CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

OAIIII AIOI	I I III AIR OE NEI ON			0012.101.221102
The C/OH Instruction C	Guide explains how to complete this	s form. 1 Filer ID		2 Total pages filed: 15
CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST	т	MI F	OFFICE USE ONLY Date Received 4 1202 4 LED 10YCE HUDMAN,
	NICKNAME LAST Casti		SUFFIX	Date Received 24 20 24 IED 10YCE HUDMAN, IOUNTY CLERK, BRAZORIA CO., T.S. Date Hand-delivered or Date Postmarked
CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITI 3214 Churchill St.	E#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
Change of Address	Pearland, TX 77581			Date Processed Date Imaged
CAMPAIGN	MS / MRS / MR FIRST	Г	MI	
TREASURER NAME	Mr. Anthon	ny	D	
	NICKNAME LAST		SUFFIX	
	Tony Carbon	ne		
CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX P 2651 Pearland Pkwy Ste 102 Pearland, TX 77581		/ SUITE#; CITY;	STATE; ZIP CODE
CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM 281-997-6699	MBER EXTENSION		
REPORT TYPE		day before election	Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day 12/31/202	Year 3
LO ELECTION	ELECTION DATE Month Day Year	Primary General	ELECTION TYPE Runoff Special	Other
1 OFFICE	OFFICE HELD (if any) JP 3-2 Brazoria	'	12 OFFICE SOUGHT	(if known)
		GO TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

				2 of 15		
13 C / OH NAME	Castillo, Roy	14	Filer ID			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditures These expenditures may have been made without the officeholders are required to report this information or	candidate's or officeho	older's knowledge or		
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME				
	SPECIFIC	COMMITTEE ADDRESS	NO.			
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN F ES OF LOANS, OR CONTRIBUTIONS MADE ELECT		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 3,500.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 2,009.27		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 14,928.77		
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS RIOD	T DAY OF THE	\$ 11,655.45		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF TING PERIOD	THE LAST DAY	\$ 8,300.00		
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.						
REBECCA S. BONNER My Notary ID # 6473997 Expires June 27, 2026 Signature of Candidate or Officeholder						
	Sworn to and subscribed before me, by the said					
Signature of office	Signature of officer administering Printed name of officer administering Title of officer administering oath					

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 15 19 Filer ID 18 FILER NAME Castillo, Roy 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE \$ 3,500.00 SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS Х SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 2. \$ 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ 14,928.77 SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 7. \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12. TO FILER

	MONET	Α	RY POLITICAL CONTI	RIBUTIO	NS		SCHED	ULE A1
	The Instruction Guide explains how to complete this form.						Total pages Schedule A1 Sch: 1/1 Rpt: 4/15	
2	FILER NAME Castillo, Roy					3	Filer ID	
4	Date 11/06/2023	5	Full name of contributor out-of-Reid, Thomas J (Mr.) Contributor address; City; State; Zip Co	state PAC (ID#:_		7	Amount of Contribution (\$	\$3,500.00
			The Woodlands, TX 77389					
8	Principal occu	ıpa	ion / Job title (See Instructions)		9 Employer (See Instructions	5)		
	rms provided	hv	Texas Ethics Commission	www.ethics	s.state.tx.us		Version \	/3.5.1.0bfcfb6

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/11 Rpt: 5/15 Castillo, Roy 4 Date Payee name 12/18/2023 4 All Promotions Amount (\$) Payee address; State; Zip Code \$258.62 50 West Avenue Essex, CT 06426 **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 Advertisina Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/26/2023 ADDI, LLC Amount (\$) Payee address; City; State; Zip Code \$271.98 1339 Broadway Pearland, TX 77581 **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 Engraving of Buc-ee's cups w/ JP logo Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 08/01/2023 Alvin Historical Museum Amount (\$) Payee address; State; Zip Code \$250.00 302 W Sealy St Alvin, TX 77511 **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 Hispanic Heritage Event Sponsor Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Poiling Expense Printing Expense Salaries/Manes/Contract Labor

