CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

OFFICE USE ONLY

Date Received

Date Filed 10·23·26

Rebecca Huerta
City Secretary

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. | FIRST: Robert | MI:

NICKNAME: | LAST: Rocha | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

5922 Woodmere Drive
Corpus Christi, TX 78414

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (361) | PHONE NUMBER: 774-9774 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Ms. | FIRST: Virginia | MI:

NICKNAME: Rosie | LAST: Collin | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

5922 Woodmere Drive
Corpus Christi, TX 78414

8 CAMPAIGN TREASURER PHONE

AREA CODE: (361) | PHONE NUMBER: 695-5123 | EXTENSION:

9 REPORT TYPE

- ☐ January 15
- ☐ July 15
- ☐ 30th day before election
- ☒ 8th day before election
- ☐ Runoff
- ☐ Exceeded Modified Reporting Limit
- ☐ 15th day after campaign treasurer appointment (Officeholder Only)
- ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month 9 / Day 25 / Year 26 THROUGH Month 10 / Day 24 / Year 26

11 ELECTION

ELECTION DATE: Month 11 / Day 3 / Year 26

ELECTION TYPE:
- ☐ Primary
- ☐ Runoff
- ☐ Other Description
- ☒ General
- ☐ Special

12 OFFICE

OFFICE HELD (if any):

13 OFFICE SOUGHT (if known): Council Member - District 3

14 NOTICE FROM POLITICAL COMMITTEE(S)

Additional Pages

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.

COMMITTEE TYPE
- ☑ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME: Coastal Bend Coalition

COMMITTEE ADDRESS: 3636 S. Alameda, Ste B. #220 - Corpus Christi, TX 78411

COMMITTEE CAMPAIGN TREASURER NAME: Olga Kvach

COMMITTEE CAMPAIGN TREASURER ADDRESS: 14493 S. Padre Island Drive - Corpus Christi, TX 78418

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME		**16** Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 21,615.40
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4. **TOTAL POLITICAL EXPENDITURES**	$ 2,502.26
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

18 SIGNATURE 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.

Robert Rocha

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

MARIAH H RESENDEZ
Notary Public, State of Texas
My Commission Expires
April 14, 2030
NOTARY ID 133699757

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Robert Rocha this the 23rd day of October, 20 26, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
	Mariah Resendez	Notary Public

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	**20** Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 21,615.40
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 CONTRIBUTIONS	$ 2,502.26
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 FUNDS	$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME See attached

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID#:_____)

6 Contributor address; City; State; Zip Code

7 Amount of contribution ($)

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#:_____)

Contributor address; City; State; Zip Code

Amount of contribution ($)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#:_____)

Contributor address; City; State; Zip Code

Amount of contribution ($)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#:_____)

Contributor address; City; State; Zip Code

Amount of contribution ($)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

Robert Anthony Rocha Campaign

A 1

Last Name	First Name	Address	City/State	Donation Amount	Date of Donation
Barrera	Gustavo	[redacted]	CC, TX 78411	100.00	9/27/2026
Anderson	Derwood		CC, TX 78403	500.00	9/27/2026
Parker	Robert		CC, TX 78469	2,399.70	9/27/2026
Berry	Kenneth		CC, TX 78402	2,500.00	9/27/2026
Longoria	John/Sonia		CC, TX 78404	1,000.00	9/29/2026
Keas	Lenora		CC, TX 78404	500.00	9/29/2026
Reyes	Gregg		Houston, TX 77042	1,000.00	9/29/2026
Lippincott	Mike/Ann		CC, TX 78411	1,000.00	9/30/2026
Barnette	Jim		CC, TX 78414	1,500.00	9/30/2026
Skrobarczyk	Philip/Hannah		CC, TX 78418-6448	1,000.00	9/30/2026
Skrobarczyk	Michael		CC, TX 78411-2112	1,000.00	9/30/2026
Skrobarczyk	Philip		CC, TX 78404	1,000.00	9/30/2026
Mellado Sanchez	Rogelio		CC, TX 78414	1,000.00	9/30/2026
Gonzalez	Roxanne		CC, TX 78411	500.00	9/30/2026
Jones	Al		CC, TX 78411	2,500.00	10/2/2026
Kochpac - Koch, Inc			Wichita, KS 67220	2,000.00	10/5/2026
Clark	Christopher		CC, TX 78408	500.00	10/6/2026
Olivarri	Leah Pagan		CC, TX 7846	1,000.00	10/7/2026
Crable	Louise		KC, KS 66111	95.70	10/19/2026
Shirley	Gerald & Mary		CC, TX 78412	20.00	10/19/2026
Hartman Cooper	Melody		CC, TX 78401	500.00	10/20/2026
Total Cash/Check Donations				**21,615.40**	**10/22/2026**

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

See attached 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 complete this form.

1 Total pages Schedule F1:	**2** FILER NAME		**3** Filer ID (Ethics Commission Filers)
4 Date	**5** Payee name		
6 Amount ($)	**7** Payee address;	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description	
	(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/OH	Candidate / Officeholder name	Office sought	Office held

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 Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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 Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Robert Anthony Rocha Campaign

Expenditure Report

F1

Business Name	Address	City/State	Expenditure Amount	Date of Expenditure	Item
MG Building Materials	7406 S. Padre Island Drive	CC, TX 78412	228.41	10/5/2026	T Posts
Arrow Displays	1343 S. Staples	CC, TX 78404	1,147.38	10/5/2026	Signs
Office Depot	5425 S. Padre Island Drive	CC, TX 78411	119.43	10/11/2026	Office Supplies
Gulf Coast Mailing	6901 S. Padre Island Drive	CC, TX 78412	198.10	10/16/2026	Door Hangers
Arrow Displays	1343 S. Staples	CC, TX 78404	189.44	10/16/2026	Wire Stands
Sams Club	4833 S. Padre Island Drive	CC, TX 78411	119.50	10/18/2026	Party Supplies
El Vago BBQ	4741 Kostoryz	CC, TX 78415	500.00	10/19/2026	BBQ
Total Expenditures			**2,502.26**	**10/22/2026**	

Coastal Bend Coalition – Political Committee Notice

From: Office (office@olgakvachcpa.com)

To: rrocha1957@yahoo.com

Date: Monday, October 5, 2026 at 02:12 PM CDT

Hi Robert Rocha,

This email serves as written notice that Coastal Bend Coalition has made independent political expenditures in support of your candidacy.

Coastal Bend Coalition
3636 S. Alameda, Ste. B, #220
Corpus Christi, TX 78411

Campaign Treasurer: Olga Kvach
14493 S. Padre Island Drive, Suite A
PMB 281
Corpus Christi, TX 78418

Coastal Bend Coalition is a general-purpose political committee.

Please retain this notice for your campaign finance records.

Thank you,
Olga Kvach
Campaign Treasurer
Coastal Bend Coalition