BC

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: 19

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: MR. | FIRST: BENJAMIN | MI: F.

NICKNAME: BEN | LAST: CASTILLO | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

Change of Address

ADDRESS / PO BOX: 1900 TANGLEWOOD | APT / SUITE #: | CITY: WESLACO | STATE: TX | ZIP CODE: 78596

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (956) | PHONE NUMBER: 373-1599 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: MR. | FIRST: BENJAMIN | MI: F.

NICKNAME: BEN | LAST: CASTILLO | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): 1900 TANGLEWOOD | APT / SUITE #: | CITY: WESLACO, | STATE: TX. | ZIP CODE: 78596

8 CAMPAIGN TREASURER PHONE

AREA CODE: (956) | PHONE NUMBER: 373-1599 | EXTENSION:

9 REPORT TYPE

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

10 PERIOD COVERED

Month / Day / Year: 09 / 25 / 2026 THROUGH 10 / 24 / 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): WESLACO ISD TRUSTEE, PL 5

13 OFFICE SOUGHT (if known)

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

OFFICE USE ONLY

Date Received

Weslaco ISD
Rcvd: 10/26/2026
By: [signature]
Exec. Adm. Asst. - WISD
Board of Trustees

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME	BENJAMIN CASTILLO	**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)	$ Ø
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 16,750=
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ Ø
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 24,720.37
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 8,209.25
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ Ø

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.

_____
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 BENJAMIN CASTILLO, and my date of birth is 02/18/1988.

My address is 1900 TANGLEWOOD, WESLACO, TX, 78596, USA.
(street) (city) (state) (zip code) (country)

Executed in HIDALGO County, State of TEXAS, on the 26TH day of OCTOBER, 20 24.
(month) (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)
BENJAMIN CASTILLO	

		21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	✓	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 16,750=
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	$ 23,252 40
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	$ 1,467 97
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: 3

2 FILER NAME: BENJAMIN CASTILLO

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 ($)
10/22/2026	INNOVATIVE WORKS, LLC	1615 GUADALAJARA AVE. BROWNSVILLE, TX 78526	$2,500=

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 ($)
10/14/2026	FUTURE TEXAS PAC	1317 ORANGE BLOSSOM WESLACO, TX 78596	$2,500=

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 ($)
10/14/2026	DAVID LEE FUENTES CAMPAIGN FUND	3619 SOUTH BORDER AVE WESLACO, TX 78596	$500=

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 ($)
10/14/2026	JORGE GONZALEZ & JUAN J GONZALEZ	2900 N TEXAS BLVD. STE 201 WESLACO, TX 78599	$3,000=

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: 3

2 FILER NAME: BENJAMIN CASTILLO

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 ($)
10/14/2024	OREGON INSURANCE AGENCY. LLC	505 S. TEXAS BLVD WESLACO, TX 78596	$500=

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 ($)
10/14/2024	HUMBERTO GARZA JR	318 E. 18TH ST. APT 17 WESLACO, TX 78596	$1,000=

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
CONSULTANT	SELF

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)
10/14/2024	JOE & NORMA FLORES	1004 DOWLER ST. MERCEDES, TX 78570	$500=

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
SELF	SELF

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)
10/07/2024	LAW OFFICE OF ELOY SEPULVEDA	716 S. TEXAS BLVD WESLACO, TX 78596	$1,000=

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 3

2 FILER NAME: BENJAMIN CASTILLO

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 ($)
10/07/2024	LAW OFFICES OF ELEQUIEL REYNA JR, PC	702 W EXP 83 STE 100 WESLACO, TX 78599	$2,000=

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 ($)
10/02/2024	UNEBARGER, GOGGAN, BLAIR & SAMPSON, LLP	P.O. BOX 17428 AUSTIN, TX 78760	$1,580=

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 ($)
10/02/2024	EARL & ASSOCIATES, P.C.	10007 HUEBNER RD, STE 303 SAN ANTONIO, TX 78240	$750=

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 ($)
10/02/2024	BRIAN GODINEZ	5007 N. 9TH ST. MCALLEN, TX 78504	$1,000=

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
CEO	ERO ARCHITECTS

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
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)
10	BENJAMIN CASTILLO	

4 Date	5 Payee name
10/22/2024	PILAR MORENO

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$200=	318 W. RAILROAD ST.	WESLACO,	TEXAS	78596

Check if individual's residence address.

