JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The JC/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE / FIRST OFFICE USE ONLY **OFFICEHOLDER** Jennifer Ms. NAME NICKNAME LAST SUFFIX Barrera 4 CANDIDATE / ADDRESS / PO BOX: APT / SUITE #: CITY: ZIP CODE **OFFICEHOLDER** P.O. Box 3323 Alice, Texas 78333 **MAILING ADDRESS** Change of Address AREA CODE 5 CANDIDATE/ PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** 361) 389-2800 PHONE Receipt # Amount \$ MS / MRS / MR 6 CAMPAIGN **TREASURER** Mr. Armando G. Barrera Date Processed NAME NICKNAME Date Imaged STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CAMPAIGN STATE: ZIP CODE TREASURER **ADDRESS** 101 N. Cameron St., Alice, Texas 78332 (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** PHONE 361) 664-2224 9 REPORT TYPE 30th day before election 15th day after campaign January 15 Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD COVERED 01 THROUGH **ELECTION DATE** 11 ELECTION **ELECTION TYPE** Primary Runoff Month Day Year Description General Special 03 05 / 2024 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) County Court at Law Judge 14 NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE! OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

SCHEDULE A(J)1

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

т	he instruction Guide explains how to complete this	1 Total pages Schedule A(J)1:			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Jennifer Barr	rera				
4 Date	5 Full name of contributor ut-of-state PAC	ID#:	7 Amount of contribution (\$)		
01/18/2024	Cristina Rosales Soliz		\$250.00		
	6 Contributor address: City;	State; Zip Code			
	720 E. Second St., Alice, Texas 783	32			
8 Contributor's p	principal occupation	9 Contributor's job title			
	Attorney	Attorney			
10 Contributor's e		11 Law firm of contributor	's spouse (if any)		
	Law Office of Cristina Rosales Soliz	Ruben Soliz			
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC	ID#:	Amount of contribution (\$)		
01/13/2024	Steve R. Gomez		\$100.00		
01/13/2024	Contributor address; City;	State; Zip Code	Ψ100.00		
	3833 Coleridge St., Houston, Texa	•			
Contributor's p	principal occupation	Contributor's job title			
Attorney		Attorney			
Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)		
		Sandy D. Hellums			
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC	ID#:)	Amount of contribution (\$)		
01/13/2024	Christopher R. McCarthy		\$250.00		
	Contributor address; City;	State: Zip Code			
	10440 Deerwood Apt. 821, Houston, Te	•			
Contributor's principal occupation Contributor's job title					
			<u>Zepresentatives</u>		
Contributor's employer/law firm Law firm of contributo					
N/A		o opouse (ii aliy)			
If contributor is a child, law firm of parent(s) (if any)					

SCHEDULE A(J)1

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

т	he Instruction Guide explains how to complete this fo	1 Total pages Schedule A(J)1:		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Jennifer Barr	era			
4 Date 01/12/2024	Diane Allen 6 Contributor address; City; State; Zip Code		7 Amount of contribution (\$) \$50.00	
Contributor's r	502 Bellmar Lane, Frindswood, Texa			
Housewife		9 Contributor's job title Housewife		
10 Contributor's e		11 Law firm of contributor	's spouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor Out-of-state PAC II	D#)	Amount of contribution (\$)	
01/13/2024	Viola M. Garcia		\$200.00	
01/13/2027			Ψ200.00	
	7666 Athlone Dr., Houston, Texas 7708	State; Zip Code		
	principal occupation	Contributor's job title		
Professor		Professor		
Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)	
University of			_	
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC_II	D#:)	Amount of contribution (\$)	
01/12/2024	Patricia K. Joiner		\$200.00	
	Contributor address; City;	State: Zip Code		
4 Pine Creek Lane, Houston, Texas 77055				
	principal occupation	Contributor's job title		
Businesswoman Business Owner				
Contributor's employer/law firm Law firm of contrib		Law firm of contributor	r's spouse (if any)	
Knudson, LP				
If contributor is a child, law firm of parent(s) (if any)				

