# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00065230		2 Total pages filed: 82	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY	
OFFICEHOLDER NAME	The Honorable	Terry			Date Received	
10 000					ELECTRONICALLY FILED	
					07/17/2023	
	NICKNAME	LAST		SUFFIX	07/11/2023	
		Canales				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked	
OFFICEHOLDER MAILING	310 S. Closner Blvd					
ADDRESS					Receipt # Amount	
Change of Address	Edinburg, TX 78539					
	Lumburg, 17, 70000				Date Processed	
					Date Imaged	
F. CAMPAICN	MC (MDC /MD	FIDOT				
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mrs.	Erica E.				
	NICKNAME	LAST		SUFFIX		
		Canales				
6 CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AP <sup>-</sup>	T / SUITE #; CITY;	STATE; ZIP CO	DDE
TREASURER ADDRESS	310 S. Closner Blvd.					
(Residence or Business)	Edinburg, TX 78539					
	<b>3</b> ,					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER PHONE	(956) 605-0836					
8 REPORT		<u> </u>				
TYPE	January 15	30th day before	election	Runoff	15th day after campaign treasurer appointment (officeholder only)	
	X July 15	8th day before 6	election $\square$	Exceeded modified	Final Report (Attach C/OH-FR)	
		_ our day serore t		reporting limit	I mai report ( maon o/orr r rv)	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2023	TĿ	IROUGH	Month Day 06/30/202		
	01/01/2023			00/30/202		
10 ELECTION	ELECTION DATE			ELECTION TYPE		
LIU ELECTION	Month Day Year	XP	rimary	Runoff	Other	
	03/05/2024		Timary	LI Kunon		
	00/00/2024	G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative Dist	trict 40 Hidalgo		State Represent	ative District 40	
		60.7	TO DACE 2			
		GO I	O PAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 82

13 C / OH NAME	Canales, Terry (The	Honorable)	<b>14</b> Filer ID 00065230	(Ethics Commission Filers)
This box is for notice of political contributions accepted or political expenditures recandidate / officeholder. These expenditures may have been made without the consent. Candidates and officeholders are required to report this information only				eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	_	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITION	CAL EXPENDITURES		<b>\$</b> 102,309.52
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS OF THE LERIOD	LAST DAY OF THE	<b>\$</b> 614,645.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 0.00
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Hor	norable Terry Canale	
		-	f Candidate or Officeho	
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath
Signature of Office	or auministening	i milea name of officer administering	Tiue of office	administring odti

# **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

			C	OVER SHEE	T PG 3 3 of 82
	ER NAM	(Ethics Commissi	on Filers)		
		E SUBTOTALS SCHEDULE		SUBTOTAL	AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	68,843.85
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS			
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			19,483.09
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	13,982.58
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	\$	

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributors/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	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 (Ethics Commission Filers)
	Sch: 1/26 Rpt: 4/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	02/02/2023	"Pepe" Cabeza De Vaca Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	3103 S. Casa Linda
		McAllen, TX 78503
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Political donation
		Tolladar dorration
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/15/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.66	1516 Second Avenue
	, , , , ,	
		Seattle, WA 98101
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Disposable cups for office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>
	Data	
	Date 03/27/2023	Payee name Amazon
	Amount (\$) \$28.78	Payee address; City; State; Zip Code 1516 Second Avenue
	Ψ20.70	1010 Occord Avenue
		Seattle, WA 98101
	DUDDOCE	To.
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Chargers for electronics
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	oxperialitate to beliefit G/OI	·

## 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 Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 2/26 Rpt: 5/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	03/25/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$23.12	1516 Second Avenue
		Seattle, WA 98101
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Coffee supplies for office
Ļ	0 1 0 0 1 1 1 1 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	'	
	Date	Payee name
	02/02/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.98	1516 Second Avenue
		Seattle, WA 98101
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Coffee Supplies for Office
		Collee Supplies for Office
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Data	
	Date 01/28/2023	Payee name Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.14	1516 Second Avenue
		Seattle, WA 98101
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Coffee supplies for office
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>o</b>
$\vdash$		
l		

## 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 Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to com	-	te this form.
1	Total pages Schedule F1:	·	_	3 Filer ID (Ethics Commission Filers)
	Sch: 3/26 Rpt: 6/82	Canales, Terry (The Honorable)		00065230
4	Date	5 Payee name		'
	01/23/2023	Amazon		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$21.64	1516 Second Avenue		
		Seattle, WA 98101		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE			Check if Austin, TX, officeholder living expense
				Coffee supplies for office
_	0 1: 0.11.7.7.1.			0.00
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht	Office held
	Date	Payee name		
	05/18/2023	American Express		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$2,140.78	PO Box 650448		
		Dallas, TX 75265-0448		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Credit Card Payment		Check if travel outside of Texas. Complete Schedule T.
				Credit Card Payment
				Credit Card Layment
	Complete ONLY if direct	Candidate/Officeholder name Office sougl	ht	Office held
	expenditure to benefit C/OI			Office Hold
	Date	Doving name		
	04/18/2023	Payee name American Express		
		·	l a	
	Amount (\$)	Payee address; City; State; Zip Cod PO Box 650448	ie	
	\$1,372.52	PO 60X 030446		
		D. II TV 75005 0440		
		Dallas, TX 75265-0448		
	PURPOSE OF	,	(b)	Description
	EXPENDITURE	Credit Card Payment		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Credit Card Payment
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
sing Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I 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 (Ethics Commission Filers)
	Sch: 4/26 Rpt: 7/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	03/02/2023	American Express
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,038.33	PO Box 650448
		Dallas, TX 75265-0448
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Credit Card Payment
		Ground Gura Laymont
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/23/2023	American Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,982.23	PO Box 650448
		Dallas, TX 75265-0448
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Credit Card Payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/23/2023	Brooks County Fair Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$6,887.50	P. O. Box 835
		Falfurrias, TX 78355
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation to civic group
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I 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 (Ethics Commission Filers)
	Sch: 5/26 Rpt: 8/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	05/06/2023	Cavender's Boot City
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$240.33	4331 IH 35 South
		San Marcos , TX 78666
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Boot bags for gifts
		Boot bags for gifts
Ļ	0 1: 01:17.7.1	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	05/09/2023	Cavender's Boot City
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$80.11	4435 S. Lamar Blvd
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Boot bag for committee gift
		Boot bug for committee gift
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/O	· ·
⊨	D :	
	Date	Payee name
L	05/07/2023	Cavender's Boot City
	Amount (\$)	Payee address; City; State; Zip Code
	\$720.99	4914 S. Padre Island Drive
		Suite 105
		Corpus Christi, TX 78411
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
l	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Boot bags for gifts for committee
ldash		
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L	experience to belief C/O	·

