

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: 20			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR	FIRST Daniel	MI A.	OFFICE USE ONLY		
	NICKNAME Danny	LAST Guzman	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; P.O. Box 896		APT / SUITE #; CITY; STATE; ZIP CODE Edinburg TX 78538	Date Received		
	5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (956)	PHONE NUMBER 551-0486	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MS	FIRST Leticia	MI H.	Date Hand-delivered or Date Postmarked		
	NICKNAME	LAST Scenz	SUFFIX	Receipt # Amount \$		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY; STATE; ZIP CODE	Date Processed		
	1214 E. Champion St. Edinburg TX 78539			Date Imaged		
8 CAMPAIGN TREASURER PHONE	AREA CODE (956)	PHONE NUMBER 239-8138	EXTENSION			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)					
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year
		1 / 21	2026	THROUGH	4 / 1	2026
11 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input checked="" type="checkbox"/> Other Description May 2026
	5 / 2	2026		<input type="checkbox"/> General	<input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) STC Trustee District 7			13 OFFICE SOUGHT (if known)		
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> 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	COMMITTEE NAME				
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS				
	<input type="checkbox"/> SPECIFIC	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 <i>Daniel A. Guzman</i>		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)	\$ <i>37,750.00</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>15,750.71</i>
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	\$ <i>21,999.29</i>

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.

Daniel A. Guzman
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Daniel A Guzman this the 1st day of April, 2026, to certify which, witness my hand and seal of office.
Roxanne Gonzalez Printed name of officer administering oath
Roxanne Gonzalez Title of officer administering oath

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 _____, 20____.
 (month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Daniel A. Guzman</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>37,750.00</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>2,958.32</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ <i>10,000.00</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>15,750.71</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>602.05</i>
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>10,000.00</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

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 FILER NAME Daniel A. Guzman		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 1-21-2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiram Gutierrez	8 Amount of Contribution \$ \$2,958.32	9 In-kind contribution description EVENT SPONSOR
7 Contributor address; City; State; Zip Code 701 W. Bentsen Rd. McAllen TX 78501		<input type="checkbox"/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		<input type="checkbox"/> 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.

LOANS

SCHEDULE E

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 E: 1
2 FILER NAME Daniel A. Guzman		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 1-5-2026	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel A. Guzman	9 Loan Amount (\$) \$10,000.00
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code P.O. Box 896 Edcouch TX 78538	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y <input type="radio"/> N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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: 1 of 7
2 FILER NAME Daniel A. Gozman		3 Filer ID (Ethics Commission Filers)
4 Date 1-8-2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Salazar	7 Amount of contribution (\$) \$ 1,000.00
6 Contributor address; City; State; Zip Code 611 E. Loop 409 Harlingen TX. 78550		
8 Principal occupation / Job title (See Instructions) Insurance Agent/owner		9 Employer (See Instructions)
Date 1-12-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jorge Gonzalez	Amount of contribution (\$) \$ 2,000.00
Contributor address; City; State; Zip Code 2900 N. TEXAS Blvd. Weslaco TX 78599		
Principal occupation / Job title (See Instructions) Construction/owner		Employer (See Instructions)
Date 1-12-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacinto Garza	Amount of contribution (\$) \$ 3,000.00
Contributor address; City; State; Zip Code 2100 W. Expwy. 83 Mercedes TX. 78570		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 1-16-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELESVIA M. TORRES	Amount of contribution (\$) \$ 1,000.00
Contributor address; City; State; Zip Code 3901 W. Schunior st. Edinburg TX 78541		
Principal occupation / Job title (See Instructions) County Commissioner		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.

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 of 7
2 FILER NAME Daniel A. Guzman		3 Filer ID (Ethics Commission Filers)
4 Date 1-19-2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfonso Quintanilla	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 100 E. Emory Avenue McAllen TX. 78504		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 1-9-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Brandon, Fielder, Collins + Mott, LLP	Amount of contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 1235 North Loop W, Ste. 600 - Houston, TX. 77008		
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions)
Date 1-20-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Izaguirre Engineering Group	Amount of contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 7413 N. La Homa Rd Mission TX 78574		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 1-20-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telepro Communications	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 12005 N. Bryan Rd Mission Tx. 78573		
Principal occupation / Job title (See Instructions) Telecommunications Provider		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.