SCHEDULE A(J)1

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

Т	he Instruction Guide explains how to complete this f	1 Total pages Schedule A(J)1:	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Jennifer Barr	ега		
4 Date 01/19/2024	ate 5 Full name of contributor □ out-of-state PAC ID#:		7 Amount of contribution (\$) \$1,000.00
	6 Contributor address; City; 268 FM 1930, Alice, Texas 78332	State; Zip Code	
8 Contributor's p	principal occupation	9 Contributor's job title	
Business	Owner	Businessman	
10 Contributor's e Right of W	mployer/law firm ay Services	11 Law firm of contributor	's spouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/15/2024	Roland Garcia, Jr.		\$1,000.00
	Contributor address; City;	State: Zip Code	
_	416 E. Rivercrest Dr., Houston, Texas 7	77042	
Contributor's p	rincipal occupation	Contributor's job title	
Attorney		Attorney	
Contributor's e	mployer/law firm	Law firm of contributor	's spouse (if any)
Greenburg 7		Karen H. Garcia	
If contributor is	a child, law firm of parent(s) (if any)		
Date 01/16/2024	Juan M. Molina Contributor address; City; 13434 Blackstone, Universal City, Texas	State: Zip Code	Amount of contribution (\$) \$100.00
Contributor's p	rincipal occupation	Contributor's job title	
Dentist	• • • • • • • • • • • • • • • • • • • •	Dentist	
		Law firm of contributor	's spouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
	ATTACH ADDITIONAL COPIES O	E THIS SCHEDULE AS A	reenen

SCHEDULE A(J)1

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

			
1	he Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Jennifer Bar	rera		
4 Date	5 Full name of contributor ut-of-state PAC	D#:)	7 Amount of contribution (\$)
01/03/2024	Cyndi Barrera Hinojosa		\$1,000.00
	6 Contributor address; City;	State; Zip Code	
	1630 Morningside, Alice, Texas 7833	•	
8 Contributor's p	principal occupation	9 Contributor's job title	
Student		N/A	
10 Contributor's	employer/law firm	11 Law firm of contributor	's spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC	D#)	Amount of contribution (\$)
01/05/2024	Blanca C. Garcia		, ,
0 1, 00, 202 1			\$1,000.00
	Contributor address: City: 1808 Clarice, Alice, Texas 78332	State; Zip Code	
	principal occupation	Contributor's job title	
Business w	oman	Business Owner	
Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)
Mi Casa Ho	me Health		
If contributor is	s a child, law firm of parent(s) (if any)		
-	Full name of contributor		
Date 01/03/2024	Jamil Thomas	D#:)	Amount of contribution (\$)
0 1.00.202 1	Janiii momas		\$250.00
	Contributor address; City;	State: Zip Code	
	7100 Regency Square Blvd. #140, Hous	ton, Texas 77036	
Contributor's p	principal occupation	Contributor's job title	
Attorney Attorney			
Contributor's employer/law firm Law firm of contributor		r's spouse (if any)	
The Hadi Law Firm N/A			
If contributor is	s a child, law firm of parent(s) (if any)	· · · · · · · · · · · · · · · · · · ·	

SCHEDULE A(J)1

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

Т	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Jennifer Barr	ега		
4 Date	5 Full name of contributor ut-of-state PAC	ID#:)	7 Amount of contribution (\$)
01/02/2024	Sylvia R. Garcia		\$250.00
	6 Contributor address; City;	State; Zip Code	
	P.O. Box 8530, Houston, Texas 772	49	
8 Contributor's p	principal occupation	9 Contributor's job title	
Politician/	Attorney	US House of Represe	entatives
10 Contributor's e	employer/law firm	11 Law firm of contributor	
12 If contributor is	s a child, law firm of parent(s) (if any)	1077	
	a small art min or paronico (ii arry)		
Date	Full name of contributor ut-of-state PAC	ID#:	Amount of contribution (\$)
			Amount of contribution (g)
	Contributor address; City:	0	
	Contributor address; City;	State; Zip Code	
Contributor's o	principal occupation	0.000	
Continuator 3 p	micipal occupation	Contributor's job title	
Contributor's e	mployer/law firm	Law firm of contributor	's spouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
ii contributor is	s a clinic, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC	ID#:)	Amount of contribution (\$)
			(4)
	Contributor address; City;	State: Zip Code	
Contributor's p	rincipal occupation	Contributor's job title	-
Contributor's employer/law firm Law firm of contributor			's spouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
· · · · · · · · · · · · · · · · · · ·			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

TI	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:		
² FILER NAM Jennifer Ba			3 Filer ID (Ethics Co	ommission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$		
5 Date 01/02/2024 10 Principal occ	6 Full name of contributor out-of-state PAC (ID#	Zip Code	8 Amount of Contribution \$ In-kind contribution description T-posts/ Zipties/ Political Advertisin Check if travel outside of Texas, Complete Sched		
40.0					
Business O	principal occupation (FOR JUDICIAL) WNEr	13 Contribu	itor's job title (FOR JU	JDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 01/13/2024	Full name of contributor out-of-state PAC (ID#	Zip Code	\$152.75	I. In-kind contribution I description I IEVENT EXPENSE I I Ide of Texas, Complete Schedule T.	
Attorney	eupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe Attorney	er (FOR NON-JUDICIA	AL)(See Instructions)	
	principal occupation (FOR JUDICIAL)		itor's job title (FOR JU	JDICIAL) (See Instructions)	
	employer/law firm (FOR JUDICIAL) Traurig, LLP	Law firm Karen H.		se (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
!	ATTACH ADDITIONAL COPIES OF T If contributor is out-of-state PAC, please see Instructi			g requirements.	

