	Complete ONLY if direct		fficeholder name	Office so	ught		Office held		
	expenditure to benefit C/O	Н							
	Date	Payee nam	ne						
	09/03/2021	Morales, I	Noemi						
	Amount (\$)	Payee add	ress; City;	State; Zip C	ode				
	\$300.00	3626 Sol Dorado							
		Edinburg,	TX 78542						
	PURPOSE	(a) Category	(See Categories listed at the top	o of this schedule)	(b)	Description			
	OF 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							
		Candidate	e/Officeholder/Politica	Committee	Donation				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O				3				
=	Date	Payee nan	ne						
	08/26/2021	Moreno, A							
_	Amount (\$)	Payee add	ress; City;	State; Zip C	ode				
	\$800.00	683 Trum	19 19 19 19 19 19 19 19 19 19 19 19 19 1						
	3								
		Brownsville, TX 78521							
	PURPOSE	(a) Category	(See Categories listed at the top	o of this schedule)	(b)	Description			
	OF EXPENDITURE	Event Ex				Check if travel outside of Texas. Complete Schedule T.		lule T.	
	EXPENDITORE					Check if Austin, TX, officeholder living expense			
						Kickoff/Scree	#II		
_	Complete ONLY if direct	Candidate/C	Officeholder name	Office so	ught		Office held		
	expenditure to benefit C/O	Н			330				
_									
_				ethics state tv			V	on V/1 1 101hEc	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politics Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Š	Sch: 41/75 Rpt: 53/87	Molina, Richard
- 1	Date	5 Payee name
(09/07/2021	Moreno, Janie
,	Amount (\$) \$190.00	7 Payee address; City; State; Zip Code 7306 N. 2nd St.
	DUDDOOF	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/Event
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
-	Date	Payee name
(07/26/2021	Mundo Grocery n Meat
,	Amount (\$) \$30.00	Payee address; City; State; Zip Code 2510 East Monte Cristo Rd Edinburg, TX 78542
	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/Event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 08/02/2021	Payee name Mundo Grocery n Meat
,	Amount (\$) \$45.14	Payee address; City; State; Zip Code 2510 East Monte Cristo Rd Edinburg, TX 78542
	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/event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Advertising Expense Transportation Equipment & Related Expense Travel in District Accounting/Banking Consulting Expense Contributions/ Donations Made By -Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District
OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment Legal Services The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Sch: 42/75 Rpt: 54/87 Molina, Richard Date Payee name 09/09/2021 Murphy 6 Amount (\$) Payee address; City; State; Zip Code \$75.00 1720 W. University Drive Edinburg, TX 78539 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense EXPENDITURE Check if Austin, TX, officeholder living expense Drinks/Ice Office held Office sought Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 07/06/2021 Murphy Amount (\$) Payee address; City; State; Zip Code 1720 W. University Drive \$93.09 Edinburg, TX 78539 **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 Drinks/Ice Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name My Place Cafe 07/02/2021 Amount (\$) Payee address; City; State; Zip Code \$51.36 308 N Closner Blvd, Edinburg 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/Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)					
1911 - Dishari ser et almanan kentrala ser et alman ser et	The Instruction Guide explains how to complete this form.					
Total pages Schedule F1:						
Sch: 43/75 Rpt: 55/87	Molina, Richard					
Date	5 Payee name					
07/12/2021	My Place Cafe					
Amount (\$) \$487.22	7 Payee address; City; State; Zip Code 308 N Closner Blvd, Edinburg Edinburg, TX 78541					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	Food/Event					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
07/01/2021	NAJVAR LAW FIRM, PLLC					
Amount (\$)	Payee address; City; State; Zip Code					
\$5,000.00	2180 North Loop West, Ste. 255					
PURPOSE OF EXPENDITURE	Houston, TX 77018 (a) Category (See Categories listed at the top of this schedule) Legal Services (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Legal Fees					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
08/26/2021	NAJVAR LAW FIRM, PLLC					
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 2180 North Loop West, Ste. 255 Houston, TX 77018					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Legal Fees					
Complete ONLY if direct expenditure to benefit C/Oh	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/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 44/75 Rpt: 56/87	2 FILER NAME Molina, Richard 3 Filer ID
4 Date 07/12/2021	5 Payee name Narvaez, Maria (Mrs.)
6 Amount (\$) \$80.00	7 Payee address; City; State; Zip Code 4420 N Jackson Edinburg, TX 78539
8 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/BBQ Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 08/20/2021	Payee name Nike Factory Store
Amount (\$) \$248.37	Payee address; City; State; Zip Code 5001 E Expressway 83, Suite 120 Mercedes, TX 78570
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 Shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date 07/28/2021	Payee name Ontiveros Printing
Amount (\$) \$55.00	Payee address; City; State; Zip Code 915 E Ferguson Ave Ste 5, Pharr, TX 78539
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 (Event Flyer)
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

