CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Co	ommission Filers)	2 Total pages file	14
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mr	FIRST Jesus		MI M	OFFICE	USE ONLY
NAME	NICKNAME "Chuy"	LAST Dominguez		SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;		redo, Tx	78041	EC'D CITY S JUL 13'22 P	
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	(956)	337-9093	EXTENSIO	ON		or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		МІ	Receipt #	Amount \$
NAME		Miguel		A	Date Processed	
	NICKNAME	Flores		SUFFIX	Date Imaged	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / S	UITE #; CITY;	-	STATE;	ZIP CODE
TREASURER ADDRESS	2612 Burke I	Dr	Lare	do,	Tx	78045
(Residence or Business)						
8 CAMPAIGN TREASURER PHONE	(956)	PHONE NUMBER 471-8141	EXTENSIO	ON		
9 REPORT TYPE	January 15	30th day before e	election Run	off	15th day af treasurer a (Officeholde	
	July 15	8th day before ele	CUOII	eeded Modified orting Limit	Final Repo	rt (Attach C/OH - FR)
10 PERIOD COVERED	Month 1	Day Year / 1 / 22	THROUGH	Month 6	Day Yea / 30 / 22	
11 ELECTION	ELECTION DA Month Day 11 / 8	Year Primary 22 General	Runoff Special	Other Description	E	
12 OFFICE	OFFICE HELD (if any) Municipal C		13 OFFICE S	SOUGHT (if know	m)	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	CE OF POLITICAL CONTRIBUTIONS CEHOLDER. THESE EXPENDITURE S AND OFFICEHOLDERS ARE REQU	S MAY HAVE BEEN MADE	MITHOUT THE CAI	NDIDATE'S OR OFFICEHO	LDER'S KNOWLEDGE OR
	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TRI	EASURER NAME			
		COMMITTEE CAMPAIGN TR	REASURER ADDRESS			
_		20.70	DACEO			
		60 10	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Jesus M "Chuy" Dom	inguez	16 Filer ID (E	Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THA PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	N \$	
	 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 	\$	12,350.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	
	4. TOTAL POLITICAL EXPENDITURES	\$	1,460.38
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA OF REPORTING PERIOD	AST DAY \$	103,330.75
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS CLAST DAY OF THE REPORTING PERIOD	\$	52,132.00
		Candidate or Of	
	riease complete either opiion belo	w.	
(1) Affidavit	Dora Irene Hernandez My Commission Expires 11/20/2022 ID No 131801825		
NOTARY STAMP/SEA		1244	71.
40	before me by 19345 M. D. this the which, witness my hand and seal of office.	e 10" da	y of Jilly
Mad. Hunce	Dra I Honordo	No	e of officer administering oath
	OR		
(2) Unsworn Declarati			
My name is	, and my date of birth	is	
, addiese is		(state) (zip	code) (country)
Executed in	County, State of, on theday of(mor		
	Signature of Can	didate/Officehol	der (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	FILER NAME esus M. "Chuy" Dominguez	20 Filer ID (Ethics Com	ımissi	on Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	12,350.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	1,460.38
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUI	NDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT	TIONS RETURNED	\$	

SCHEDULE A1

		. = = ::= :		
The	Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 7
2 FILER NAME Jesus M "C	huy" Dominguez			3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2022	 5 Full name of contributor Cesar Faz 6 Contributor address; 8402 Mahogany Ct I 	City;		7 Amount of contribution (\$) 500.00
8 Principal occup Business Own	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date 03/05/2022	Contributor address;	City;	State; Zip Code Texas 78045	Amount of contribution (\$) 250.00
Principal occup Business Owr	ation / Job title (See Instructions)		Employer (See Instruction MAGE 4GROUP LTI	
Date	Full name of contributor Contributor address;	out-of-state PAG	State; Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor Contributor address;		C (ID#:) State; Zip Code	Amount of contribution (\$)
Principal occup	eation / Job title (See Instructions)		Employer (See Instruc	tions)
	ATTACH ADDITIO	NAL COPIES	OF THIS SCHEDULE AS N	NEEDED
	If contributor is out-of-state PAC, p	olease see Insti	ruction guide for additional	reporting requirements.