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	CONTRACT LABOR	CAMPAIGN LABOR

(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL5

Date	Payee name
10/24/2024	PILAR MORENO

Amount ($)	Payee address;	City;	State;	Zip Code
$200=	318 W. RAILROAD ST.	WESLACO,	TEXAS	78596

Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	CONTRACT LABOR	CAMPAIGN LABOR

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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL5

Date	Payee name
10/22/2024	LUCIANO GARZA

Amount ($)	Payee address;	City;	State;	Zip Code
$1,200=	3515 PECAN GROVE	WESLACO,	TEXAS	78596

Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	CONTRACT LABOR	CAMPAIGN LABOR

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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL5

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
10	BENJAMIN CASTILLO	

Expenditure 1

4 Date	5 Payee name
10/22/2024	JENNIFER ARREDONDO

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$2,000=	424 WEST CAFFERY AVE Check if individual's residence address.	PHARR,	TEXAS	78577

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	ADVERTISING EXPENSE	PROMOTIONAL ITEMS

(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE, PL5

Expenditure 2

Date	Payee name
10/21/2024	JENNIFER ARREDONDO

Amount ($)	Payee address;	City;	State;	Zip Code
$1,373.02	424 WEST CAFFERY AVE. Check if individual's residence address.	PHARR,	TEXAS	78577

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	EVENT EXPENSE	REIMBURSEMENT FOR CAMPAIGN EVENT EXPENSE PAID BY CAMPAIGN WORKER FROM PERSONAL FUNDS

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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL5

Expenditure 3

Date	Payee name
10/20/2024	MARCO GUZMAN

Amount ($)	Payee address;	City;	State;	Zip Code
$120=	815 N 15TH PLACE Check if individual's residence address.	EDINBURG,	TX	78539

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	ADVERTISING EXPENSE	CAMPAIGN SERVICES/VOTER OUTREACH

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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL5

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
10	BENJAMIN CASTILLO	

4 Date	5 Payee name
10/20/2026	ISAAC ANCISO

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$1800=	3816 TORO AVE.	WESLACO,	TX	78596

Check if individual's residence address.

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
CONTRACT LABOR	CAMPAIGN LABOR

(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
10/19/2026	Norma Vento Reyes

Amount ($)	Payee address;	City;	State;	Zip Code
$750=	3457 PFC PEDRO MARTINEZ RD.	WESLACO,	TEXAS	78596

Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
CONTRACT LABOR	CAMPAIGN LABOR

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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
10/19/2026	ROQUE TAFOLLA

Amount ($)	Payee address;	City;	State;	Zip Code
$800=	1502 HOOPER ST.	SAN JUAN,	TEXAS	78589

Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
CONTRACT LABOR	CAMPAIGN LABOR

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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10	2 FILER NAME BENJAMIN CASTILLO	3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2024	5 Payee name A+ ENTERPRISES	
6 Amount ($) $351.82	7 Payee address; 3501 MORELAND DR. Check if individual's residence address.	City; WESLACO, TEXAS State; Zip Code 78596
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description CAMPAIGN SERVICES/ VOTER OUTREACH
	(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 BENJAMIN CASTILLO	Office sought Office held WESLACO ISD TRUSTEE PL 5

Date 10/16/2024	Payee name BETTY PEREZ	
Amount ($) $600=	Payee address; 307 N. PINO Check if individual's residence address.	City; WESLACO, TEXAS State; Zip Code 78596
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description CAMPAIGN LABOR
	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 BENJAMIN CASTILLO	Office sought Office held WESLACO ISD TRUSTEE PL 5

Date 10/16/2024	Payee name MANUEL SILVA JR	
Amount ($) $800=	Payee address; 1118 W. 4TH ST. Check if individual's residence address.	City; WESLACO, TEXAS State; Zip Code 78596
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description CAMPAIGN LABOR
	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 BENJAMIN CASTILLO	Office sought Office held WESLACO ISD TRUSTEE PL 5

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10	2 FILER NAME: BENJAMIN CASTILLO	3 Filer ID (Ethics Commission Filers)

Expenditure 1

4 Date: 10/14/2026	5 Payee name: BRAND BOOSTERS CO LLC		
6 Amount ($): $357.23	7 Payee address: 301 N. MCCOLL RD. STE G (Check if individual's residence address.)	City: MCALLEN,	State: TEXAS Zip Code: 78501
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSE	(b) Description: CAMPAIGN SERVICES / VOTER OUTREACH	
	(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: BENJAMIN CASTILLO	Office sought	Office held: WESLACO ISD TRUSTEE PLS