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 6/26 Rpt: 9/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	05/06/2023	Cavender's Boot City
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$240.33	8809 Burnet Rd
		Austin, TX 78757
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Boot bags for gifts for committee
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	05/04/2023	Copy Plus
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,235.41	4500 N. 10th Street
		McAllen, TX 78504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Printing for mailings
		Timing for mainings
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Dayso name
	01/05/2023	Payee name East Hidalgo County Community Organization
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 184 Washington Avenue
	φ500.00	104 Washington Avenue
		O - D - N TOFOO
		San Benito, TX 78586
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

## 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/26 Rpt: 10/82	Canales, Terry (The Honorable)	00065230
4	Date	5 Payee name	•
	03/29/2023	Edinburg Housing Authority	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	910 Sugar Rd	
		Edinburg, TX 78539	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense  Donation for 2023 Easter egg hunt
			Donation for 2023 Easter egg num
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol		Office field
_	Date	Davies warms	
	05/15/2023	Payee name Engraving Solutions	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$320.00	909 Cherico St.	
		Austin, TX 78702	
	PURPOSE OF	5 , (con considerate management are not considerate)	Description
	EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Engraving for boot bags
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	05/11/2023	Engraving Solutions	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$600.00	909 Cherico St.	
		Austin, TX 78702	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	·	Check if Austin, TX, officeholder living expense
			Engraving for Cups
	0 1: 0		05
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

## 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete th	nis form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/26 Rpt: 11/82	Canales, Terry (The Honorable)	00065230
4	Date	5 Payee name	•
	05/12/2023	Fed Ex Office	
6	Amount (\$) \$87.79	7 Payee address; City; State; Zip Code 327 Congress Avenue Suite 100 Austin, TX 78701	
8	PURPOSE OF EXPENDITURE		scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ernight mailing of materials to District
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/08/2023	Flower Shack	
	Amount (\$) \$317.05	Payee address; City; State; Zip Code 3123 S. Closner Blvd	
		Edinburg, TX 78539	
	PURPOSE OF EXPENDITURE		Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wers for funeral
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/11/2023	Flower Shack	
	Amount (\$) \$211.36	Payee address; City; State; Zip Code 3123 S. Closner Blvd	
		Edinburg, TX 78539	
	PURPOSE OF EXPENDITURE	Oliv Awards/Wiemonals Expense	scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wers for Funeral
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

## 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 9/26 Rpt: 12/82	2 FILER NAME Canales, Terry (The Honorable)  3 Filer ID (Ethics Commission Filers) 00065230
4	Date 03/05/2023	5 Payee name HEB
6	Amount (\$) \$21.74	7 Payee address; City; State; Zip Code 8900 S. Congress Avenue
		Austin, TX 78745
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Disposable cutlery and candy for office
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 04/02/2023	Payee name HEB
	Amount (\$) \$11.74	Payee address; City; State; Zip Code 8900 S. Congress Avenue
		Austin, TX 78745
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Supplies For Office  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Disinfecting Wipes and Bottled Water
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 05/07/2023	Payee name HEB
	Amount (\$) \$81.08	Payee address; City; State; Zip Code 8900 S. Congress Avenue
		Austin, TX 78745
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Groceries for office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 10/26 Rpt: 13/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	01/22/2023	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.73	8900 S. Congress Avenue
		Austin, TX 78745
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Paper plates for office
		, apor planes is: sings
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	02/12/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.04	8900 S. Congress Avenue
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Bottled water for office
		Bottled Water for Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	· ·
	Date	Payee name
	02/26/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.56	8900 S. Congress Avenue
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Bottled water for office
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to benefit eyer	

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	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 (Ethics Commission Filers)
	Sch: 11/26 Rpt: 14/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	03/12/2023	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.23	8900 S. Congress Avenue
		Austin, TX 78745
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bottled water and paper plates for office
		Bothou Water and paper plates for emiss
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
_	Data	
	Date 03/26/2023	Payee name
		HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$83.00	8900 S. Congress Avenue
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Groceries for office
	2 2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/11/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$149.21	8900 S. Congress Avenue
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Groceries for office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experientare to benefit of or	<u> </u>

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/26 Rpt: 15/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	04/16/2023	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.94	8900 S. Congress Avenue
		Austin, TX 78745
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bottled water for office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/23/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.93	8900 S. Congress Avenue
		Austin, TX 78745
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Drinks for office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/20/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.69	8900 S. Congress Avenue
		Austin, TX 78745
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Groceries for office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experioralie to benefit C/OI	1