Date 08/17/2021 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/23/2021	Molina, Richard Payee name Ontiveros Printing Payee address; City; State; 915 E Ferguson Ave Ste 5, Pharr, TX 78539 Category (See Categories listed at the top of this sche Advertising Expense	Office sought	Description	utside of Texas. Complete Schedule T. TX, officeholder living expense Office held
Date 08/17/2021 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/23/2021	Payee name Ontiveros Printing Payee address; City; State; 915 E Ferguson Ave Ste 5, Pharr, TX 78539 Category (See Categories listed at the top of this sche Advertising Expense Candidate/Officeholder name Ovalle, Jaime	edule) (b) Office sought	Check if travel ou Check if Austin,	TX, officeholder living expense
O8/17/2021 Amount (\$) 7 \$37.89 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/23/2021	Ontiveros Printing Payee address; City; State; 915 E Ferguson Ave Ste 5, Pharr, TX 78539 Category (See Categories listed at the top of this sche Advertising Expense Candidate/Officeholder name Ovalle, Jaime	edule) (b) Office sought	Check if travel ou Check if Austin,	TX, officeholder living expense
O8/17/2021 Amount (\$) 7 \$37.89 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/23/2021	Ontiveros Printing Payee address; City; State; 915 E Ferguson Ave Ste 5, Pharr, TX 78539 Category (See Categories listed at the top of this sche Advertising Expense Candidate/Officeholder name Ovalle, Jaime	edule) (b) Office sought	Check if travel ou Check if Austin,	TX, officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/23/2021	915 E Ferguson Ave Ste 5, Pharr, TX 78539 Category (See Categories listed at the top of this sche Advertising Expense Candidate/Officeholder name Ovalle, Jaime	edule) (b) Office sought	Check if travel ou Check if Austin,	TX, officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/23/2021	915 E Ferguson Ave Ste 5, Pharr, TX 78539 Category (See Categories listed at the top of this sche Advertising Expense Candidate/Officeholder name Ovalle, Jaime	edule) (b) Office sought	Check if travel ou Check if Austin,	TX, officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/23/2021	Category (See Categories listed at the top of this sche Advertising Expense Candidate/Officeholder name Ovalle, Jaime	Office sought	Check if travel ou Check if Austin,	TX, officeholder living expense
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/23/2021	Advertising Expense Candidate/Officeholder name Ovalle, Jaime	Office sought	Check if travel ou Check if Austin,	TX, officeholder living expense
expenditure to benefit C/OH Date 08/23/2021	Payee name Ovalle, Jaime			Office held
08/23/2021	Ovalle, Jaime			
08/23/2021	Ovalle, Jaime			
Amount (\$)	Payee address; City; State;			
Amount (4)		Zip Code		to the state of th
	502 Carlisle Ave., Apt. 1 Edinburg, TX 78539			
PURPOSE (a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule) (b)		utside of Texas. Complete Schedule T. TX, officeholder living expense
			Contract Labo	r
Complete ONLY if direct Cexpenditure to benefit C/OH	Candidate/Officeholder name O	Office sought		Office held
Date	Payee name			TOTAL TOTAL STREET
09/07/2021	Ovalle, Jaime			
\$600.00	502 Carlisle Ave., Apt. 1	Zip Code	radi mada radia	A particular section of the section
	Edinburg, TX 78539		CIME OF VIEW	(10)(16)
OF	Category (See Categories listed at the top of this school Salaries/Wages/Contract Labor	(b)		utside of Texas. Complete Schedule T. TX, officeholder living expense r
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name O	Office sought		Office held

SCHEDULE F1

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

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

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

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

Candidate/Officeholder/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: 46/75 Rpt: 58/87	Molina, Richard				
4 Date	5 Payee name				
09/20/2021	Ovalle, Jaime				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$700.00	502 Carlisle Ave., Apt. 1				
	y .				
	Edinburg, TX 78539				
8 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				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	Н				
Date	Payee name				
09/13/2021	Pizza Hut				
Amount (\$)	Payee address; City; State; Zip Code				
\$110.17	1802 South Closner				
	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				
	Food/event				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O					
Date	Payee name				
09/07/2021	Point Blank Political				
Amount (\$)	Payee address; City; State; Zip Code				
\$100.00	238 Wilshirt Blvd., #155				
	Casselberry, FL 32707				
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.				
EXI ENDITORE	Check if Austin, TX, officeholder living expense Adv. Event				
	Adv. Event				
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

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic		Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	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		3 Filer ID				
Sch: 47/75 Rpt: 59/87	Molina, Richard	10-19					
Date	5 Payee name						
09/07/2021	Quintero, Reyna						
Amount (\$)	7 Payee address; City; State; Zip Code						
\$350.00	1313 E. Daffodil Ave.						
	McAllen, TX 78501						
PURPOSE	(a) Category (See Categories listed at the top of this sch	hedule) (b) Description	NUMBER OF STREET				
OF EXPENDITURE	Reimbursement for events.		utside of Texas. Complete Schedule T.				
EXPENDITORE	And the second s		TX, officeholder living expense				
		Reimburseme	oursement for events.				
	1						
Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office sought	Office held				
Date	Payee name	The state of the s	rout 1				
08/25/2021	RRR Contruction LLC						
Amount (\$)	Payee address; City; State	e; Zip Code	The state of the s				
\$1,000.00							
	Edinburg, TX 78539						
PURPOSE	ACCOMMENDED AND THE CONTROL OF THE C	hedule) (b) Description	Electrical Electrical				
OF	(a) Category (See Categories listed at the top of this soft Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.				
EXPENDITURE	Januaries/ vvages/ Contract Eabor		Check if Austin, TX, officeholder living expense				
	None Comment	Contract Labo	or				
Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office sought	Office held				
experialitare to beriefit 6/6			<u> </u>				
Date	Payee name		NAMES OF THE OWNER OWNER OF THE OWNER OWN				
09/10/2021	Radio United						
Amount (\$)	Payee address; City; State; Zip Code						
\$500.00	1201 N. Jackson Rd., Suite 900						
	# Tendonic returning COAT Service And Tendonic Protection						
	McAllen, TX 78501						
PURPOSE		(b) Description	The second secon				
OF	(a) Category (See Categories listed at the top of this sch		utside of Tayas, Complete Schedule T				
EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	1000	Ad	enterente de transferior y mesta 🔻 el per 🕶 (p. 1766)				
		V 29					
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held				
expenditure to benefit C/C		-					