Expenditure 2

Date: 10/14/2026	Payee name: MANUEL SILVA JR		
Amount ($): $1,500 =	Payee address: 1118 W. 4TH ST. (Check if individual's residence address.)	City: WESLACO, TEXAS	State: Zip Code: 78596
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): CONTRACT LABOR	Description: CAMPAIGN LABOR	
	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: BENJAMIN CASTILLO	Office sought	Office held: WESLACO ISD TRUSTEE PLS

Expenditure 3

Date: 10/13/2026	Payee name: PANTHER NATION BASKETBALL BOOSTERS INC.		
Amount ($): $300 =	Payee address: (Check if individual's residence address.)	City: WESLACO,	State: TEXAS Zip Code: 78596
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): CONTRIBUTIONS/DONATIONS MADE BY CANDIDATE	Description: DONATION TO BASKETBALL TEAM	
	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: BENJAMIN CASTILLO	Office sought	Office held: WESLACO ISD TRUSTEE PLS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10	2 FILER NAME BENJAMIN CASTILLO	3 Filer ID (Ethics Commission Filers)

Expenditure 1

4 Date	5 Payee name
10/08/2024	MANUEL TORRES

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$1,333.33	12701 N FM 88	WESLACO,	TEXAS	78596

Check if individual's residence address.

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
CONTRACT LABOR	CAMPAIGN LABOR

(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
BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Expenditure 2

Date	Payee name
10/08/2024	JENNIFER ARREDONDO

Amount ($)	Payee address;	City;	State;	Zip Code
$2,000=	426 WEST CAFFERY	PHARR,	TEXAS	78577

Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
EVENT EXPENSE	EVENT SUPPLIES & DECOR

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
BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Expenditure 3

Date	Payee name
10/07/2024	FUTURE TEXAS PAC

Amount ($)	Payee address;	City;	State;	Zip Code
$400=	1317 ORANGE BLOSSOM	WESLACO,	TEXAS	78596

Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
CONTRIBUTIONS/DONATION MADE BY CANDIDATE	CONTRIBUTION TO FUTURE TEXAS PAC DESIGNATED FOR WESLACO ELKS LODGE FUNDRAISER

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
BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
10	BENJAMIN CASTILLO	

4 Date	5 Payee name
10/07/2026	LESLIE GOWER

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$5,000=	709 E. FREIDA ST.	PHARR,	TEXAS	78577

Check if individual's residence address.

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	CONTRACT LABOR	CAMPAIGN LABOR

(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
10/06/2026	ISAAC ANCISO

Amount ($)	Payee address;	City;	State;	Zip Code
$200=	3816 TORO AVE.	WESLACO,	TEXAS	78596.

Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	CONTRACT LABOR	CAMPAIGN LABOR

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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
10/02/2026	LUCIANO GARZA

Amount ($)	Payee address;	City;	State;	Zip Code
$500=	3515 PECAN GROVE	WESLACO,	TEXAS	78596

Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	CONTRACT LABOR	CAMPAIGN LABOR

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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10	2 FILER NAME BENJAMIN CASTILLO	3 Filer ID (Ethics Commission Filers)

Expenditure 1

4 Date 10/02/2024	5 Payee name NORMA VENTO REYES		
6 Amount ($) $667=	7 Payee address; 3457 PFC PEDRO MARTINEZ RD	City; WESLACO,	State; TEXAS Zip Code 78596
	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 CAMPAIGN LABOR	
	(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 BENJAMIN CASTILLO	Office sought	Office held WESLACO ISD TRUSTEE PLS

Expenditure 2

Date 10/04/2024	Payee name ROSALINDA CASTANEDA		
Amount ($) $500=	Payee address; 1410 PLAYA DR.	City; WESLACO,	State; TEXAS Zip Code 78596
	Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description CAMPAIGN LABOR	
	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 BENJAMIN CASTILLO	Office sought	Office held WESLACO ISD TRUSTEE PLS

Expenditure 3

Date 10/05/2024	Payee name AGRIPINA HERNANDEZ		
Amount ($) $1500=	Payee address; 1410 PLAYA DR	City; WESLACO,	State; TEXAS Zip Code 78596
	Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description CAMPAIGN LABOR	
	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 BENJAMIN CASTILLO	Office sought	Office held WESLACO ISD TRUSTEE PLS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
10	BENJAMIN CASTILLO	

4 Date	5 Payee name
10/05/2026	ALICIA GONZALEZ

6 Amount ($)	7 Payee address;	City:	State;	Zip Code
$1650=	721 VALLEY TRACE DR Check if individual's residence address.	WESLACO,	TEXAS	78596