SCHEDULE A1

The	Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 7
2 FILER NAME Jesus M. "C	Chuy" Dominguez			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Frank M. Rotnofsky	out-of-state PA(C (ID#:)	7 Amount of contribution (\$)
06/22/2022	6 Contributor address; 901 Victoria Ste A	c _{ity;} Laredo	State; Zip Code Texas 78040	1,000.00
8 Principal occup Business Own	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor		C (ID#:)	Amount of contribution (\$)
06/24/2022	Contributor address;	City;	State; Zip Code	1,000.00
	PO Box 6237	Laredo,	Texas 78042	
Principal occup Attorneys	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor Hector J. Garcia	out-of-state PA	C (ID#)	Amount of contribution (\$)
06/24/2022	Contributor address;	City;	State; Zip Code	1,000.00
	2502 O'Kane	Laredo,	Texas 78043	1,000100
Principal occup General Mgr.	pation / Job title (See Instructions)		Employer (See Instruc La Posada	ctions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
06/28/2022	Jorge N Larralde			F00 00
	Contributor address;	City;	State; Zip Code	500.00
	1315 Cross Country	Laredo, 1	Texas 78045	
Principal occup US Customs I	pation / Job title (See Instructions) Broker		Self	tions)
	ATTACH ADDITIO		OF THIS SCHEDULE AS I	

SCHEDULE A1

The	Instruction Guide explains how to	complete this	s form.	1 Total pages Schedule A1: ¶
2 FILER NAME Jesus M "C	huy" Dominguez			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Rodolfo Delgado	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
06/29/2022	6 Contributor address; 415 Westmont Dr	city; _aredo, 1	State; Zip Code	250.00
8 Principal occup US Customs E	pation / Job title (See Instructions) Broker		9 Employer (See Instruct	tions)
Date	Full name of contributor Gregorio Salazar	out-of-state PAG	C (ID#:)	Amount of contribution (\$)
06/29/2022	Contributor address;	City;	State; Zip Code	500.00
	314 Manor Rd	Laredo,	Texas 78041	
Principal occup US Customs E	ation / Job title (See Instructions) Broker		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
06/29/2022	Santiago Lozano Contributor address;	City;	State; Zip Code	150.00
	8912 Orange Blossom L			100.00
Principal occup US Customs E	action / Job title (See Instructions)		Employer (See Instruction Self	tions)
Date	Full name of contributor Nydia Garcia Peña	out-of-state PA	C (ID#:)	Amount of contribution (\$)
06/29/2022	Contributor address;	City;	State; Zip Code	250.00
	1514 Convent Ave	Laredo,	Texas 78040	200.00
Principal occup US Customs I	Pation / Job title (See Instructions) Broker		Employer (See Instruc	tions)
	ATTACHADDITION	VAL COPIES	OF THIS SCHEDULE AS N	NEEDED
	If contributor is out-of-state PAC, pl			

SCHEDULE A1

		, –		
The	Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1: 有
² FILER NAME Jesus M "C	huy" Dominguez			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Humberto Martinez	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
06/29/2022	6 Contributor address; PO Box 2246	city;	State; Zip Code Fexas 78044	300.00
8 Principal occup Business Own	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	Full name of contributor George J Altgelt	out-of-state PA	C (ID#:)	Amount of contribution (\$)
06/29/2022		City;	State; Zip Code Texas 78045	400.00
Principal occup Attorney	nation / Job title (See Instructions)		Employer (See Instruc	itions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
06/29/2022	Fernando Baldazo Contributor address;	City;	State; Zip Code	250.00
	3815 Crestwind	Laredo,	Texas 78045	
Principal occup Business Owr	pation / Job title (See Instructions)		Employer (See Instruction Specialty Freight Log	
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
06/29/2022	Patricia Garcia Diaz Contributor address;	City;	State; Zip Code	250.00
	310 Stratford Ln	Laredo,	Texas 78041	
	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Loan Mortgag	ge Originator		GEO Mortgage	
	ATTACHADDIT	IONAL COPIES	OF THIS SCHEDULE AS	NEEDED