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/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District
OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Sch: 48/75 Rpt: 60/87 Molina, Richard 4 Date Payee name 09/22/2021 Ramos, Aimee State; Zip Code 6 Amount (\$) Payee address; City; \$300.00 902 S. 19th Ave. Edinburg, TX 78539 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Contract Labor Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 08/04/2021 Reyes, Joel (Mr.) Payee address; City; State; Zip Code Amount (\$) \$60.00 2202 Gary Lane Edinburg, TX 78542 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Music Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/30/2021 Reyes, Joel (Mr.) Payee address; State; Zip Code Amount (\$) City; \$150.00 2202 Gary Lane Edinburg, TX 78542 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Event Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Music Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District Gilt/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.
	otal pages Schedule F1:	2 FILER NAME 3 Filer ID
S	Sch: 49/75 Rpt: 61/87	Molina, Richard
	ate	5 Payee name
0	9/08/2021	Reyes, Rosa
Α Α	mount (\$) \$250.00	7 Payee address; City; State; Zip Code 321 N. M Rd. Edinburg, TX 78542
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF 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 <u>ONLY</u> if direct xpenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
C	Pate	Payee name
C	7/14/2021	Rio Grande Guardian
A	\$1,500.00	Payee address; City; State; Zip Code P.O Box 5057 McAllen, TX 78502
	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 Advertising
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
[Pate	Payee name
C	9/17/2021	Rio Outdoor
P	st,000.00	Payee address; City; State; Zip Code 1217 S Closner Blvd Edinburg, TX 78539
	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 Sign
_	Complete ONLY if direct	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		ct ttegory not listed above)			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 50/75 Rpt: 62/87	Molina, Richard				
4	Date	5 Payee name				
	08/27/2021	Rios, Irene				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$400.00	119 N 13th Street				
		Edinburg, TX 78539				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Event Expense				
	EXI ENDITORE	Check if Austin, TX, officeholder living e	xpense			
		Decorations				
L						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	1			
L	a. 59° 0. ■ 1919 ye ee ya 2012 2000 ya 2012 2012 2013 2014 2014 2014 2014 2014 2014 2014 2014					
	Date	Payee name				
	08/23/2021	Rodriguez, Lupe (Mr.)				
Г	Amount (\$)	Payee address; City; State; Zip Code				
ı	\$250.00	906 W. Puente St				
ı						
	Edinburg, TX 78541					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
ı	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Compl				
ı	Check if Austin, TX, officeholder living expense Contract Labor					
ı	Contract Labor					
H	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O					
H	Date	Pavez name				
	08/24/2021	Payee name Rodriguez, Lupe (Mr.)				
L		200 CO 100 CO 10				
1	Amount (\$)	Payee address; City; State; Zip Code				
ı	\$1,000.00	906 W. Puente St				
ı						
L		Edinburg, TX 78541				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	23 34 55 32 105			
ı	OF EXPENDITURE	Salaries/Wages/Contract Labor				
ı		Check if Austin, TX, officeholder living e	xpense			
		Contract Labor				
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	4			
	expenditure to benefit C/O	H Office rought Office reli				
\vdash	9					

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
Т	otal pages Schedule F1:	2 FILER NAME 3 Filer ID						
	Sch: 51/75 Rpt: 63/87	Molina, Richard						
C	ate	5 Payee name						
0	7/01/2021	STX Venom 12U						
Δ	mount (\$)	7 Payee address; City; State; Zip Code						
	\$100.00	4716 E. Richardson Rd.						
		Edinburg, TX 78539						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee						
	complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						
С	ate	Payee name						
C	8/02/2021	Saenz, Ruben						
Α	mount (\$) \$400.00	Payee address; City; State; Zip Code 1914 Mesa Drive Edinburg, TX 78539						
_	PURPOSE	3 Terrena tarri ≠ 6 prijanten ostovorije						
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Music						
	complete <u>ONLY</u> if direct xpenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	eate 8/12/2021	Payee name Saenz, Veronica (Ms.)						
Α	smount (\$) \$100.00	Payee address; City; State; Zip Code 803 Royal St						
		Edinburg, TX 78539						
	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						

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 Legal Services

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. 3 Filer ID 1 Total pages Schedule F1: FILER NAME Sch: 52/75 Rpt: 64/87 Molina, Richard 4 Date Payee name 08/16/2021 Salazar, Jose 6 Amount (\$) Payee address; City; State; Zip Code \$120.00 616 Anchor Ave Edinburg, TX 78542 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food Exp. Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 08/11/2021 Salazar, Jose Payee address; City; State; Zip Code Amount (\$) \$50.00 616 Anchor Ave Edinburg, TX 78542 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food Exp. Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 08/23/2021 Salazar, Jose Payee address; City; State; Zip Code Amount (\$) \$350.00 616 Anchor Ave Edinburg, TX 78542 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Food Exp. KickOff

Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental 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: 53/75 Rpt: 65/87	Molina, Richard
4	Date	5 Payee name
	09/10/2021	Salazar, Jose
6	Amount (\$) \$280.00	7 Payee address; City; State; Zip Code 616 Anchor Ave
-	DUDDOCE	Edinburg, TX 78542
8	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/event
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/27/2021	Salazar, Jose
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 616 Anchor Ave Edinburg, TX 78542
_	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/Event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/26/2021	Sams
	Amount (\$) \$263.78	Payee address; City; State; Zip Code 7601 N 10th St
		McAllen, TX 78504
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/Waters/Event
	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 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 type a settency politisted above)

Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1 Total pages Schedule F1: Sch: 54/75 Rpt: 66/87	2 FILER NAME Molina, Richard 3 Filer ID
4 Date 07/27/2021	5 Payee name Sams
6 Amount (\$) \$244.33	7 Payee address; City; State; Zip Code 7601 N 10th St McAllen, TX 78504
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/Waters/Event
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 08/06/2021	Payee name Sams
Amount (\$) \$216.37	Payee address; City; State; Zip Code 7601 N 10th St McAllen, TX 78504
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Food/Waters/Event
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 08/10/2021	Payee name Sams
Amount (\$) \$68.86	Payee address; City; State; Zip Code 7601 N 10th St McAllen, TX 78504
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/waters/event
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	s/ Donations Made By e/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services The Instruction Guide ex	Salaries/Wag	nse es/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above	e)
Total page:	s Schedule F1:	2 FILER NAM	ИE		27	3 Filer ID	
	'5 Rpt: 67/87	Molina, Ri	ichard			Licensia C., in the club	
Date		5 Payee nam	ne			1,19 (1)	
08/10/202	21	Sams					
Amount (\$))	7 Payee add	ress; City;	State; Zip Code		CONSTRUCTION TO THE RESERVE OF THE PERSON OF	CHILL
	\$198.59	7601 N 10	Oth St	,p	10017 51		
PURPO	OSE		(See Categories listed at the top o	t this schodule) (b) Description	with the latest terms of t	4
OF EXPENDI		Event Exp		Titlis scriedure)	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense event	
	ONLY if direct e to benefit C/O		Officeholder name	Office sough	t III sale III sale	Office held	
Date		Payee nam	ne			in the Albert	TITI
08/16/202	21	Sams					
Amount (\$)	\$57.60	Payee addi 7601 N 10 McAllen, 7	Oth St	State; Zip Code	PROPERTY OF	ma carer on the contract of th	
PURPO OF EXPENDI		STATE OF THE PARTY	(See Categories listed at the top o	f this schedule) (b		outside of Texas. Complete Schedule T. n, TX, officeholder living expense	1111
	ONLY if direct e to benefit C/O		Officeholder name	Office sough	t	Office held	ngca-
Date 08/25/202	21	Payee nam Sams	ne		-101	(2 acrs), 1 / 6,3510	
Amount (\$)	\$191.88	Payee add	Oth St	State; Zip Code		A VIII TROSER	
		McAllen,			1171.111.11	JIIIII CON	
PURPO OF EXPENDI		Event Exp	(See Categories listed at the top o	f this schedule) (b		outside of Texas. Complete Schedule T. n, TX, officeholder living expense /event	

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (expense a sategory not listed above)

Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 56/75 Rpt: 68/87	Molina, Richard
4 Date	5 Payee name
09/14/2021	Sams
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$102.11	7601 N 10th St
	McAllen, TX 78504
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
MINARAL PARAMETER	Food/Drinks
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
08/27/2021	Santiago, Padini
Amount (\$)	Payee address; City; State; Zip Code
\$120.00	3633 Monette Street
	Edinburg, TX 78539
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Pictures
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
09/02/2021	Satori Display
Amount (\$)	Payee address; City; State; Zip Code
\$428.67	
	McAllen, TX 78501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Decorations
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
	This Commission was other state by us

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.
L Total pages Schedule F1:	
Sch: 57/75 Rpt: 69/87	Molina, Richard
Date	5 Payee name
09/13/2021	Shipleys
\$ Amount (\$) \$87.24	7 Payee address; City; State; Zip Code 1900 W University Edinburg, TX 78539
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donuts/Event
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/19/2021	Solis, Roel (Mr.)
Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 2671 Edinburg, TX 78540
DUDDOCE	Annual purities - 5 September 1995
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/O	Candidate/Officeholder name Office sought Office held
Date 07/27/2021	Payee name Solis, Roel (Mr.)
Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 2671
	Edinburg, TX 78540
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

