FORM C/OH CANDIDATE / OFFICEHOLDER **COVER SHEET PG 1 CAMPAIGN FINANCE REPORT** Total pages filed: 1 Filer ID The C/OH Instruction Guide explains how to complete this form. 3 CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY OFFICEHOLDER Robert Date Received NAME SUFFIX NICKNAME LAST Gutierrez d-delivered or Date Postmarked APT / SUITE #; CITY; ZIP CODE CANDIDATE / ADDRESS / PO BOX; OFFICEHOLDER MAILING ADDRESS

	Change of Address				Date Processor	TE OF EX SECTION S
					Date Imaged	0000
5	CAMPAIGN TREASURER	MS/MRS/MR	FIRST	MI		
	NAME	7	ASON			
		NICKNAME	LAST	SUFFIX	<	
			BIENSKI			
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO E	BOX PLEASE);	APT / SUITE #;	CITY;	STATE; ZIP CODE
	ADDRESS (Residence or Business)	100 Univers	sity Dr	Suite 108	College Station	Tx 77840
7	CAMPAIGN	AREA CODE PHONE	NUMBER EXTENSI	ON		
	TREASURER PHONE	919 2	19-5555			
8	REPORT TYPE	X January 15 July 15	30th day before election 8th day before election	Runoff Exceeded modified reporting limit	appointme	fter campaign treasurer nt (officeholder only) ort (Attach C/OH-FR)
9	PERIOD	Month Day Year		Month	Day Year	
	COVERED	07/01/2024	THROUGH	12/3	1/2024	
10	ELECTION	ELECTION DATE		ELECTION TY	A CONTRACTOR OF THE PARTY OF TH	
		Month Day Year	Primary General	Runoff	Other	
11	OFFICE	OFFICE HELD (if any)		12 OFFICE SOI	UGHT (if known)	
		City of Bryan Mayor Brazos		None		
			GO TO PAG	SE 2		
For	rms provided by Te	xas Ethics Commission	www.ethics.sta	te.tx.us		Version V4.1.0.5dd2ace2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2**

FROM candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's know.	2 of 8						
FROM POLITICAL COMMITTEE(S) Additional Pages Candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's know consent. Candidates and officeholders are required to report this information only if they receive notice of such exconsent. Committee Type COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS							
GENERAL COMMITTEE ADDRESS	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 CAMPAIGN TREASURER NAME							
COMMITTEE CAMPAIGN TREASURER ADDRESS							
16 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	0.00						
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$	1,010.96						
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$	0.00						
4. TOTAL POLITICAL EXPENDITURES \$	198.18						
CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$	1,159.85						
OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	0.00						
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. Signature of Gandidate or Officeholder Sworn to and subscribed before me, by the said Bobby Gufierrez, this the day of January, 20 D, to certify which, witness my hand and seal of office. Signature of officer administering Printed name of officer administering Title of officer administering oath							

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 8

300								
18 FILER NAM Gutierrez,								
20 SCHEDULE NAME OF S	SUBTOTAL AMOUNT							
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS							
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS							
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.	SCHEDULE E: LOANS		\$					
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 1	98.18				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$					
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	1 Total page Sch: 1/1	es Schedule A1: Rpt: 4/8		
2	FILER NAME Gutierrez, R		3 Filer ID			
4	Date 10/23/2024	5 Full name of contributor X out-of-state PAC (ID# COMCAST CORPORATION 6 Contributor address; City; State; Zip Code ONE COMCAST CENTER 1701 JFK BLVD PHILADELPHIA, PA 19103	7 Amount o	f Contribution (\$)	\$1,000.00	
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID# WinRed Contributor address; City; State; Zip Code 1776 Wilson Blvd suite 305 Arlington, VA 22209		Amount o	f Contribution (\$)	\$10.96
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
-0	rms provided	by Texas Ethics Commission www.ethi	cs.state.tx.us		Version V4.1	.0.5dd2ace

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Political Committee 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:	2 FILER NAME 3 Filer ID				
	Sch: 1/4 Rpt: 5/8	Gutierrez, Robert				
4	Date 07/01/2024	5 Payee name GOOGLE G SUITE				
6	Amount (\$) \$23.03	7 Payee address; City; State; Zip Code 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website				
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
	Date 08/02/2024	Payee name GOOGLE G SUITE				
Amount (\$) Payee address; City; State; Zip Code \$23.03 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043						
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Sche Check if Austin, TX, officeholder living expense Website						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Date Payee name 09/03/2024 GOOGLE G SUITE						
	Amount (\$) \$23.03	Payee address; City; State; Zip Code 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

