



Filing ID #10072336

# FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B81 Cannon Building • Washington, DC 20515

## FILER INFORMATION

**Name:** Aimee Carrasco  
**Status:** Congressional Candidate  
**State/District:** TX32

## FILING INFORMATION

**Filing Type:** Candidate Report  
**Filing Year:** 2025  
**Filing Date:** 09/07/2025  
**Period Covered:** 01/01/2024– 07/23/2025

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Sale of vehicle [OT]	JT	\$15,001 - \$50,000	Payment from sale of vehicle	\$15,001 - \$50,000	None
DESCRIPTION: Truck was sold for \$38,400					
Spring Health [PS]		\$15,001 - \$50,000	Exercised Stock Options	\$2,501 - \$5,000	None
DESCRIPTION: 354 Vested Options Exercised. Purchased at \$10.60					

\* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

## SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Health Advocate	Salary	\$48,000.07	\$104,237.24
US Dept of Veterans Affairs	Spouse Disability	\$52,963.56	\$52,963.56
Defense Finance and Accounting Service	Spouse Retirement Pay	\$27,795.72	\$27,795.72

## SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	American education services	Nov 2005	Student loans	\$50,001 - \$100,000
	Nelnet	August 2012	Student loans	\$100,001 - \$250,000

## SCHEDULE E: POSITIONS

Position	Name of Organization
CEO, Founder	AMC Therapy
CEO, Founder	Lykke Legacy

## SCHEDULE F: AGREEMENTS

None disclosed.

## SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

## EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

**Trusts:** Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes  No

**Exemption:** Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

Yes  No

## CERTIFICATION AND SIGNATURE

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

**Digitally Signed:** Aimee Carrasco , 09/07/2025