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/11 Rpt: 6/15	Castillo, Roy
4	Date	5 Payee name
	07/14/2023	Alvin Manvel Chamber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	105 W. Willis St
		Alvin, TX 77511
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Women In Leadership Photobooth Sponsor
		WOMEN IN Ecaucismp 1 notobooth oponess
		Office held
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/11/2023	Alvin Manvel Chamber
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	105 W Willis St
		Alvin, TX 77511
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Dues
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	+ +
⊨	N	
	Date	Payee name
L	09/11/2023	Alvin Manvel Chamber
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	105 W Willis St
		Alvin, TX 77511
	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.
	-A-LIDITONE	Check if Austin, TX, officeholder living expense
		Golf Tournament Sponsor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	
1		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manes/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica		Legal Services	Salaries/W	ages/Contra	ct Labor	OTHER (enter a category not list	ed above)
	Credit Card Payment		The Instruction Guide explains	how to cor	nplete this	form.		
1.	Total pages Schedule F1:	2 FILER NAME					3 Filer ID	
	Sch: 3/11 Rpt: 7/15	Castillo, Ro	у					
4	Date	5 Payee name						
	10/24/2023	Alvin Sun 8	& Advertiser					
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	te			
	\$225.00	570 Dula S	t					
		Alvin, TX 7	7511					
8	PURPOSE		iee Categories listed at the top of this sci	hedule)	(b) Desc	ription		
	OF	Advertising		neudic)		•	outside of Texas. Complete Schedule 1	r.
	EXPENDITURE	3	•				TX, officeholder living expense	
					Adve	ertising		
							0.55	
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ght		Office held	
L	experience to belief 0/01							
	Date	Payee name						
L	11/24/2023	Alvin Sun &	& Advertiser					
	Amount (\$)	Payee addre	•	; Zip Co	de			
	\$225.00	570 Dula S	t					
		Alvin, TX 7	7511					
	PURPOSE	(a) Category (s	See Categories listed at the top of this sc	hedule)	(b) Desc	ription		
	OF EXPENDITURE	Advertising	-		ليبيا		outside of Texas. Complete Schedule	т.
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					ΛuVi	oi non iA		
<u> </u>	Complete ONLY if direct	Candidata/Off	iceholder name	Office sou	nht		Office held	
	expenditure to benefit C/OI		ICCHORCE HAITE	Onice Soul	gill.		Onice Held	
 	D.A.							
	Date	Payee name						
	12/26/2023	Alvin Sunri						
	Amount (\$)			e; Zip Co	de			
	\$250.00	P.O.Box 42	2					
			7 740					
		Alvin, TX 7	7512	· · · · · · · · · · · · · · · · · · ·				
	PURPOSE OF		See Categories listed at the top of this sc	hedule)	(b) Desc		and at Taylor Complete Cabe Adv	r
	EXPENDITURE	Advertising	Expense		Lununi		outside of Texas. Complete Schedule , TX, officeholder living expense	(.
1							: Festival Sponsor	
							-	
┢	Complete ONLY if direct	Candidate/Off	îceholder name	Office sou	ght		Office held	
	expenditure to benefit C/O		-					
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SCHEDULE F1