SCHEDULE A1

				•
The	Instruction Guide explains how to com	plete this	form.	1 Total pages Schedule A1: 1
2 FILER NAME Jesus M "C	huy" Dominguez			3 Filer ID (Ethics Commission Filers)
4 Date 06/29/2022	Hector De La Miyar	ty;	State; Zip Code TX 78045	7 Amount of contribution (\$) 250.00
8 Principal occup Freight Forwa	pation / Job title (See Instructions) rding Agent		9 Employer (See Instruct	cions)
Date 06/29/2022	Full name of contributor out-Blanca D. Dominguez Contributor address; Cit 154 Horizon Loop Lai		State; Zip Code Texas 78046	Amount of contribution (\$) 250.00
Principal occup US Customs E	ation / Job title (See Instructions) Broker		Employer (See Instruct Self	ions)
Date 06/29/2022	Marina Rodriguez Gil	ł y ;	State; Zip Code Texas 78041	Amount of contribution (\$) 500.00
Principal occup US Customs E	ation / Job title (See Instructions)		Employer (See Instruction Self	tions)
Date 06/29/2022	Rafael Orduna	y;	State; Zip Code	Amount of contribution (\$) 250.00
Principal occup US Customs [action / Job title (See Instructions)		Employer (See Instruc	tions)
	ATTACH ADDITIONAL	COPIES	OF THIS SCHEDULE AS N	IEEDED
	If contributor is out-of-state PAC, please	e see Instr	uction guide for additional	reporting requirements.

SCHEDULE A1

If the reques	ted information is not applicable, DO NOT in	clude this page in the	report.
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: ¶
2 FILER NAME Jesus M "C	huy" Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC Juan A Torres, Jr	C (ID#:)	7 Amount of contribution (\$)
06/29/2022	6 Contributor address; City; PO Box 451021 Laredo, T	State; Zip Code	500.00
8 Principal occup Business Own	pation / Job title (See Instructions)	9 Employer (See Instruct JAD Logistics, Inc	tions)
Date	Full name of contributor out-of-state PAG	C (ID#:)	Amount of contribution (\$)
06/29/2022	Contributor address; City; 5810 McPherson Rd Laredo,	State; Zip Code Texas 78041	250.00
Principal occup Business Owr	nation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAG	C (ID#:)	Amount of contribution (\$)
06/29/2022	Contributor address; City; 8503 Player Crt Laredo, Tex	State; Zip Code	1,000.00
Principal occup Business Owr	nation / Job title (See Instructions)	Employer (See Instruc FEMA Transportation	
Date	Full name of contributor out-of-state PAG	C (ID#:)	Amount of contribution (\$)
06/29/2022	Contributor address; City;	State; Zip Code	500.00
Principal occup US Customs I	8511 Whitepoint Rd Laredo, Toation / Job title (See Instructions) Broker	Employer (See Instruction Self	ctions)
	ATTACH ADDITIONAL COPIES If contributor is out-of-state PAC, please see Instr		

SCHEDULE A1

If the reques	ted information is not applicable, DO NOT i	nclude this page in the	report.
The	Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 1
2 FILER NAME Jesus M. "C	Chuy" Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date	Rosaura P. Tijerina	AC (ID#:)	7 Amount of contribution (\$)
06/29/2022	6 Contributor address; City; 1000 Washington St Ste 2 Lared	State; Zip Code do, Texas 78040	500.00
8 Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor out-of-state F	AC (ID#:)	Amount of contribution (\$)
06/29/2022	Contributor address; City; 1504 Palmer Laredo, Te	State; Zip Code	500.00
Principal occup Business Owr	ation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
06/29/2022	Contributor address; City; 2812 Braids Dr Laredo,	State; Zip Code Texas 78045	250.00
Principal occup Freight Forwa	ration / Job title (See Instructions)	Employer (See Instruction Washington Forward	
Date	Full name of contributor out-of-state R	PAC (ID#:)	Amount of contribution (\$)
06/30/2022	Contributor address; City; 4519 San Bernardo Lared	State; Zip Code o, texas 78041	1,000.00
Principal occur		Employer (See Instruc	ntions\
Business Owi	nation / Job title (See Instructions)	Laurel Insurance	Suona)
	ATTACH ADDITIONAL COPIE		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/DonationsMade 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)