## SCHEDULE F1

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

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

	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 (Ethics Commission Filers)
	Sch: 13/26 Rpt: 16/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	03/09/2023	Hobby Lobby
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.35	7600 N. 10th, Bldg 300
		McAllen, TX 78704
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Paper for Frames for awards/grants
		g
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	03/01/2023	Hobby Lobby
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.10	7600 N. 10th, Bldg 300
		McAllen, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Flag frame for gift
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/19/2023	Joe Ramirez Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	214 W. Cano
		Edinburg, TX 78539
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		ooc Namilez Campaign Donation
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpens Vages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	2 FILER N	AME					3	Filer ID	(Ethics Commission Filers)	
L	Sch: 14/26 Rpt: 17/82	Canale	s, Terry (The Honorab	ole)					00065230		
4	Date	<b>5</b> Payee n	ame								
	02/21/2023	Judge 3	laime Jay Palacios Ca	ampaign							
6	Amount (\$)	<b>7</b> Payee a	ddress; City;	State;	Zip Co	ode					
	\$1,000.00	P.O. Bo	x 623								
		Pharr, ∃	ΓX 78577								
8	PURPOSE	(a) Categor	(See Categories listed at the	ton of this sche	dule)	(b)	Description				
	OF EXPENDITURE		utions/Donations Mad		idule)	`´	·	outsi	de of Texas. Comp	olete Schedule T.	
	EXPENDITURE	Candida	ate/Officeholder/Politic	cal Commi	ttee		<b>—</b>		officeholder living	expense	
							Political dona	tior	1		
						L					
9	Complete ONLY if direct expenditure to benefit C/O		e/Officeholder name	O:	ffice sou	ıght		_	Office he	ld	
	Date	Payee n	ame								
	05/09/2023	Mailbox	Depot								
	Amount (\$)	Payee a	ddress; City;	State;	Zip Co	ode					
	\$20.58	2112 W	. University Dr								
		Edinbu	rg, TX 78539								
	PURPOSE	(a) Categor	(See Categories listed at the	top of this sche	dule)	(b)	Description				_
	OF EXPENDITURE		ards/Memorials Exper		,		Check if travel	outsi	de of Texas. Comp	olete Schedule T.	
	EXPENDITORE						<b>—</b>	, TX,	officeholder living	expense	
							Mailings				
_	Complete ONII V if allowers	Compality - 1	/Office helder a	-	ffion s =	.a.b.t			Office 1	Id	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		e/Officeholder name	O	ffice sou	ignt			Office he	ıu	
_											_
	Date	Payee n									
	05/14/2023	Michae									
	Amount (\$)	Payee a		State;	Zip Co	ode					
	\$189.38	3021 S	IH-35, Ste 190								
		Round	Rock, TX 78664								
	PURPOSE	(a) Categor	(See Categories listed at the	top of this sche	dule)	(b)	Description				
	OF EXPENDITURE	Gift/Aw	ards/Memorials Exper	nse			ш		de of Texas. Comp		
							Frames for ph		officeholder living	expense	
							i raines ioi pi	iiott	<i>J J</i>		
_	Complete ONLY if direct	Candidate	e/Officeholder name	O:	ffice sou	laht			Office he	ld	_
	expenditure to benefit C/O		, conorodor name	O	00 000	9111			Cinice He		
											_

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Poli Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
ᆫ		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 15/26 Rpt: 18/82	2 FILER NAME Canales, Terry (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065230
╙	·		00000200
4	Date	5 Payee name	
	05/14/2023	Michaels	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$113.63	10225 Research Blvd.	
		Ste 200	
		Austin, TX 78759	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Citty (Wards) Memorials Expense	outside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Frames for gi	πς
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
F	Date	Payee name	
	05/15/2023	Morarca Event Center	
┢	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	4219 Rio Grande Care Rd	
	Ψ1,000.00	4215 Mio Stande Gale Ma	
		E.V. 1. TV 70544	
		Edinburg, TX 78541	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Continuations/Bonations water By	outside of Texas. Complete Schedule T.
		Carrandato, Cinicon Carranta Committee	TX, officeholder living expense ion for Judge Fernando Mancias
		ili-kilid dollati	of for Judge Fernando Maricias
⊢	Complete ONII V if divest	Condidate Office helder regree	Office held
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name  Office sought	Office held
L		Mancias, Fernando (Judge) District Judge District 93	District Judge District 93
	Date	Payee name	
	01/26/2023	Nation Builder	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$240.00	520 S Grand Ave., 2nd Floor	
		Los Angeles, TX 90071	
L		<u> </u>	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Tours Countains Cale dula T
	EXPENDITURE	Website	outside of Texas. Complete Schedule T. TX, officeholder living expense
		Campaign we	
		- Campagn we	
$\vdash$	Complete ONII V if direct	Candidata/Officeholder name Office cought	Office held
ĺ	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office field
$ldsymbol{f eta}$			
1			

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I 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 (Ethics Commission Filers)
	Sch: 16/26 Rpt: 19/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	01/31/2023	Nation Builder
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$498.24	520 S Grand Ave., 2nd Floor
		Los Angeles, TX 90071
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign website
		Sampaigh website
_	Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/27/2023	Nation Builder
	Amount (\$)	Payee address; City; State; Zip Code
	\$294.10	520 S Grand Ave., 2nd Floor
		Los Angeles, TX 90071
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Website for campaign
		vvebsite for campaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/27/2023	Nation Builder
	Amount (\$)	Payee address; City; State; Zip Code
	\$283.25	520 S Grand Ave., 2nd Floor
		Los Angeles, TX 90071
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Website for campaign
L	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I 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 (Ethics Commission Filers)
	Sch: 17/26 Rpt: 20/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	04/26/2023	Nation Builder
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$240.00	520 S Grand Ave., 2nd Floor
		Los Angeles, TX 90071
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Website Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Website for campaign
		website for earripaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	05/26/2023	Nation Builder
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	520 S Grand Ave., 2nd Floor
		Los Angeles, TX 90071
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Website for campaign
		Woodle to Sampaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	01/09/2023	Pharr EDC Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	207 E. Ferguson Ave.,
		Pharr, TX 78577
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Sponsorship
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
-	Total pages Cabadala E4	2 Files ID (Fibing Commission Files)	_
1	Total pages Schedule F1: Sch: 18/26 Rpt: 21/82	2 FILER NAME Canales, Terry (The Honorable) 3 Filer ID (Ethics Commission Filers) 00065230	
4	Date	5 Payee name	Т
	05/26/2023	Pixels.com	
6	Amount (\$) \$293.36	7 Payee address; City; State; Zip Code 2415 N. Geneva Terrace	
		Chicago, IL 60614	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Framed picture for gift	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/17/2023	Premont Little Leage	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$500.00	Po Box 950	
	φοσο.σσ	1 0 Box 300	
		Premont, TX 78375	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee	
		Donation	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	05/13/2023	REI Coop	
			_
	Amount (\$)		
	\$246.81	9901 N. Capital of Texas Hwy.	
		Ste 200	
		Austin, TX 78759	
	DUDDOGE	<u> </u>	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Cups for gifts	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_

## SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/26 Rpt: 22/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	01/03/2023	Ramirez Jr., Ruben
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,300.00	3226 Valle Circle
		Edinburg, TX 78539
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORE	Check if Austin, TX, officeholder living expense
		Sponsorship
_	Operation ONLY & Street	Out district Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/17/2023	Robledo, Mike
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	914 S. 15th St, Suite A
		McAllen, TX 78501
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/08/2023	Sams Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$592.38	9900 S. I-35 Frontage Rd.
	,	
		Austin, TX 78748
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Groceries to stock up for legislative session
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientale to beliefft C/OI	·

## SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 20/26 Rpt: 23/82	Canales, Terry (The Honorable)	00065230
4	Date	5 Payee name	•
	01/05/2023	Smith, Curtis	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$500.00	6600 Ranchito Dr	
l		Austin, TX 78744	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	-	Check if Austin, TX, officeholder living expense
			Supplemental Pay
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		000
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┕	·		
	Date	Payee name	
	05/06/2023	Spec's	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$350.70	5775 Airport Blvd.	
L		Austin, TX 78752	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Gifts for Legislators
			Š
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	02/16/2023	Sunoco Gas Station	
H	Amount (\$)	Payee address; City; State; Zip Code	
l	\$21.99	2900 W. Nolana	
l			
		McAllen, TX 78504	
H	PURPOSE		Description
l	OF	Travel In District	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Gas for events
L	0 1. 2		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L			

## 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 Printing Expense

Candidate/Officeholder/Political 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 (Ethics Commission Filers)
Sch: 21/26 Rpt: 24/82	Canales, Terry (The Honorable) 00065230
4 Date	5 Payee name
02/24/2023	Sunoco Gas Station
6 Amount (\$) \$20.20	7 Payee address; City; State; Zip Code 2900 W. Nolana  McAllen, TX 78504
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas for events
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/09/2023	Sunoco Gas Station
Amount (\$) \$29.99	Payee address; City; State; Zip Code 2900 W. Nolana
	McAllen, TX 78504
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas for meetings
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/22/2023	Sunoco Gas Station
Amount (\$) \$23.00	Payee address; City; State; Zip Code 2900 W. Nolana
	McAllen, TX 78504
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas for travel
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 22/26 Rpt: 25/82	Canales, Terry (The Honorable)	00065230
4	Date	5 Payee name	•
	05/22/2023	Sunoco Gas Station	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$47.40	2900 W. Nolana	
		McAllen, TX 78504	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Fuel for meetings
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/Ol		Office field
H	D-4-	_	
	Date	Payee name	
	05/15/2023	Target	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$95.25	5621 N IH 35	
		Austin, TX 78723	
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description
	EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Gift bags for committee gifts
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	4	
	Date	Payee name	
	03/19/2023	Texas House of Representatives - Member Accou	nt
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	P.O. Box 2910	
		Austin, TX 78769	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE		Check if Austin, TX, officeholder living expense
			Coffee for Committee Hearings
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office Held
_			

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 23/26 Rpt: 26/82	Canales, Terry (The Honorable)	00065230
4	Date	Payee name	'
	05/30/2023	The Monitor	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$9.99	P.O. Box 3267	
		McAllen, TX 78502	
8	PURPOSE	<u> </u>	Description
ľ	OF	Category (See Categories listed at the top of this schedule)  Newspaper subscription	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
l		S	Subscription to local paper
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI		
	Date	Payee name	
l	05/12/2023	The Monogram Lady	
Г	Amount (\$)	Payee address; City; State; Zip Code	
l	\$411.35	3818 Far West Blvd.	
l			
l		Austin, TX 78731	
┢	PURPOSE	Category (See Categories listed at the top of this schedule) (b) D	Description
l	OF EVENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
l		C	Cups and monogramming for gifts.
┡			
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┕			
l	Date	Payee name	
L	05/18/2023	Twin Liquors	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$79.83	1600 Lavaca St.	
l			
		Austin, TX 78701	
Г	PURPOSE	Category (See Categories listed at the top of this schedule) (b) D	Description
l	OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
l		L	Check if Austin, TX, officeholder living expense  Sift for staff
l			ont for stair
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Candidate/Officeriolider frame Office Sought	Office field

## 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 24/26 Rpt: 27/82	Canales, Terry (The Honorable)	00065230
4	Date	5 Payee name	
L	01/09/2023	USPS	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$132.21	410 S. Jackson Rd	
		Ediahum TV 70500	
Ļ		Edinburg, TX 78539	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Mailing  (b) Description  Check if trav	rel outside of Texas. Complete Schedule T.
	EXPENDITURE	I I I	stin, TX, officeholder living expense
		Mailing to c	onstituents
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	·		
	Date 02/02/2023	Payee name USPS	
L			
	Amount (\$) \$550.14	Payee address; City; State; Zip Code 410 S. Jackson Rd	
	Ψ330.14	410 J. Jackson Nu	
		Edinburg, TX 78539	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		rel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Aus	tin, TX, officeholder living expense
		Constiuent	mailing
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	
F	Date	Payee name	
	05/30/2023	USPS	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,117.29	410 S. Jackson Rd	
		Edinburg, TX 78539	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 ostage for mailing	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
		Postage for	
			-
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/O	1	