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: 3 of 7
2 FILER NAME Daniel A. Guzman		3 Filer ID (Ethics Commission Filers)
4 Date 1-20-2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GDS Engineering	7 Amount of contribution (\$) \$3,000.00
6 Contributor address; City; State; Zip Code 2608 Live Oak Mission TX 78574		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 1-20-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian A. Godinez	Amount of contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 5007 N. 9th St. McAllen TX 78504		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 1-21-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricardo Perez + Carolina Perez	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 208 Lindberg Avenue McAllen TX 78501		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 1-21-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Lee Fuentes	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 3619 S. Border Avenue Weslaco TX 78596		
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions)

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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: 4 of 7
2 FILER NAME Daniel A. Guzman		3 Filer ID (Ethics Commission Filers)
4 Date 1-21-2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Daniel Olivarez	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code P.O. Box 1667 Weslaco TX 78596		
8 Principal occupation / Job title (See Instructions) Business Owner/Landlord		9 Employer (See Instructions)
Date 1-21-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rene A. Ramirez	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1508 S. Lone Star Way #1, Edinburg Tx 78539		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 1-21-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corina C. Gutierrez	Amount of contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 701 N. Bentsen Rd. McAllen Tx. 78501		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1-21-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jorge Saenz + Karla Saenz	Amount of contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 1902 Serengeti Way Weslaco TX 78596		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 5 of 7
2 FILER NAME Daniel A. Guzman		3 Filer ID (Ethics Commission Filers)
4 Date 1-21-2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janelle Valdez Caso	7 Amount of contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code 9809 Las Palmas McAllen TX 78504		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1-21-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jose N. Saldivar	Amount of contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 2424 Mimosa Mission TX. 78574		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1-21-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REZA Badiozzamani	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 10100 N. Bentzen Rd. McAllen TX 78504		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1-22-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul R. Rodriguez + Myrna H. Rodriguez	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 4401 S. H street McAllen TX 78503		
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.

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: 6 of 7
2 FILER NAME Daniel A. Guzman		3 Filer ID (Ethics Commission Filers)
4 Date 1-23-2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jose Montoya + Marissa Montoya	7 Amount of contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code 2901 Swallow Avenue McAllen Tx 78504		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1-23-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Nassri Warren	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 804 S. Main street McAllen Tx. 78501		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1-23-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ascenette Lozano	Amount of contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 3205 Hummingbird Avenue McAllen Tx 78504		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1-26-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Enriquez	Amount of contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code P.O. Box 2999 Edinburg Tx 78540		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 7 of 7
2 FILER NAME Daniel A. Guzman		3 Filer ID (Ethics Commission Filers)
4 Date 1-28-2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law office of Andre Maldonado	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 1209 S. 10th Avenue Edinburg Tx. 78539		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2-18-2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Hanlon, Demerath + Castillo	Amount of contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 426 W. Caffery Avenue Pkarr TX 78577		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
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.

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: 1 of 8	2 FILER NAME Daniel A. Guzman	3 Filer ID (Ethics Commission Filers) ,
4 Date 3-4-2026	5 Payee name City of ELSA	
6 Amount (\$) \$300.00	7 Payee address; 102 Diana Street	City; State; Zip Code ELSA TX 78537
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description Camp rental space
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7
Date 3-4-2026	Payee name Eduardo Gonzalez	
Amount (\$) \$200.00	Payee address; P.O. Box 54	City; State; Zip Code Edrooch TX 78538
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Signs Installation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7
Date 3-5-2026	Payee name Poli-Signs, RGV	
Amount (\$) \$2,342.53	Payee address; 305 S. Illinois Avenue	City; State; Zip Code Weslaco TX 78596
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Political signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7

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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 8	2 FILER NAME Daniel A. Guzman	3 Filer ID (Ethics Commission Filers) .
4 Date 3-5-2026	5 Payee name San Juanita Sarabia	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 7705 N. FM 1015 Mercedes TX. 78570 <input type="checkbox"/> Check if individual's residence address.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Trailers Rental/Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7
Date 3-12-2026	Payee name David Alaniz	
Amount (\$) \$200.00	Payee address; City; State; Zip Code P.O. Box 561 LA Villa TX. 78562 <input type="checkbox"/> Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Install signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7
Date 3-12-2026	Payee name Aaron Gonzalez	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 3505 Country Club Drive Edinburg TX. 78542 <input type="checkbox"/> Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block Walking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7

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 | 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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| 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: 3 of 8	2 FILER NAME Daniel A. Guzman	3 Filer ID (Ethics Commission Filers) .
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4 Date 3-13-2026	5 Payee name Jose Meza
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6 Amount (\$) \$120.00	7 Payee address; 2103 Citrus Dr.	City; Weslaco	State; Tx	Zip Code 78596
<input type="checkbox"/> Check if individual's residence address.				