Advertising Expense

Event Expense

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By		Food/Beverage Expense Gift/wards/Memorials Expense	Polling Ex Printing E	pense xpens	e	Travel in District Travel Out of District OTHER (enter a category not listed above	e)
	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide expla		_	/Contract Labor te this form.	OTHER (eitler a category not isseed above	¢.j
1	Total pages Schedule F1:	2 FILER NAM					Filer ID	
	Sch: 4/11 Rpt: 8/15	Castillo, Ro				ľ	1 1101 112	
_	Date							
*	11/08/2023	5 Payee name Birdsong F						
_				tate; Zip Co	ndo.			
ľ	Amount (\$) \$462.23	7 Payee addre 4101 Rice	•	iaie, zip Ci	Jue			
	φ402.23	4101 1/106	Dilei Ku					
		Pearland,	TX 77581					
8	PURPOSE	(a) Category (See Categories listed at the top of th	is schedule)	(b)	Description		
	OF EXPENDITURE	Printing Ex	pense				side of Texas. Complete Schedule T. X, officeholder living expense	
						Printing	A, dinocitorador aring oxpositor	
						J		
9	Complete ONLY if direct	LCandidate/Of	ficeholder name	Office sou	l	Mars.	Office held	
	expenditure to benefit C/O	-1		······································				
	Date	Payee name						
	07/24/2023	Brooks Fo	undation Golf Tourname	nt				
	Amount (\$)	Payee addr	, , , , , , , , , , , , , , , , , , , ,	tate; Zip Co	ode			
	\$600.00	330 Bayou	View Dr					
		El Lago, T.	X 77586					
	PURPOSE	(a) Category (See Categories listed at the top of th	is schedule)	(b)	Description		
	OF EXPENDITURE	Advertising	g Expense			<u></u>	tside of Texas. Complete Schedule T. X, officeholder living expense	
l						Golf Tourname		
							·	
┢	Complete ONLY if direct	L Candidate/Of	ficeholder name	Office sou	ıght		Office held	
	expenditure to benefit C/O	Н						
F	Date	Payee name	2					
	12/11/2023	Buc-ee's T						
┝	Amount (\$)	Payee addr	ess; City; S	tate; Zip Co	ode			
	\$216.07	6201 Gulf		•				
		Texas City	, TX 77591					
┝	PURPOSE		See Categories listed at the top of the	in nobodulo)	(b)	Description		
	OF	Advertising		is scriedure)	ľ		tside of Texas. Complete Schedule T.	
	EXPENDITURE	·	•			L!	X, officeholder living expense	
						Cups for engra	ving as giveaways	
L		L			<u>L</u>		or Lab	· ····
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ıgnt		Office held	
<u> </u>	1			* • • • • • • • • • • • • • • • • • • •				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	E Cor	nmittee Legal Services Salarie The Instruction Guide explains how to	-	ete this form.
1	Total pages Schedule F1:	2	•		3 Filer ID
_	Sch: 5/11 Rpt: 9/15		Castillo, Roy		
4	Date	5	Payee name		
	10/17/2023		Cooky For Cookies		
6	Amount (\$)	7	Payee address; City; State; Zip	Code	
	\$216.00		5102 Lockhart Dr		
			Pearland, TX 77584		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Advertising Expense		Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
					Brazoria County Adoption Day Cookie Sponsor
9	Complete ONLY if direct		Candidate/Officeholder name Office s	ought	Office held
آ	expenditure to benefit C/OI			•	
H	Date	Ī	Payee name		
	08/17/2023		Dawson Anglers		
H	Amount (\$)	\vdash	Payee address; City; State; Zip	Code	
	\$750.00		2050 Cullen Blvd		
	,				
			Pearland, TX 77584		
Г	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
					Team Sponsor
					•
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office s	ough	Office held
	expenditure to benefit C/O			=	
F	Date	Т	Payee name		
	07/19/2023		Dawson Cheer		
H	Amount (\$)	\vdash	Payee address; City; State; Zip	Code	
	\$250.00		2050 Cullen Blvd		
			Pearland, TX 77584		
一	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.
	EVE PIARTI OICE				Check if Austin, TX, officeholder living expense Sign Sponsor
					aigir aponaoi
L	Complete ONI V if direct	<u> </u>	Candidate/Officeholder name Office	soliup.	t Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Oniceriolice natife Onice s	Jugit	Since from
\vdash					
لِ	rms provided by Texas F	÷L:	cs Commission www.ethics.state.t	V DC	Version V3.5.1.0bfcfb6

SCHEDULE F1

Advertising Expense Accounting/Banking

Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Office Overhead/Rental Expense Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Poliing Expense Travel in District Travel Out of District Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 6/11 Rpt: 10/15 Castillo, Roy Date Payee name Dawson Football Booster Club 10/26/2023 6 Amount (\$) Payee address; State; Zip Code City; \$500.00 2050 Cullen Blvd Pearland, TX 77584 **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 Golf Tournament Sponsor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/01/2023 Grazia Italian Restaurant Payee address; State; Zip Code Amount (\$) \$227.20 9415 Broadway Pearland, TX 77584 **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 Precinct 3 Luncheon Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 11/01/2023 Halo Branded Solutions Amount (\$) Payee address; City; State; Zip Code \$446.53 1500 Halo Way Sterling, IL 61081 **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 Campaign Koozies Office held Candidate/Officeholder name Complete ONLY if direct Office sought expenditure to benefit C/OH

EXPENDITURE CATEGORIES FOR BOX 8(a)