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 c	omplete this form.			
1 Total pages Schedule F1:	Jennier Barren		3 Filer ID (Ethio	s Commission Filers)	
4 Date 01/18/2024	5 Payee name Eva Davila			<u></u>	
6 Amount (\$) \$300.00	7 Payee address; 521 W. 5th St., Alice, Texas 78332	City;	State;	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Labor for camp	aign services		
	(C) Check if travel outside of Texas, Complete Schedule T.	Check if Austi	in, TX, officeholder livin	g expense	
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H JENN (FER BARFERT OR	Office sought	ourt AT	Office held UAW JUOGE	
Date	Payee name				
01/19/2024	Laura Ortiz				
Amount (\$) \$300.00	Payee address: 290 CR 3053, Orange Grove, Texas	City; 78372	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salries/Wages/Contract Labor	Description Labor for Camp	paign Services	,	
	Check if travel outside of Texas, Complete Schedule T.	Check if Austi	ın, TX, officeholder livin	g expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held	
expenditure to benefit C/OI		R COUNTY	court un	LAN JUDGE	
Date	Payee name				
01/17/2024	Nora Lee Castillo				
Amount (\$) \$300.00	Payee address;	City	State:	Zip Code	
	214 Rankin St., Alice, Texas 78332				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	g expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held	
expenditure to benefit C/OI	JENNIGER BARRETON FOR	COUNTY C	ount 4T	LAN JUDGE	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	and family of any	
1 Total pages Schedule F1:	2 FILER NAME JUNNIER Barren		3 Filer ID (Eth	nics Commission Filers)
4 Date	5 Payee name			
01/17/2024	Carolina Castillo Chavarria			
6 Amount (\$) \$300.00	7 Payee address: 1301 Beam Station Road, Alice, Texas	City; 78332	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Labor for camp	aign services	3
	(C) Check if travel outside of Texas, Complete Schedule T.	Check if Aust	in, TX, officeholder liv	ring expense
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H JENNIFER PAPPERA OK	Office sought	WET HT	Office held LAW JUDGE
Date	Рауее пате			
01/19/2024	Lighthouse Graphics			
Amount (\$) \$568.00	Payee address; City; State; Zip Code 3046 SPID, Corpus Christi, Texas 78414			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Push Cards		
	Check if travel outside of Texas, Complete Schedule T.	Check if Aust	in, TX, officeholder liv	ing expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name JENNIFEK BARRERA FIR	Office sought	ould HT	Office held LAW JUPEE
Date	Payee name			
Amount (\$)	Payee address;	City;	State,	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Check if travel outside of Texas. Complete Schedule T,	Check if Austi	n, TX, officeholder liv	ing expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED	

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

15 JC/OH NAME		40 53 10 754 0
· -	ennifer Barrera	16 Filer ID (Ethics Commission Filers
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 1,090.45
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	OANS) \$ 1,090.45
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 1,748.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,768.60
CONTRIBUTION BALANCE	5, TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF TO OF REPORTING PERIOD	\$ 5,322.45
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS LAST DAY OF THE REPORTING PERIOD	SAS OF THE \$ 0
	Signature	of Candidate/Officeholder
	Please complete either option b	elow:
Notery Notery Notery Notery Notery	ARIAH TREVINO Public, State of Texes 1. Expires 01-12-2028 ary ID 13140740-4 Defore me by Jennifer Barrera	_{is the} 5th _{day of} February
24	thich, witness my hand and seal of office.	is the day of lebidary
Marian	muire morelate TREVINO	NOTARY
gnature of officer administer	ng oath Printed name of officer administering oath	Title of officer administering of
	OR	
2) Unsworn Declaratio	n	
	, and my date of t	oirth is
my address is	(street) (city)	(state) (zip code) (country)
Executed in	County, State of , on the day of _	
· · · · · · · · · · · · · · · · · · ·		, as
		(month) (year)

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19	19 FILER NAME 20 Filer ID (Ethics Com			
Jennifer Barrera				
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$5,650.00		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$5,650.00		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 2		
4.	SCHEDULE E: LOANS	\$ 0		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	s 1,718.00		
6,	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ O		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0		
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	s 0		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	s 0		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	s d		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0		