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Fundraiser/ Medical Expenses
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date 3-13-2026	Payee name Ruben Guajardo		
Amount (\$) \$500.00	Payee address; 1930 Royal Palm Drive		
	City; Mercedes	State; Tx	Zip Code 78570
<input type="checkbox"/> Check if individual's residence address.			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block Walking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought	Office held STC District 7
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Date 3-17-2026	Payee name Gregorio Treviño, Jr.		
Amount (\$) \$200.00	Payee address; 310 E. Nixon street		
	City; Edcouch	State; Tx	Zip Code 78538
<input type="checkbox"/> Check if individual's residence address.			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block Walking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought	Office held STC District 7
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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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| 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: 4 of 8	2 FILER NAME Daniel A. Gozman	3 Filer ID (Ethics Commission Filers)
4 Date 3-17-2026	5 Payee name Poli-Signs, RGV	
6 Amount (\$) \$ 866-00	7 Payee address; 305 S. Illinois Avenue	City; State; Zip Code Weslco TX 78596
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Political signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: Danny Gozman Office sought: Office held: STC District 7	
Date 3-22-2026	Payee name Jessica Rodriguez Garza	
Amount (\$) \$1,000-00	Payee address; P.O. Box 2203	City; State; Zip Code Elsa TX 78543
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Campaign Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Candidate / Officeholder name: Office sought: Office held:	
Date 3-23-2026	Payee name Rolando Uribe, Jr	
Amount (\$) \$500-00	Payee address; 11298 Domingo Drive	City; State; Zip Code La Feria TX 78559
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block Walking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Candidate / Officeholder name: Danny Gozman Office sought: Office held: STC District 7	

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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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| 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: 5 of 8	2 FILER NAME Daniel A. Guzman	3 Filer ID (Ethics Commission Filers)
4 Date 3-23-2026	5 Payee name Aaron Rodriguez	
6 Amount (\$) \$500.00	7 Payee address; P.O. Box 1793 <input type="checkbox"/> Check if individual's residence address.	
	City; Elsa	State; TX. Zip Code 78543
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Block Walking
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7
Date 3-23-2026	Payee name Erica Saenz	
Amount (\$) \$500.00	Payee address; P.O. Box 3942 <input type="checkbox"/> Check if individual's residence address.	
	City; Edcouch	State; TX Zip Code 78538
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block walking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7
Date 3-26-2026	Payee name Ruben Gonzalez, Jr	
Amount (\$) \$1,000.00	Payee address; Po. Box 1507 <input type="checkbox"/> Check if individual's residence address.	
	City; Edcouch	State; TX Zip Code 78538
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block Walking/Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 6 of 8	2 FILER NAME Daniel A. Guzman	3 Filer ID (Ethics Commission Filers)
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4 Date 3-26-2026	5 Payee name Rolando Cantu
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6 Amount (\$) \$350.00	7 Payee address; P.O. Box 22	City; Edcouch	State; TX	Zip Code 78538
<input type="checkbox"/> Check if individual's residence address.				

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Block Walking
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought	Office held STC District 7
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Date 3-26-2026	Payee name Lionel Rangel
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Amount (\$) \$500.00	Payee address; P.O. Box 824	City; Edcouch	State; TX	Zip Code 78538
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Install signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought	Office held STC District 7
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Date 3-26-2026	Payee name City of Donna
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Amount (\$) \$400.00	Payee address; 307 S. 12th street	City; Donna	State; TX	Zip Code 78537
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Political sign Permit
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought	Office held STC District 7
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
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: 7 of 8	2 FILER NAME Daniel A. Guzman	3 Filer ID (Ethics Commission Filers)
4 Date 3-26-2026	5 Payee name Isabel Martinez, Jr.	
6 Amount (\$) \$1,000.00	7 Payee address; P.O. Box 3971	City; State; Zip Code Edcouch TX 78538
<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Block Walking/Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7
Date 3-26-2026	Payee name San Juanita Sarabia	
Amount (\$) \$2,200.00	Payee address; 7705 N. Fm 1015	City; State; Zip Code Mercedes TX 78570
<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Trailers Rental Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7
Date 3-26-2026	Payee name Michael Belmarez	
Amount (\$) \$250.00	Payee address; P.O. Box 1091	City; State; Zip Code Elsa TX 78543
<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block Walking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought Office held STC District 7

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
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: 8 of 8	2 FILER NAME Daniel A. Guzman	3 Filer ID (Ethics Commission Filers)
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4 Date 3-27-2026	5 Payee name Mario Cano
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6 Amount (\$) \$250.00	7 Payee address; 713 Fannin Street <input type="checkbox"/> Check if individual's residence address.	City; Weslaco	State; TX	Zip Code 78599
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Social Media
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought	Office held STC District 7
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Date 3-28-2026	Payee name Aracely de la Cruz
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Amount (\$) \$150.00	Payee address; P.O. Box 1364 <input type="checkbox"/> Check if individual's residence address.	City; Edcouch	State; TX	Zip Code 78538
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Fundraiser/Medical
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3-30-2026	Payee name Poli-Signs, RGV
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Amount (\$) \$422.18	Payee address; 305 S. Illinois Avenue <input type="checkbox"/> Check if individual's residence address.	City; Weslaco	State; TX	Zip Code 78596
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Political signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danny Guzman	Office sought	Office held STC District 7
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