orda da amort	The Instruction Guide explains how to o	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Jesus M "Chuy" Dominguez	3	3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name	•		
01/31/2022	International Bank of Commerce			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
9.01	1200 San Bernardo Ave	Laredo	Texas	78040
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Accounting/Banking	Bank Analysis		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought		Office held
Date	Payee name			
02/28/2022	International Bank of Commerce			
Amount (\$)	Payee address;	City;	State;	Zip Code
8.88	1200 San Bernardo Ave	Laredo	Texas	78040
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Accounting/Banking	Bank Analysis		
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin,	TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	(Office held
Date	Payee name			
03/04/2022	Rosie Centeno			
Amount (\$)	Payee address;	City;	State;	Zip Code
250.00	107 Ceniso Loop	Laredo	Texas	78046
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Contribution/Donation made by Office Holder	Medical Expens	se	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Lo an 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)

The Instruction Guide explains how to complete this form.

	The instruction Guide explains now to o	complete this form.		
Total pages Schedule F1:	2 FILER NAME Jesus M "Chuy" Dominguez		3 Filer ID (Ethics C	Commission Filers
Date	5 Payee name			
03/31/2022	International Bank of Commerce			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
7.74	1200 San Bernardo Ave	Laredo	Texas	78040
3	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Accounting/Banking	Bank Analysis		
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
• Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate / Officeholder name	Office sought	С	office held
Date	Payee name			
04/08/2022	Laredo Morning Times			
Amount (\$)	Payee address;	City;	State;	Zip Code
325.00	111 Esperanza	Laredo	Texas	s 78041
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertisement Expense	Congratulator	y Ad for Sen. 2	Zaffirini
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	C	Office held
Date	Payee name			
04/30/2022	International Bank of Commerce			
Amount (\$)	Payee address;	City;	State;	Zip Code
7.53	1200 San Bernardo Ave	Laredo	Texas	78040
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Accounting/Banking	Bank Analysis		
OF EXPENDITURE				
OF	Check if travel outside of Texas, Complete Schedule T,	Check if Austi	in, TX, officeholder living e	expense

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	The Instruction Guide explains how to o	complete this form.		
Total pages Schedule F1:	2 FILER NAME Jesus M "Chuy" Dominguez		3 Filer ID (Ethics	Commission Filers)
Date	5 Payee name			
05/10/2022	Manuel Gomez			
Amount (\$)	7 Payee address;	City;	State;	Zip Code
120.00	1817 Davis Ave	Laredo	Texas	78040
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Other	Gasoline		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/23/2022	Mariscos El Pescador			
Amount (\$)	Payee address;	City;	State;	Zip Code
344.25	3919 San Dario Ave	Lared	lo Te	exas 78040
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Dinner with Constituents		
	Checkif travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
05/31/2022	International Bank of Commerce			
	International Dank of Commerce			
Amount (\$)	Payee address;	City;	State;	Zip Code
		c _{ity;} Laredo	State; Texas	Zip Code 78040
Amount (\$)	Payee address;			
Amount (\$)	Payee address; 1200 San Bernardo Ave	Laredo	Texas	
Amount (\$) 7.74 PURPOSE OF	Payee address; 1200 San Bernardo Ave Category (See Categories listed at the top of this schedule)	Laredo Description Bank Analysis	Texas	78040

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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.			
1 Total pages Schedule F1:	2 FILER NAME Jesus M "Chuy" Dominguez		3 Filer ID (Ethics	Commission Filers)	
4 Date	5 Payee name				
05/31/2022	State Bar of Texas				
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
255.00	1414 Colorado St	Austin	Texas	78701	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Fees	State Bar Fee	es		
	(c) 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/Oh	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
06/27/2022	Johnny Carino's				
Amount (\$)	Payee address;	City;	State;	Zip Code	
120.48	7605 San Dario Ave	Lared	do Te	xas 78045	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Dinner with Constituents			
	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	Candidate / Officeholder name	Office sought	Office sought Office held		
Date	Payee name				
06/30/2022	International Bank of Commerce				
Amount (\$)	Payee address;	City;	State;	Zip Code	
4.53	1200 San Bernardo Ave	Laredo	Texas	78040	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Accounting/Banking	Bank Analysis	S		
	Check if travel outside of Texas, Complete Schedule T.	Check if Aus	if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought		Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	15 11	