## 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		ssion Filers)
	Sch: 25/26 Rpt: 28/82		
4	Date	5 Payee name	
_	05/25/2023	Valero	
6	Amount (\$) \$20.00	7 Payee address; City; State; Zip Code	
	\$20.00	802 W. University Drive	
		Edinburg, TX 78539	
8	PURPOSE	-	
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Travel for meetings	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
F	Date	Payee name	
	05/22/2023	Walgreens	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	Freddy Gonzalez Drive	
		Edinburg, TX 78539	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Office supplies	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	experialiture to benefit C/O	л -	
	Date	Payee name	
	02/05/2023	Wendlant, Bill	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15,000.00	40 N. Interstate 35 Hwy #Pa1	
		Austin, TX 78701	
	PURPOSE	- Inc.	
	OF	(a) Category (See Categories listed at the top of this schedule)  Rent in Austin for legislative session  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	X Check if Austin, TX, officeholder living expense	
		Rent in Austin for legislative session	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/O	<b>U</b>	
l			

### 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 Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		
1	Total pages Schedule F1:	
	Sch: 26/26 Rpt: 29/82	Canales, Terry (The Honorable) 00065230
4	Date	5 Payee name
	03/27/2023	Wendlant, Bill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,000.00	40 N. Interstate 35 Hwy #Pa1
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Rent in Austin for legislative session
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Rent in Austin for legislative session
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/02/2023	Wendlant, Bill
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	40 N. Interstate 35 Hwy #Pa1
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Rent for legislative session in Austin  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		Rent for legislative session in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/18/2023	Worley Printing Co. Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,925.39	3217 North IH 35
		Austin, TX 78722
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Printing Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Graduation certificates printing for constiuents
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiantic to benefit GOH		