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	- Gift/Awards/Memorials Expense Printing Expense 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: 58/75 Rpt: 70/87	Molina, Richard
4	Date	5 Payee name
	08/02/2021	Solis, Roel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$350.00	P.O.Box 2671
		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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
\vdash	100 M	
	Date	Payee name
L	08/05/2021	Solis, Roel
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O.Box 2671
		Edinburg, TX 78540
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ı	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
ı	E/II EIIOII OIIE	Check if Austin, TX, officeholder living expense Contract Labor
l		Contract Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	[TAND AND DESCRIPTION OF A PART OF A
F	Date	Payee name
	08/10/2021	Solis, Roel
H	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O.Box 2671
	4000100	
l		Edinburg, TX 78540
L		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salarias (Magas (Contract Labor) Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Contract Labor
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		
l		
E	orms provided by Texas E	thics Commission www.ethics.state.tx.us Version V1.1.191b50
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SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Constitutions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 59/75 Rpt: 71/87	Molina, Richard
4 Date 08/12/2021	5 Payee name Solis, Roel
5 Amount (\$) \$700.00	7 Payee address; City; State; Zip Code P.O.Box 2671 Edinburg, TX 78540
B 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 08/30/2021	Payee name Solis, Roel
Amount (\$) \$200.00	Payee address; City; State; Zip Code P.O.Box 2671 Edinburg, TX 78540
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/O	Candidate/Officeholder name Office sought Office held
Date 08/30/2021	Payee name Solis, Roel
Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O.Box 2671
	Edinburg, TX 78540
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/O	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H

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/Political Credit Card Payment	
1 Total pages Schedule F1: Sch: 60/75 Rpt: 72/87	2 FILER NAME Molina, Richard 3 Filer ID
4 Date 09/02/2021	5 Payee name Solis, Roel
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P.O.Box 2671 Edinburg, TX 78540
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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 09/02/2021 Amount (\$) \$200.00	Payee name Solis, Roel Payee address; City; State; Zip Code P.O.Box 2671
PURPOSE OF EXPENDITURE	Edinburg, TX 78540 (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/OI	Candidate/Officeholder name Office sought Office held
Date 09/07/2021	Payee name Solis, Roel
Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O.Box 2671 Edinburg, TX 78540
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

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Pollin - Gift/Awards/Memorials Expense Printi Il Committee Legal Services Salar	e Overhead/Rental Expense ng Expense ng Expense ries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
on environmental superior of the superior of t	The Instruction Guide explains how to	and the state of t				
	2 FILER NAME	3	Filer ID			
Sch: 61/75 Rpt: 73/87	Molina, Richard	A TOTAL OF THE PARTY OF THE PAR	large of the same and			
Date	5 Payee name		195			
09/13/2021	Solis, Roel					
Amount (\$) \$200.00	7 Payee address; City; State; Zip P.O.Box 2671 Edinburg, TX 78540	Code	(8-W) CC M/G			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Deposite Transfer			
OF EXPENDITURE	Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T.			
EXPENDITURE		Check if Austin, TX,	t, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought	Office held			
Date	Payee name	and the second	Migration 1990			
09/21/2021	Solis, Roel					
Amount (\$)	Payee address; City; State; Zip	Code	me 10 mile			
\$500.00	P.O.Box 2671					
PURPOSE	Edinburg, TX 78540 (a) Category (See Categories listed at the top of this schedule)	(b) Description	aming a start in			
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outsi	ide of Texas. Complete Schedule T. r, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office	sought	Office held			
Date	Payee name	THE RESERVE OF THE PERSON OF T	No. of the last of			
08/30/2021	Sosa, Maria Elena		Marian Burnar			
Amount (\$) \$500.00	Payee address; City; State; Zip 10731 Hernandez Dr. Edinburg, TX 78539	Code				
PURPOSE						
OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ide of Texas. Complete Schedule T. , officeholder living expense			
Complete ONLY if direct expenditure to benefit C/Oh		sought	Office held			

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

	Candidate/Officeholder/Political Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 62/75 Rpt: 74/87	Molina, Richard
4	Date	5 Payee name
740	08/30/2021	Stripes
6	Amount (\$)	7 Payee address; City; State; Zip Code
ı	\$54.31	1606 E. Richardson Rd.
ı		
ı		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
-	OF	Food/Beverage Expense
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
ı		Drinks/Waters/Ice
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
ı	Date	Payee name
L	09/20/2021	StrongBlue
	Amount (\$)	Payee address; City; State; Zip Code
ı	\$1,000.00	700 West Cano
ı		
l		Edinburg, TX 78539
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ı	OF EXPENDITURE	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
ı		Contract Labor
ı		
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ı	expenditure to benefit C/O	H de the state of
F	Date	Payee name
l	07/27/2021	Subway
Н	Amount (\$)	Payee address; City; State; Zip Code
ı	\$51.90	2005 S. Closner Blvd.
ı		
ı		Edinburg, TX 78539
H	PURPOSE	
ı	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.
ı	EXPENDITURE	Check if Austin, TX, officeholder living expense
ı		Food/event
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experience to belieff 6/0	
1		
ı		