SCHEDULE F1

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

	Candidate/Officenoider/Politica Credit Card Payment	a Con	The Instruction Guide explains how to		plete this form.	OTHER terites a category not listed and	ovej
1	Total pages Schedule F1:	2	FILER NAME	····		3 Filer ID	
	Sch: 7/11 Rpt: 11/15	1	Castillo, Roy				
4	Date	5	Payee name		-		
	12/20/2023		Hometown Seafood Company				
6	Amount (\$)	7	Payee address; City; State; Zip	Cod	le		
ŀ	\$400.00		5010 Broadway St				
			Pearland, TX 77581	_			
8	PURPOSE	1	Category (See Categories listed at the top of this schedule)	(b) Description	to the control of the	
	OF EXPENDITURE		Food/Beverage Expense			Il outside of Texas. Complete Schedule T. in, TX, officeholder living expense	
						mpaign volunteers	
						. •	
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office	soual	ht	Office held	
ľ	expenditure to benefit C/OI		Onice Onice of the Control of the Co				
\vdash	Data	T	2				
	Date		Payee name Houston Livestock Show & Rodeo				
<u> </u>	07/17/2023	_					
	Amount (\$)	1	Payee address; City; State; Zip	Cod	le		
	\$195.00		NRG Parkway				
			Houston, TX 77054				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description		
	OF EXPENDITURE		Advertising Expense			el outside of Texas, Complete Schedule T.	
				Ì	Check if Aust Bowling Spo	in, TX, officeholder living expense	
					sowning ope	71001	
\vdash	Complete ONLY if direct	Ļ	Candidate/Officeholder name Office	SOLIC.	ht	Office held	
	Complete ONLY if direct expenditure to benefit C/OI		ANGUATE/ORIGEROIDER HARTE Office	ouuy	116	Child Hold	
L		T					
	Date		Payee name				
L	11/24/2023	_	Pearland Chamber of Commerce				
	Amount (\$)		Payee address; City; State; Zip	Cod	le		
	\$485.00		6117 Broadway St				
			Pearland, TX 77581				
Г	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	((b) Description		
	OF EXPENDITURE		Fees			el outside of Texas. Complete Schedule T.	
					Dues & Lun	in, TX, officeholder living expense	
					Dues & Lun	CHEON	
L	Consider Orange Cons	<u> </u>	New Mid-ty IO Graph all factors		.h.t	Office hald	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office	soug	nt	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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 8/11 Rpt: 12/15	Castillo, Roy
4	Date	5 Payee name
	12/05/2023	Pearland Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	6117 Broadway St
		Pearland, TX 77581
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin. TX, officeholder living expense
		Golf Tournament for Pearland Neighborhood Center
		Con rountainent in Canada Cana
<u>_</u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
_	<u></u>	
	Date	Payee name
	10/11/2023	Pearland Choir
	Amount (\$)	Payee address; City; State; Zip Code
ļ	\$450.00	P.O.Box 7
		Pearland, TX 77588
	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.
	LAP ENDITORE	Check if Austin, TX, officeholder living expense Event Sponsor
		Event Sponsor
	Carallata ONII V if diseast	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Outland Outland Outland
_		
	Date	Payee name
	09/15/2023	Pearland ISD
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	4715 Bailey Rd
		Pearland, TX 77584
	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.
	EXPERIENCE.	Check if Austin, TX, officeholder living expense
		FFA Arena Sign Sponsor
_		Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Filer ID Castillo, Roy Sch: 9/11 Rpt: 13/15 4 Date Payee name 11/06/2023 Pearland ISD State; Zip Code Payee address; 6 Amount (\$) Cîty: \$200.00 4715 Bailey Rd Pearland, TX 77584 **PURPOSE** 8 (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 FFA Photo Booth Sponsor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/16/2023 Pearland Lady Lions Payee address; City; State; Zip Code Amount (\$) \$250.00 2800 Broadwy St. Ste 104 Pearland, TX 77581 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 Leader Dog Event Sponsor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/21/2023 Pearland Lions Payee address; State; Zip Code Amount (\$) City; \$500.00 P.O.Box 3261 Pearland, TX 77588 **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 Gun Raffle Sponsor Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Version V3.5.1.0bfcfb67

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 10/11 Rpt: 14/15	Castillo, Roy	
4	Date	5 Payee name	
	07/24/2023	Pearland Neighborhood Center	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$750.00	2335 N. Texas Ave	
		Pearland, TX 77581	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Advertising Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Golf Tournament Sponsor	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	08/03/2023	Pearland Police Officers Assocation	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.99	2555 Cullen Blvd	
		Pearland, TX 77584	
	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	
		Party with the Police Sponsor	
		1 27, 1111111111111111111111111111111111	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	=	
	Date	Payee name	
	07/14/2023	Pearland Rotary	
	Amount (\$)	Payee address; City; State; Zip Code	—
	\$200.00	6117 W. Broadway	
	4200.00	off W. Bloading	
		Pearland, TX 77581	
	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	Check if Austin, TX, officeholder living expense	
	!	Grid Iron Luncheon	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 11/11 Rpt: 15/15	Castillo, Roy
4	Date	5 Payee name
	08/04/2023	Pearland Touchdown Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	1928 N. Main St
		Pearland, TX 77581
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Sign Sponsor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/19/2023	Stark Bros Beef
Т	Amount (\$)	Payee address; City; State; Zip Code
	\$239.88	727 Freeport St Ste 3
		·
		Houston, TX 77015
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Counseling Connections BBQ-Food
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantific to benefit C/Oi	
	Date	Payee name
	10/11/2023	Tarlton State Equestrian Team
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	Box T-1251
		Stephenville, TX 76402
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITORL	Check if Austin, TX, officeholder living expense
		Sign Sponsor
		0.000
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
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Judge Roy Castillo 3214 Churchill St. Pearland, TX 77581

Retail





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BRAZORIA COUNTY CLERK

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JAN 24 2024

JOYCE HUDMAN COUNTY CLERK

ANGLETON. TX 77515