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: 11

OFFICE USE ONLY

Date Received

Date Filed 10-26-26

Rebecca Huerta for
City Secretary

Date Hand-Delivered or Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. | FIRST: NANCY SUSAN VERA | MI:

NICKNAME | LAST | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

Change of Address

ADDRESS / PO BOX: P.O. BOX 270162 | APT / SUITE #: | CITY: Corpus Christi, | STATE: Tx. | ZIP CODE: 78427

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (361) | PHONE NUMBER: 774.2227 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr. | FIRST: Alex Amador | MI:

NICKNAME | LAST | SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): 773 Elk Dr. | APT / SUITE #: | CITY: Corpus Christi, | STATE: Texas. | ZIP CODE: 78414

8 CAMPAIGN TREASURER PHONE

AREA CODE: (361) | PHONE NUMBER: 537.7498 | EXTENSION:

9 REPORT TYPE

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

10 PERIOD COVERED

Month / Day / Year: 09 / 24 / 2026 THROUGH 11 / 26 / 2026

11 ELECTION

ELECTION DATE: Month / Day / Year: 11 / 03 / 2026

ELECTION TYPE

- [ ] Primary
- [ ] Runoff
- [ ] Other Description
- [✓] General
- [ ] Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known): Corpus Christi City Council At-Large

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

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

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)	$ 17,055.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 4,937.25
	4.	**TOTAL POLITICAL EXPENDITURES**	$
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 12,117.75
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.

Nancy Vera
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____,

20 _____, 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

OR

(2) Unsworn Declaration

My name is Nancy Susan Vera, and my date of birth is [redacted].

My address is P.O. Box 270162 (street), Corpus Christi (city) Tx (state) 78427 (zip code) USA (country).

Executed in Nueces County, State of Texas, on the 26th day of October (month), 20 26 (year).

Nancy Vera
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Nancy Susan Vera	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 13,255.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 1,900.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	$ Ø
4.	SCHEDULE E: LOANS	$ Ø
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 1,350.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ Ø
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$ Ø
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 3,587.25
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$ Ø
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$ Ø
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ Ø
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$ Ø

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

2 FILER NAME: Dr. Nancy Susan Vera

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor (out-of-state PAC (ID#:_____)) SEE ATTACHMENT A 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.

ATTACHMENT A

MONETARY POLITICAL CONTRIBUTIONS

Amount	Donor First Name	Donor Last Name	Donor Addr1	Donor City	Dor	Donor ZIP	
$200	Victoria	Rogers	[redacted]	Corpus Chr	TX	78418	10/3/2026
$250	Cliff	Walker		Austin	TX	78701	10/10/2026
$100	Penny	Kaminski		Corpus Chr	TX	78413	10/10/2026
$10	Elizabeth	Diemert		Corpus Chr	TX	78411	10/12/2026
$100	Iris	Martinez Simmons		Corpus Chr	TX	78413	10/15/2026
$100	Leticia	Valentine		Corpus Chr	TX	78415	10/15/2026
$100	Cynthia	Weber		Corpus Chr	TX	78413	10/15/2026
$25	Rebecca	DeLaGarza		Corpus Chr	TX	78411	10/15/2026
$150	Edith	Diaz		Corpus Chr	TX	78413	10/15/2026
$50	Belinda	Villiva		Robstown	TX	78380	10/15/2026
$500	Douglas	Allison		Corpus Chr	TX	78412	10/15/2026
$250	John	Garcia		Corpus Chr	TX	78401	10/17/2026
$1,000	Zeph	Capo		Bastrop	TX	78602	10/19/2026
$100	Lisa	Perry		Corpus Chr	TX	78415	10/21/2026
$100	Tom/Brad	Tagliabue/Snyder		Corpus Chr	TX	78412	10/21/2026
$150	Gloria	Montalvo		Corpus Chr	TX	78412	10/15/2026
$500	Hugo	Berlanga		Corpus Chr	TX	78404	10/15/2026
$100	Lamar	Childress		Corpus Chr	TX	78414	10/15/2026
$350	Eric	Cantu		Corpus Chr	TX	78415	10/15/2026
$500	Cecilia	Akers		Austin	TX	78259	10/15/2026
$100	Jose Antonio	Canales		Corpus Chr	TX	78465	10/15/2026
$100	Gonzalo	Tamez		Corpus Chr	TX	78414	10/15/2026
$100	J&E Ranch Tracts			Corpus Chr	TX	78415	10/15/2026
$100	Salazar Investments			Corpus Chr	TX	78415	10/15/2026
$100	Oso Bridge Investors LLC			Corpus Chr	TX	78415	10/15/2026
$500	Bonilla Investments			Corpus Chr	TX	78465	10/19/2026
$100	Yolanda	Gonzalez		Corpus Chr	TX	78413	10/20/2026
$100	Tierra Motors LLC			Corpus Chr	TX	78415	10/15/2026
$100	Rodd Village Development LLC			Corpus Chr	TX	78415	10/15/2026
$1,000	IBEW PAC Voluntary Fund			Washington	DC	20001	10/15/2026
$20	Felicia	Garza		Corpus Chr	TX	78404	10/21/2026
$500	Robert/Bill	Garcia/Richmond		Corpus Chr	TX	78412	10/21/2026
5,000	Lead Locally PAC			Los Angeles	CA	90029	10/16/2026
$250	CC Am. Fed. Of Tchrs PAC			Corpus Chr	TX	78411	10/15/2026
$50	Linda	White		Corpus Chr	TX	78412	10/17/2026
$500	Oona	Coy		Northampton	MA	01060	10/25/2026