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Polling Expense Printing Expense Printing Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel in District Travel Out of District OTHER (enter a category not listed above	e)
Total pages Sche	edule F1: 2	FILER NAM	ИE			3 Filer ID	
Sch: 63/75 Rpt	i: 75/87	Molina, Ri	ichard			be a mile of the second	
Date	5	Payee nam	ne			rior unit il 1	
07/27/2021		Subway					
Amount (\$)	7	Payee addr	ress; City;	State; Zip Co	ode	The same of the sa	-
	\$34.60		Closner Blvd.				
PURPOSE	(٤	1 - 0800000 mondes	(See Categories listed at the top	of this schedule)	(b) Description	Transfer Doctor	
OF EXPENDITURE			rerage Expense	Ul will and	Check if trav	rel outside of Texas. Complete Schedule T.	
EAFEIGHT			nacomer.		Check if Aus Food/Event	stin, TX, officeholder living expense	
Complete ONLY expenditure to be		Candidate/O	Officeholder name	Office sou	ight	Office held	
Date		Payee nam	ne			TID THES	-17
09/01/2021		Sunoco				TOUR LEVE	
Amount (\$)	and the state of	Payee address; City; State; Zip Code					
	\$68.13	1606 East Richardson					
		Edinburg,	, TX 78541		January XI	puping	
PURPOSE OF EXPENDITURE			(See Categories listed at the top verage Expense	of this schedule)		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense	
Complete ONLY expenditure to be		Candidate/C	Officeholder name	Office sou	ıght	Office held	erio.
Date 09/17/2021		Payee nam Sunoco	ie			matrice Paris	002
Amount (\$)	\$74.00		lress; City; st Richardson , TX 78541	State; Zip Co	ode	man and the ending	
PURPOSE	(1		(See Categories listed at the top	t it I bedida)	(b) Description	342100	
OF EXPENDITURE			(See Categories listed at the top verage Expense	of this schedule)	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense er/Ice	
Complete ONLY			Officeholder name	Office sou	ight	Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		nmittee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide			Expens Wages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAMI		- 204-mile II				3	Filer ID	
_	Sch: 64/75 Rpt: 76/87		Molina, Ric								
4	Date	5	Payee name)							
	09/22/2021		Sunoco								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip C	ode				
	\$51.00		1606 East	Richardson							
	Westername.										
			Edinburg, 7	ΓX 78541							
8	PURPOSE	(a)	Category (S	See Categories listed at the t	op of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Food/Beve	rage Expense						de of Texas. Complete Schedule T.	
	Parties of Photological Republic Control Active Property of the Control Contro						1	Drinks/Ice	, 1,	officeholder living expense	
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9	Complete ONLY if direct	Щ	Candidate/Off	ficeholder name		ffice so	ught		_	Office held	
n	expenditure to benefit C/O		Januldate/On	ncenoider flame		nice so	ugnt			Office field	
	Date	Г	Payee name)							
	08/02/2021		Sunoco								
Т	Amount (\$)	Т	Payee addre	ess; City;	State;	Zip C	ode				
\$41.46 1606 East Richardson											
			Edinburg,	TX 78541							
-	PURPOSE	(2)					(h)	Description	_		_
	OF	الم		See Categories listed at the terage Expense	op of this sche	edule)	1(3)		outsi	de of Texas. Complete Schedule T.	
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	Complete ONLY if direct		Candidate/Of	ficeholder name	O	ffice so	ught			Office held	
	expenditure to benefit C/OI	Н									
	Date	Γ	Payee name	9							
	08/09/2021		Sunoco								
	Amount (\$)	Т	Payee addre	ess; City;	State;	Zip C	Code				
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	at acoust to the										
			Edinburg,	TX 78541							
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	expenditure to benefit C/O									HANDON MARIAN PROPERTY A TO	
\vdash		_							_		

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

The Instruction Guide explains how to complete this form. Total pages Schedule F1: Sch: 65/75 Rpt: 77/87	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense P Gift/Awards/Memorials Expense P I Committee Legal Services S	rffice Overhead/Rental Expense olling Expense rinting Expense alaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
Sch: 65/75 Rpt: 77/87 Molina, Richard Molina, Richard State: 5 Payee name Sunoco	Superante source and the second source and t	100 miles (100 miles 100 miles	w to complete this form.			
Date 08/16/2021 Amount (\$) \$52.48 PURPOSE OF EXPENDITURE (a) Category (see Categories Stord at the top of this schedule) (b) Description Candidate/Officeholder name Office sought Office held PURPOSE OF EXPENDITURE (b) Description Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date 08/17/2021 Amount (\$) Payee name Sunoco 1606 East Richardson Edinburg, TX 78541 PURPOSE OF EXPENDITURE (a) Category (see Categories Stord at the top of this schedule) (b) Description Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Payee address; City; State; Zip Code Complete ONLY if direct expenditure to benefit C/OH Complete ONLY	Total pages Schedule F1:	50 C C C C C C C C C C C C C C C C C C C	;	3 Filer ID		
Amount (\$)	Sch: 65/75 Rpt: 77/87	Molina, Richard	, material			
Amount (\$)	Date	5 Payee name		to Congress of the Congress of		
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PURPOSE OF EXPENDITURE	Amount (\$)	7 Payee address: City: State: 7	Zip Code	The state of the s		
Food/Beverage Expense Check it ravel outside of Texas. Complete Schedule T.		1606 East Richardson	Proffpet die			
Food/Beverage Expense Check it ravel outside of Texas. Complete Schedule T.	PURPOSE	(a) Category (See Categories listed at the tax of this cahed	(b) Description	PURITY TO THE PROPERTY OF THE PURITY OF THE		
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Payee name Sunoco		12 (Leiten 90)	Drinks/Ice			
Payee name Sunoco						
Amount (\$)	Complete ONLY if direct expenditure to benefit C/O		ce sought	Office held		
Sunoco Amount (\$) Payee address; City; State; Zip Code ### Food/Beverage Expense Candidate/Officeholder name Candidate	Date	Pavee name				
Amount (\$)	08/17/2021					
### Sensor ### Sensor ### Edinburg, TX 78541 Category			Zin Cada			
Edinburg, TX 78541 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Date						
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Drinks/Waters/Ice Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Payee name Sunoco Amount (\$) Payee address; City; State; Zip Code 1606 East Richardson Edinburg, TX 78541 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Office held Office held	\$69.02	1606 East Richardson				
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Complete ONLY if direct expenditure to benefit C/OH Date						
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\$74.00 1606 East Richardson 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 Drinks/waters/ice Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Amount (\$)	Pavee address: City: State:	7in Code	and the second		
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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 Drinks/waters/ice Complete ONLY if direct Candidate/Officeholder name Office sought Office held		S264014Y 4 14 11 11 12 12 12 12 12 12 12 12 12 12 12				
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			Drinks/waters/	lice		
			ce sought	Office held		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Constituing Expense Contributions/ Donations Made By Candidate/Officeholder/Political 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: 66/75 Rpt: 78/87	Molina, Richard
4	ACT OF THE CONTRACT OF THE CON	5 Payee name
	08/24/2021	Sunoco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.60	1606 East Richardson
		87-8007-15 (F-16-800799-6-07-80)
L		Edinburg, TX 78541
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if traval outside of Taxas 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
		Drinks/Ice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OF	
ſ	Date	Payee name
	07/01/2021	Switcher Studio
Γ	Amount (\$)	Payee address; City; State; Zip Code
	\$45.00	1302 Clear Springs Trace
	40 10 000000	
		Louisville, KY 40223
Γ	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
	in inva communication (STA 1975/ASIA (1981))	App
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Н
Γ	Date	Payee name
	08/02/2021	Switcher Studio
Γ	Amount (\$)	Payee address; City; State; Zip Code
	\$45.00	1302 Clear Springs Trace
		Louisville, KY 40223
Γ	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
	N 2010 THE SECOND SECON	Check if Austin, TX, officeholder living expense App
		1
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
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SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 67/75 Rpt: 79/87	Molina, Richard
_	Date	5 Payee name
	09/01/2021	Switcher Studio
7	Amount (\$)	7 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) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if Austin, TX, officeholder living expense App
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
-	09/09/2021	Telles, Oscar
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 204 E. David Ibarra
_		Elsa, TX 78543
	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
	Date 07/29/2021	Payee name The Print Shop
	Amount (\$) \$60.00	Payee address; City; State; Zip Code 3906 S. Jackson Rd. Edinburg, TX 78539
	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 (Event Flyer)