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	CONTRACT LABOR	CAMPAIGN LABOR
	(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
10/02/2026	THELMA ANCISO

Amount ($)	Payee address;	City;	State;	Zip Code
$500=	3814 TORO AVE Check if individual's residence address.	WESLACO,	TEXAS	78596

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	CONTRACT LABOR	CAMPAIGN LABOR
	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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
09/29/2026	ANTONIO MARTINEZ

Amount ($)	Payee address;	City;	State;	Zip Code
$250=	0435 MATEO ESCOBAR Check if individual's residence address.	MONTE ALTO,	TEXAS	78538

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	CONTRIBUTIONS/DONATIONS MADE BY CANDIDATE	DONATION TO STUDENTS FFA PROJECT
	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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

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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
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)
10	BENJAMIN CASTILLO	

4 Date	5 Payee name
09/29/2026	LUCIANO GARZA

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$500=	3515 PECAN GROVE Check if individual's residence address.	WESLACO,	TEXAS	78596

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
CONTRACT LABOR	CAMPAIGN LABOR

(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name

Amount ($)	Payee address;	City;	State;	Zip Code
	Check if individual's residence address.			

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
	Check if individual's residence address.			

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
3	BENJAMIN CASTILLO	

4 Date	5 Payee name
10/23/2026	WAL-MART

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$ 454.12 Reimbursement from political contributions intended	1206 E JACKSON AVE Check if individual's residence address.	MCALLEN,	TEXAS	78503

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	EVENT EXPENSE	CANDY FOR DISTRIBUTION @ CAMPAIGN EVENTS
	(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PLS

Date	Payee name
10/20/2026	WAL-MART

Amount ($)	Payee address;	City;	State;	Zip Code
$1337.73 Reimbursement from political contributions intended	1600 S. TEXAS BLVD Check if individual's residence address.	WESLACO,	TEXAS	78596

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	EVENT EXPENSE	CANDY PURCHASE FOR DISTRIBUTION @ CAMPAIGN EVENTS
	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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PLS

Date	Payee name
10/21/2026	JENNIFER ARREDONDO

Amount ($)	Payee address;	City;	State;	Zip Code
$300 = Reimbursement from political contributions intended	426 W CAFFERY AVE Check if individual's residence address.	PHARR,	TEXAS	78577

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	EVENT EXPENSE	REIMBURSEMENT
	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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PLS

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
3	BENJAMIN CASTILLO	

4 Date	5 Payee name
10/14/2024	SAMS CLUB

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$ 91.90 Reimbursement from political contributions intended	1400 E JACKSON AVE Check if individual's residence address.	MCALLEN,	TEXAS	78503

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	EVENT EXPENSE	CANDY PURCHASE FOR DISTRIBUTION AT CAMPAIGN EVENTS
	(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
10/14/2024	WAL-MART

Amount ($)	Payee address;	City;	State;	Zip Code
$ 192.30 Reimbursement from political contributions intended	1200 E JACKSON AVE Check if individual's residence address.	MCALLEN,	TEXAS	78503

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	EVENT EXPENSE	CANDY PURCHASE FOR DISTRIBUTION AT CAMPAIGN EVENTS
	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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
10/13/2026	AMAZON

Amount ($)	Payee address;	City;	State;	Zip Code
$ 12.96 Reimbursement from political contributions intended	410 TERRY AVE N Check if individual's residence address.	SEATTLE,	WA	98109

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	EVENT EXPENSE	BAGS FOR CAMPAIGN EVENT
	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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
3	BENJAMIN CASTILLO	

4 Date	5 Payee name
10/10/2026	WALGREEN'S

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$22.72 Reimbursement from political contributions intended	1701 W. BUS 83 Check if individual's residence address.	WESLACO,	TEXAS	78596

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	EVENT EXPENSE	BANNER FOR CAMPAIGN EVENT
	(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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name
10/04/2026	AMAZON

Amount ($)	Payee address;	City;	State;	Zip Code
$156.24 Reimbursement from political contributions intended	410 TERRY AVE N Check if individual's residence address.	SEATTLE,	WA	98109

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	EVENT EXPENSE	SUPPLIES
	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
	BENJAMIN CASTILLO		WESLACO ISD TRUSTEE PL 5

Date	Payee name

Amount ($)	Payee address;	City;	State;	Zip Code
Reimbursement from political contributions intended	Check if individual's residence address.			

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