TOTAL 13,255.00

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 2

2 FILER NAME: Nancy Susan Vera

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS $ 1,900.00

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID# _____) SEE ATTACHMENT B 7 Contributor address; City; State; Zip Code	8 Amount of Contribution $	9 In-kind contribution description Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employer (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL)(See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

Date	Full name of contributor ☐ out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of Contribution $	In-kind contribution description Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)	Employer (FOR NON-JUDICIAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL)(See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

ATTACHMENT B

IN-KIND

$250	Robert Garcia	[redacted]	Corpus Christi	TX	78412 Food	10/27/2026
$650	Barbara Canales		Corpus Christi	TX	78412 Food	10/15/2026
$250	Tom Tagliabue/Brad Snyder		Corpus Christi	TX	78412 Food	10/27/2026
$500	Barbara Canales		Corpus Christi	TX	78412 Radio Ads	10/27/2026
$250	Mariachi Mexicanismo		Corpus Christi	TX	78411 Music	10/27/2026

$1,900

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 2	2 FILER NAME Nancy Susan Vera	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		$ 2,237.28
5 CREDIT CARD ISSUER	Name of financial institution Security Service Federal Credit Union	

6 PAYMENT	(a) Amount Charged $	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid See Attachment D
7 PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code	
8 PURPOSE OF EXPENDITURE ☐ Political ☐ Non-Political	(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
PAYMENT	(a) Amount Charged $	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code	
PURPOSE OF EXPENDITURE ☐ Political ☐ Non-Political	(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	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held
PAYMENT	(a) Amount Charged $	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code	
PURPOSE OF EXPENDITURE ☐ Political ☐ Non-Political	(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	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CREDIT CARD EXPENDITURES

ATTACHMENT D

$85.99	Barnes and Noble	Stationary	5129 Blanche Moore	Corpus Christi	TX	78411	10/22/2026
$33.99	Casita De Barrio	Fundraising Gifts	5317 S. Staples	Corpus Christi	TX	78411	10/21/2026
$44.32	Security Services FCU	Fees	6502 Everhart	Corpus Christi	TX	78412	10/20/2026
$73.04	Office Depot	Supplies	5425 SPID	Corpus Christi	TX	78411	10/20/2026
1,999.94	KORO-TV KCRP-TV	Advertisement	801 Jackson Rd.	McAllen	TX	78501	10/19/2026

TOTAL 2,237.28

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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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 (Ethics Commission Filers)
2	Dr. Nancy Susan Vera	

4 Date

5 Payee name: SEE ATTACHMENT E

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

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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

Expenditures Made From Political Contributions Dr. Nancy Vera

ATTACHMENT E

$1,000	Elizabeth Hernandez	Consultant	434 Villa Dr.	Corpus Chr	TX	78408	10/23/2026
$350	Steve Garza	Signs/Ad Expense	2606 Montgomery	Corpus Chr	TX	78405	10/23/2026