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Travel Out of District

Transportation Equipment & Related Expense Travel in District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 68/75 Rpt: 80/87 Molina, Richard 4 Date Payee name 08/09/2021 The Print Shop 6 Amount (\$) Payee address; City; State; Zip Code \$1,039.20 3906 S. Jackson Rd. Edinburg, TX 78539 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Advertising Expense Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/03/2021 Tsunami Sushi Amount (\$) Payee address; City; State; Zip Code \$100.92 2708 Cornerstone Blvd. Edinburg, TX 78539 **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/event Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/26/2021 **Upper Valley Mail Services** Payee address; City; State; Zip Code Amount (\$) \$1,687.58 1418 Beech Ave # 109, Mcallen, TX 78504 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Post Cards Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Food/Beverage Expense Polling Exper y - Gift/Awards/Memorials Expense Printing Expe al Committee Legal Services Salaries/Wag	ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)				
NOV 1996 S 10.0 NO. 12 P.	The Instruction Guide explains how to comp	* X *** Y \$1,50 ** C Y \$1,50 C Y \$1,00 C Y \$1,00 C				
. Total pages Schedule F1:	****	3 Filer ID				
Sch: 69/75 Rpt: 81/87	Molina, Richard					
Date 00/13/2021	5 Payee name					
09/13/2021	Valero	77207				
Amount (\$) \$51.95	7 Payee address; City; State; Zip Code 1611 S. Closner Blvd. 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 Drinks/Ice				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht Office held				
Date	Payee name	0.00				
09/20/2021	Valero					
Amount (\$)	Payee address; City; State; Zip Code	e III				
\$64.35	1611 S. Closner Blvd. Edinburg, TX 78539	h) Description				
OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Drinks/Ice				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht Office held				
Date 08/02/2021	Payee name Valero	manus sunda Esticativi de Santa Maria				
Amount (\$) \$39.29	Payee address; City; State; Zip Code 1611 S. Closner Blvd. Edinburg, TX 78539					
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 Drinks/Ice				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht Office held				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees
Food/Beverage Expense Polling Expense

Credit Card Payment The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID	
Sch: 70/75 Rpt: 82/87 Molina, Richard	
4 Date 5 Payee name	
08/04/2021 Valero	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$60.00 1611 S. Closner Blvd.	
Edinburg, TX 78539	
8 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.	
Check If Austin, TX, officeholder living expense Drinks/Ice	
Dillika/ice	
	_
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	_
08/03/2021 Vela, Jose	
Amount (\$) Payee address; City; State; Zip Code	
\$450.00 1919 Ash Circle	
\$450.00 I 1919 ASIT CITCLE	
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.	
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Food	
	_
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
expenditure to benefit C/OH	
Date Payee name	
07/06/2021 Victors Trailers	
Amount (\$) Payee address; City; State; Zip Code	
\$314.33 101 East Owassa Rd	
Edinburg TV 70E44	
Edinburg, TX 78541	
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.	
Check it Adam, 1.A, officerolder living expense	
Trailers	
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Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
experience to belieful every	