	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: 2/4 Rpt: 6/8	Gutierrez, Robert					
4	Date	5 Payee name					
	10/02/2024	GOOGLE G SUITE					
6	Amount (\$) \$23.03	7 Payee address; City; State; Zip Code 1600 AMPHITHEATRE PKWY					
		MOUNTAIN VIEW, CA 94043					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Г	Date	Payee name					
	11/04/2024	GOOGLE G SUITE					
	Amount (\$) \$23.03	Payee address; City; State; Zip Code 1600 AMPHITHEATRE PKWY					
L		MOUNTAIN VIEW, CA 94043					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense website							
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
F	Date	Payee name					
	12/02/2024	GOOGLE G SUITE					
	Amount (\$) \$23.03	Payee address; City; State; Zip Code 1600 AMPHITHEATRE PKWY					
		MOUNTAIN VIEW, CA 94043					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Fees Office Overhead/Rental Expense Travel in District Travel Out of District Food/Beverage Expense Polling Expense Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services 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 3 Filer ID Sch: 3/4 Rpt: 7/8 Gutierrez, Robert 4 Date 5 Payee name PROSPERITY BANK 07/31/2024 6 Amount (\$) Payee address; City; State; Zip Code \$10.00 3710 E 29TH ST **BRYAN, TX 77802 PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense service fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/31/2024 PROSPERITY BANK Amount (\$) Payee address; City; State; Zip Code \$10.00 3710 E 29TH ST **BRYAN, TX 77802 PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Accounting/Banking Check if travel outside of Texas, Complete Schedule T, **EXPENDITURE** Check if Austin, TX, officeholder living expense service fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/30/2024 PROSPERITY BANK City; Amount (\$) Payee address; State; Zip Code \$10.00 3710 E 29TH ST **BRYAN, TX 77802 PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense service fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			ee Legal	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category	y not listed above)	
1	Total pages Schedule F1:	2 FIL	ER NAME					3	Filer ID	
	Sch: 4/4 Rpt: 8/8	Gu	tierrez, Robe	rt						
4	Date	5 Pay	ree name							
	10/31/2024		OSPERITY E	BANK						
6	Amount (\$)	7 Pay	/ee address;	City;	State; Zip Co	ode				
	\$10.00	37:	10 E 29TH S	Г						
		BR	YAN, TX 778	802						
8	PURPOSE	(a) Cat	tegory (See Cate	egories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE		counting/Ban						de of Texas. Complete Sc	
	EX ENDITORE						Check if Austin, service fee	, TX,	officeholder living expens	se
							Service lee			
9	Complete ONLY if direct	Can	didate/Officeho	lder name	Office sou	laht			Office held	
,	expenditure to benefit C/OI		and discontinue 110	idol Humb	Jilioc 300	agrit			O.I.OO IIOId	
H	Date	Day	yee name					_		
	11/30/2024		OSPERITY E	BANK						
-	Amount (\$)		yee address;	City;	State; Zip Ci	nde				
	\$10.00 3710 E 29TH ST									
	72000									
	BRYAN, TX 77802									
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description										
OF Acco			counting/Ban		of this schedule)	(~)		outsi	de of Texas, Complete So	chedule T.
	Check if Austin, TX, officeholder living expense				se					
	service fee									
L										
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
H			College of the College and							
	Date Payee name 12/31/2024 PROSPERITY BANK									
L	12/31/2024				Ctoto: 7:- 0	od-		_		
	Amount (\$) Payee address; City; State; Zip Code									
	\$10.00	3/	10 E 29TH S	L						
	PRVAN TV 77003									
-	BRYAN, TX 77802									
	PURPOSE OF Accounting/Banking (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas, Complete Schedule T.						chedule T.			
	EXPENDITURE ACCOUNTING/BANKING Check if Austin, TX, officeholder living expense									
		service fee								
L										
	Complete ONLY if direct expenditure to benefit C/O		didate/Officeho	lder name	Office so	ught			Office held	
L	onportantial to bottom O/O									