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 71/75 Rpt: 83/87	Molina, Richard
ì	Date	5 Payee name
	07/16/2021	Whataburger
	Amount (\$) \$143.49	7 Payee address; City; State; Zip Code 1717 East University Dr Edinburg, TX 78541
80	PURPOSE	serious de differente Contraction (en angelet)
9	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/Event
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
-	Date	Payee name
	07/16/2021	Whataburger
-	Amount (\$)	Payee address; City; State; Zip Code
	\$6.20	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/Event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 07/30/2021	Payee name Whataburger
	Amount (\$) \$59.57	Payee address; City; State; Zip Code 1717 East University Dr
_	[9]	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/event

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Fees Food/B

	Contributions/ Donations Made By- Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 72/75 Rpt: 84/87	Molina, Richard				
4	Date	5 Payee name				
6	07/30/2021	Whataburger				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$7.95	1717 East University Dr				
		Edinburg, TX 78541				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
1000	OF EXPENDITURE	Food/Beverage Expense				
	EXPENDITORE	Check if Austin, TX, officeholder living expense				
		Food/event				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
	Date	Payee name				
	07/30/2021	Whataburger				
Г	Amount (\$)	Payee address; City; State; Zip Code				
	\$27.94	1717 East University Dr				
	\$75000 E					
		Edinburg, TX 78541				
⊢	PURPOSE	Table 1				
ı	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.				
ı	EXPENDITURE	Check if Austin, TX, officeholder living expense				
ı		Food/event				
ı						
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
L	expenditure to benefit C/OI	1				
Γ	Date	Payee name				
	08/06/2021	Whataburger				
Г	Amount (\$)	Payee address; City; State; Zip Code				
	\$123.96	1717 East University Dr				
		Edinburg, TX 78541				
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
ı	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.				
ı	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Food/event				
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
Г						
ĺ						
•						

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

1 Total pag	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		The Instruction Guide ex	plains how to comp	es/Contract Labor plete this form.	OTHER (enter a category not listed above)
	es Schedule F1:					3 Filer ID
Sch: 73/	75 Rpt: 85/87	Molina, Ric	chard		That	antique (Figure 1991) 5.25 miles
Date		5 Payee name	9			A CONTRACTOR OF THE CONTRACTOR
08/24/20	021	Whataburg	jer			
6 Amount (\$) \$65.94	7 Payee addre 1717 East Edinburg,	University Dr	State; Zip Code	All Completes	
PURF	POSE	(a) Category (s	See Categories listed at the top of	this schedule) (b) Description	ya, no lili
EXPENI	F DITURE		rage Expense	uno sancado,	Check if travel of	outside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete expenditu	ONLY if direct ure to benefit C/OI		ficeholder name	Office sough	t	Office held
Date		Payee name	9			MI PART I
08/31/20	021	Whataburg	jer			
Amount (\$79.66	15-17-001 19. G	University Dr	State; Zip Code	19	and the second s
		Edinburg, ⁻	WENGER TRACE		• ***	TOTAL
PURF O EXPENI	F		See Categories listed at the top of rage Expense	this schedule) (b		outside of Texas. Complete Schedule T. TX, officeholder living expense
	ONLY if direct ure to benefit C/O		ficeholder name	Office sough		Office held
Date 09/07/20	021	Payee name Whataburg			Father Last Co	COMPANY STATES
Amount (\$) \$93.93	Payee addre 1717 East Edinburg, 7	University Dr	State; Zip Code	Lamid Mark	w social scores
PURF	POSE		See Categories listed at the top of	ula alta de la Ide) Description	
EXPEN	F		rage Expense	unis schedule)	Check if travel of	outside of Texas. Complete Schedule T. TX, officeholder living expense
	ONLY if direct are to benefit C/O		ficeholder 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

Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	,	Travel Out of District OTHER (enter a category not listed above)							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID								
Sch: 74/75 Rpt: 86/87	Molina, Richard								
4 Date 09/17/2021	5 Payee name Whataburger								
6 Amount (\$) \$107.56	7 Payee address; City; State; Zip Code 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 (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/event	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	e <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held ure to benefit C/OH								
Date	Payee name								
08/17/2021	Xpress Printing								
Amount (\$) \$595.38	Payee address; City; State; Zip Code \$595.38 3017 Sugar Rd Edinburg, TX 78539								
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 Shirts	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Complete ONLY if direct candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
Date 08/26/2021									
Amount (\$) Payee address; City; State; Zip Code \$20.56 4504 W. Monte Cristo Rd. Edinburg, TX 78542									
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/event	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH								
Forms provided by Texas B	Ethics Commission www.ethics.state.tx.us Version V1.1.19	1b5cd							

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

L	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal S The I	ards/Memorials Expense iervices nstruction Guide exp		ges/Contract Labor	Travel Out of District OTHER (enter a cate	gory not listed above)			
	Total pages Schedule F1: Sch: 75/75 Rpt: 87/87	Molina, Richard	Filer ID	Filer ID						
4	Date 08/26/2021	5 Payee name Zamora's Restaurant								
	Amount (\$) \$11.21	7 Payee address; City; State; Zip Code 4504 W. Monte Cristo Rd. Edinburg, TX 78542								
8	PURPOSE OF EXPENDITURE	F (See Categories listed at the top of this sch			(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/event					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou			ught Office held					