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/44 Rpt: 30/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 05/11/2023 **American Airlines** Amount (\$) Payee address; State; Zip Code City; \$787.80 P.O. Box 619616 Dallas, TX 75261 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Travel for meeting from Austin to DFW 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/06/2023 **American Airlines** Amount (\$) Payee address; City; State; Zip Code \$757.49 P.O. Box 619616 Dallas, TX 75261 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Transportation from Austin to Dallas for Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/44 Rpt: 31/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 04/17/2023 **American Airlines** Amount (\$) Payee address; State; Zip Code City; \$18.17 P.O. Box 619616 Dallas, TX 75261 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Interest Charge 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/12/2023 American Express Amount (\$) Payee address; City; State; Zip Code \$35.00 PO Box 650448 Dallas, TX 75265-0448 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Late Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/44 Rpt: 32/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 02/15/2023 American Express Amount (\$) Payee address; State; Zip Code City; \$16.40 PO Box 650448 Dallas, TX 75265-0448 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit Card Interest 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/18/2023 American Express Amount (\$) Payee address; City; State; Zip Code \$100.91 PO Box 650448 Dallas, TX 75265-0448 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Interest Charge Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/44 Rpt: 33/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/12/2023 American Express Amount (\$) Payee address; State; Zip Code City; \$39.00 PO Box 650448 Dallas, TX 75265-0448 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit Card Fee 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/24/2023 Apple.com/bill Payee address: Amount (\$) City; State; Zip Code \$21.64 One Apple Park Way Cupertino, CA 95014 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Subscription **EXPENDITURE** Check if Austin, TX, officeholder living expense Subscription for officeholder related software Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/44 Rpt: 34/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/10/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$277.80 4309 Emma Browning Ave Austin, TX 78717 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/23/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$177.80 4309 Emma Browning Ave Austin, TX 78717 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/44 Rpt: 35/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/25/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$180.80 4309 Emma Browning Ave Austin, TX 78717 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/06/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$166.42 4309 Emma Browning Ave Austin, TX 78717 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/44 Rpt: 36/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/01/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$186.80 4309 Emma Browning Ave Austin, TX 78717 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/13/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$189.80 4309 Emma Browning Ave Austin, TX 78717 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/44 Rpt: 37/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/15/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$189.80 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/19/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$189.80 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 9/44 Rpt: 38/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 03/22/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$187.00 4309 Emma Browning Ave Austin, TX 78717 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/26/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$187.00 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for Plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/44 Rpt: 39/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/29/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$225.98 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/03/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$184.40 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/44 Rpt: 40/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 04/06/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$200.20 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/10/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$185.20 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 12/44 Rpt: 41/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 04/14/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$149.52 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/20/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$184.40 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 13/44 Rpt: 42/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 04/23/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$184.40 4309 Emma Browning Ave Austin, TX 78717 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/28/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$142.75 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 14/44 Rpt: 43/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/28/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$142.75 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/30/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$187.00 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 15/44 Rpt: 44/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 05/05/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$143.65 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/05/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$217.96 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 16/44 Rpt: 45/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 05/08/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$188.20 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/15/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$188.20 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/44 Rpt: 46/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 05/18/2023 Atlantic Austin Amount (\$) Payee address; City; State; Zip Code \$188.20 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/23/2023 Atlantic Austin Payee address: Amount (\$) City; State; Zip Code \$188.20 4309 Emma Browning Ave Austin, TX 78717 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/44 Rpt: 47/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/25/2023 Atlantic Corpus Christi Amount (\$) Payee address; State; Zip Code \$50.00 549 Pinson Drive Corpus Christi, TX 78406 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane for officeholder function 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/11/2023 Atlantic Knife Amount (\$) Payee address; City; State; Zip Code \$275.79 143 Wise Mtn Rd. North West Coeburn, VA 24230 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift for State Legislator Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 19/44 Rpt: 48/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/06/2023 Bangers Sausage House Amount (\$) Payee address; City; State; Zip Code \$34.63 79 Rainey St Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/06/2023 Cantina Amount (\$) Payee address; City; State; Zip Code \$46.14 70 Rainey St. Suite 100 Austin, TX 78701 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food expenses for officeholder meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 20/44 Rpt: 49/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/01/2023 Capitol Grill Amount (\$) Payee address; State; Zip Code City; \$22.91 1400 Congress Ave. Austin, TX 78701 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal for Staff 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/16/2023 Capitol Grill Payee address: Amount (\$) City; State; Zip Code \$18.10 1400 Congress Ave. Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for staff Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 21/44 Rpt: 50/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/29/2023 Capitol Grill Amount (\$) Payee address; State; Zip Code City; \$21.16 1400 Congress Ave. Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and Drinks for Meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/21/2023 Capitol Grill Payee address: Amount (\$) City; State; Zip Code \$4.52 1400 Congress Ave. Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Drinks for officeholder meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 22/44 Rpt: 51/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/24/2023 Capitol Grill Amount (\$) Payee address; State; Zip Code City; \$14.63 1400 Congress Ave. Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food/beverage for officeholder meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Chevron 02/22/2023 Payee address: Amount (\$) City; State; Zip Code \$64.58 30 N Interstate Hwy 35 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food & Beverages for officeholder meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 23/44 Rpt: 52/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/23/2023 Chevron Amount (\$) Payee address; City; State; Zip Code \$48.02 30 N Interstate Hwy 35 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Snacks and drinks for officeholder meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/24/2023 **DSAN** Payee address: Amount (\$) City; State; Zip Code \$218.66 243 Mineola Avenue STE 2K Roslyn Heights, NY 11501 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Timer For Transportation Committee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 24/44 Rpt: 53/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 03/26/2023 Fed Ex Office Amount (\$) Payee address; City; State; Zip Code \$65.04 327 Congress Avenue Suite 100 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Officeholder expenses to make foam-mounted displays for meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/09/2023 Flying Saucer Payee address; Amount (\$) City; State; Zip Code \$45.04 2300 International Parkway DFW Airport, TX 75261 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal at Airport Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 25/44 Rpt: 54/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date 5 Payee name 03/04/2023 IT Caucus Amount (\$) Payee address; City; State; Zip Code \$250.00 1108 Lavaca Street, STE 110-701 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. IT Caucus Dues **EXPENDITURE** Check if Austin, TX, officeholder living expense Biannual Caucus Dues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/16/2023 Legislative Study Group Amount (\$) Payee address; City; State; Zip Code \$1,000.00 1106 Lavaca St. Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Caucus Dues **EXPENDITURE** Check if Austin, TX, officeholder living expense Biannual LSG Caucus Dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 26/44 Rpt: 55/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 05/19/2023 McCreery Aviation Amount (\$) Payee address; State; Zip Code \$265.86 2400 S. 10th Street McAllen, TX 78505 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/28/2023 Million Air Austin Amount (\$) Payee address; City; State; Zip Code \$206.80 4801 Emma Browning Ave Austin, TX 78719 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 27/44 Rpt: 56/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/08/2023 **NBC4** Newstand Amount (\$) Payee address; City; State; Zip Code \$121.27 2401 Ronald Reagan Washington National Airport Access Arlington, VA 22202 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF X Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and Beverages for officeholder travel 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/06/2023 P Terrys Burger Stand Amount (\$) Payee address; City; State; Zip Code \$16.86 404 S. Lamar Blvd Austin, TX 78704 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for Officeholder meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 28/44 Rpt: 57/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 04/16/2023 Premier Car Service Amount (\$) Payee address; State; Zip Code City; \$172.50 1 Flintstone Ct San Antonio, TX 78213 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Car Service for travel from San Antonio to Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Royal Blue Grocery Rainey 04/16/2023 Amount (\$) Payee address; City; State; Zip Code \$51.52 51 Rainey St. **STE 90** Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 29/44 Rpt: 58/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 04/07/2023 Sidebar Amount (\$) Payee address; State; Zip Code City; \$496.12 215 East University Drive Edinburg, TX 78539 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense meeting to discuss campaign/officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/09/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$297.92 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for Plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 30/44 Rpt: 59/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/12/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$210.37 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for Plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/23/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$198.57 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 31/44 Rpt: 60/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 02/03/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$213.04 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/06/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$224.90 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 32/44 Rpt: 61/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 02/28/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$249.00 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/15/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$226.24 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 33/44 Rpt: 62/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 03/15/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$236.61 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/22/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$234.20 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 34/44 Rpt: 63/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 03/22/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$233.02 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/26/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$151.66 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 35/44 Rpt: 64/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 04/03/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$221.68 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/03/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$224.74 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for Plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 36/44 Rpt: 65/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 04/10/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$293.33 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/14/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$207.14 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 37/44 Rpt: 66/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 04/14/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$226.05 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/20/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$235.11 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 38/44 Rpt: 67/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 04/25/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$321.31 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/30/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$143.86 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 39/44 Rpt: 68/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 05/04/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$231.07 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/10/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$271.88 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 40/44 Rpt: 69/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 05/15/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$343.02 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/22/2023 South Texas International Airport At Edinburg Amount (\$) Payee address; City; State; Zip Code \$215.88 1300 E Farm to Market Rd 490 Edinburg, TX 78542 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 41/44 Rpt: 70/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 02/08/2023 Stan's Restaurant Amount (\$) Payee address; State; Zip Code \$48.25 1029 Vermont Ave NW Washington DC, DC 20005 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF X Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Officeholder expense while traveling 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Texas Caucus on Climate Environment and Energy 02/02/2023 Amount (\$) Payee address; City; State; Zip Code \$200.00 1100 South Congress Room E1.212 Austin, TX 78701 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Caucus Dues **EXPENDITURE** Check if Austin, TX, officeholder living expense Biannual caucus dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 42/44 Rpt: 71/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 02/16/2023 Texas House Womens Health Caucus Amount (\$) Payee address; City; State; Zip Code \$500.00 1100 Congress Avenue Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Caucus dues **EXPENDITURE** Check if Austin, TX, officeholder living expense Biannual caucus dues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/10/2023 The Madison Hotel Amount (\$) Payee address; City; State; Zip Code \$290.36 1177 15th Street North West Washington DC, TX 20005 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description X Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging For the State of Union and meetings with Congressman Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 43/44 Rpt: 72/82 Canales, Terry (The Honorable) 00065230 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/27/2023 **Tipsy Alchemist** Amount (\$) Payee address; State; Zip Code City; \$45.02 70 Rainey St. Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting Drink Expenses 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/03/2023 **United Airlines** Amount (\$) Payee address; City; State; Zip Code \$2,637.20 233 South Sacker Dr. Chicago, IL 60606 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description X Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Travel to Washington DC for officeholder meetings Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 44/44 Rpt: 73/82 Canales, Terry (The Honorable) 00065230 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 05/04/2023 West Houston Airport Amount (\$) Payee address; State; Zip Code \$231.07 18000 Groschke Rd 77084 Houston, TX 77084 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for plane 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Expense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NA	AME			3 Filer ID (Ethics Commission Filers)
L	Sch: 1/7 Rpt: 74/82	Canales	, Terry (The Honorable)			00065230
4	Date	5 Payee na	me			
	01/16/2023	Wiley, Je	erry			
6	Amount (\$)	<b>7</b> Payee ad	dress; City; State	; Zip Co	ode	
	\$1,018.13	2614 Su	nset Blvd			
	X Reimbursement from political contributions intended	Mission,	TX 78574			
8	PURPOSE	(a) Category	(See Categories listed at the top of this scl	nedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Ir	District		L	Check if Austin, TX, officeholder living expense
					Pilot Expense for	flights to Austin for legislative session
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Off	ficeholder name		Office sought	Office held
	Date	Payee na	me			
	01/16/2023	Wiley, Je	erry			
	Amount (\$)	Payee ad	dress; City; State	; Zip Co	ode	
	\$540.00	2614 Su	nset Blvd			
	X Reimbursement from political contributions intended	Mission,	TX 78574			
	PURPOSE OF	Category	(See Categories listed at the top of this sci	nedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Ir	District		L	Check if Austin, TX, officeholder living expense
					Pilot Expense for	flights to Austin for legislative session
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Off	ficeholder name		Office sought	Office held
	Date	Payee na	me			
	01/26/2023	Wiley, Je	erry			
	Amount (\$)	Payee ad	dress; City; State	; Zip Co	ode	
	\$1,000.00	2614 Su	nset Blvd			
	Reimbursement from political contributions intended	Mission,	TX 78574			
	PURPOSE	Category	(See Categories listed at the top of this scl	nedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Ir	District			Check if Austin, TX, officeholder living expense
					Pilot Expense for	flights to Austin for legislative session
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Off	ficeholder name		Office sought	Office held

# SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Expense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER	NAME			3 Filer ID (Ethics Commission Filers)
L	Sch: 2/7 Rpt: 75/82	Canale	es, Terry (The Honorable)			00065230
4	Date	5 Payee	name			
	02/09/2023	Wiley,	Jerry			
6	Amount (\$)	7 Payee	address; City; State	e; Zip Co	ode	
	\$520.00	2614 9	Sunset Blvd			
	Reimbursement from political contributions intended	Missio	n, TX 78574			
8	PURPOSE OF	(a) Catego	ry (See Categories listed at the top of this so	hedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel	In District		L	Check if Austin, TX, officeholder living expense
					Pilot Expense for	flights to Austin for legislative session
9	Complete ONLY if direct expenditure to benefit C/OH	 Candidate/0	Officeholder name		Office sought	Office held
	Date	Payee	name			
	02/27/2023	Wiley,	Jerry			
	Amount (\$)	Payee	address; City; State	e; Zip Co	ode	
	\$520.00	2614 9	Sunset Blvd			
	Reimbursement from political contributions intended	Missio	n, TX 78574			
	PURPOSE OF	Catego	ry (See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel	In District		L	Check if Austin, TX, officeholder living expense
					Pilot Expense for	flights to Austin for legislative session
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/0	Officeholder name		Office sought	Office held
	Date	Payee	name			
	02/27/2023	Wiley,				
	Amount (\$)	Payee	address; City; State	e; Zip Co	ode	
	\$434.45	2614 9	Sunset Blvd			
	Reimbursement from political contributions intended	Missio	n, TX 78574			
	PURPOSE	Catego	ry (See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel	In District		[	Check if Austin, TX, officeholder living expense
					Pilot Expense for	flights to Austin for legislative session
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/0	Officeholder name		Office sought	Office held

# SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Expense Wages/Contract Labor	Travel in District Travel Out of Dis OTHER (enter a			
1	Total pages Schedule G:	2 FILER NAM	ME I			3 Filer ID (E	thics Commission Filers)	
_	Sch: 3/7 Rpt: 76/82	l	erry (The Honorable)			00065230		
4	Date	5 Payee name	<del></del>					
	03/23/2023	Wiley, Jerr	у				<u></u>	
6	Amount (\$)	7 Payee addr	ess; City; State	; Zip Co	ode			
	\$1,000.00	2614 Suns	et Blvd					
	Reimbursement from political contributions intended	Mission, T	X 78574					
8	PURPOSE	(a) Category (	See Categories listed at the top of this sch	nedule)	(b) Description	<b>≟</b>	de of Texas. Complete Schedule T.	
	OF EXPENDITURE	Travel In D	District		L	_	officeholder living expense	
					Pilot Expense for	flights to Austi	n for legislative session	
9	Complete ONLY if direct expenditure to benefit C/OH	 Candidate/Office	eholder name		Office sought	С	Office held	
	Date	Payee name	9					
	03/16/2023	Wiley, Jerr	у					
	Amount (\$)	Payee addr	ode					
\$1,000.00 2614 Sunset Blvd								
	X Reimbursement from political contributions intended	Mission, T	X 78574					
	PURPOSE	Category (	See Categories listed at the top of this sch	nedule)	Description	Ⅎ	de of Texas. Complete Schedule T.	
	OF EXPENDITURE	Travel In D	District				if Austin, TX, officeholder living expense	
					Pilot Expense for	flights to Austi	n for legislative session	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	C	Office held	
	Date	Payee name			<del></del>			
	03/30/2023	Wiley, Jerr	у					
	Amount (\$)	Payee addr	ess; City; State	; Zip Co	ode			
	\$1,000.00	2614 Suns	set Blvd					
	Reimbursement from political contributions intended	Mission, T	X 78574					
	PURPOSE	Category (	See Categories listed at the top of this sch	nedule)	Description	<u> </u>	de of Texas. Complete Schedule T.	
	OF EXPENDITURE	Travel In D	District			_	officeholder living expense	
					Pilot Expense for	tlights to Austi	n for legislative session	
	Complete ONLY if direct expenditure to benefit C/OH	L Candidate/Office	eholder name		Office sought	C	Office held	

# SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift nittee Leg	d/Beverage Expense /Awards/Memorials Expe al Services e Instruction Guide			pense /ages/Contract Labor		Travel in District Travel Out of District OTHER (enter a catego	ory not listed above)
1	Total pages Schedule G:	I	ILER NAME					3	Filer ID (Ethics	Commission Filers)
	Sch: 4/7 Rpt: 77/82	C	Canales, Terry	(The Honorable	<del>!</del> )				00065230	
4	Date	<b>5</b> P	ayee name							
	03/30/2023	۷	Viley, Jerry							
6	Amount (\$)		ayee address;	City;	State;	Zip Co	de			
	\$295.00	2	2614 Sunset E	Blvd						
	Reimbursement from political contributions intended	N	Mission, TX 78	3574						
8	PURPOSE OF	(a) C	Category (See C	ategories listed at the to	o of this sche	dule)	(b) Description	=		exas. Complete Schedule T.
	EXPENDITURE	Т	ravel In Distri	ct			L	_	neck if Austin, TX, officeh	
							riiot Expense fo	r flig	ints to Austin for	legislative session
9	Complete ONLY if direct expenditure to benefit C/OH	<b>C</b> andi	idate/Officehold	der name			Office sought		Office	held
		<u> </u>								
	Date	I	Payee name							
	04/24/2023		Viley, Jerry	0.11	<u> </u>	7: -	-1-			
	Amount (\$)		Payee address;	City;	State;	Zip Co	ae			
	\$500.00		2614 Sunset E	oivu						
	Reimbursement from political contributions intended	N	Mission, TX 78	3574						
	PURPOSE OF			ategories listed at the to	o of this sche	dule)	Description	=		exas. Complete Schedule T.
	EXPENDITURE	T	ravel In Distri	ct			Dilot Evpopos fo	_	neck if Austin, TX, officeh	
							•	ı ilig	jins to Austin for	legislative session
	Complete ONLY if direct expenditure to benefit C/OH	Candi	idate/Officeholo	der name			Office sought		Office	held
	Date	Р	Payee name							
	04/15/2023	ı	Viley, Jerry							
	Amount (\$)	Р	ayee address;	City;	State;	Zip Co	de			
	\$1,000.00	2	2614 Sunset E	Blvd						
	Reimbursement from political contributions intended	N	Mission, TX 78	3574						
	PURPOSE	С	Category (See C	ategories listed at the to	o of this sche	dule)	Description	_		exas. Complete Schedule T.
	OF EXPENDITURE	Т	ravel In Distri	ct			[	_	neck if Austin, TX, officeh	
							Pilot Expense fo	r flig 	nts to Austin for	legislative session
	Complete ONLY if direct expenditure to benefit C/OH	Candi	idate/Officeholo	der name			Office sought		Office	held

# SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Greuit Caru Fayillelit		The Instruction Guide explains	how to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAME					Filer ID (Ethics Commission Filers)			
	Sch: 5/7 Rpt: 78/82	Canales, T	erry (The Honorable)			00065230				
4	Date	5 Payee name								
	04/10/2023	Wiley, Jerry								
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode					
	\$1,050.00	2614 Suns	et Blvd							
	Reimbursement from									
	X political contributions intended	Mission, TX			T					
8	PURPOSE OF	1	ee Categories listed at the top of this sch	edule)	(b) Description	=	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense			
	EXPENDITURE	Travel In D	istrict		L Dilet Evpense for					
					Filot Expense for	my	hts to Austin for legislative session			
9	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit	Sandidate/Onice	noidel flame		Office Sought		Office field			
	C/OH									
	Date	Payee name								
	05/23/2023	Wiley, Jerry	/							
	Amount (\$)	Payee addre	Payee address; City; State; Zip Code							
\$1,000.00 2614 Sunset Blvd										
	Reimbursement from									
	X political contributions intended	Mission, TX	( 78574							
	PURPOSE	Category (S	ee Categories listed at the top of this sch	edule)	Description	_	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Travel In D	Travel In District				Check if Austin, TX, officeholder living expense			
					Pilot Expense for	flig	hts to Austin for legislative session			
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held			
	C/OH									
	Date	Payee name								
	05/16/2023	Wiley, Jerry								
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode					
	\$500.00	2614 Suns	et Blvd							
	Reimbursement from									
	X political contributions intended	Mission, TX	〈 78574							
	PURPOSE	Category (S	ee Categories listed at the top of this sch	edule)	Description	_	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Travel In D	istrict			_	eck if Austin, TX, officeholder living expense			
					Pilot Expense for	flig	hts to Austin for legislative session			
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held			
	Complete ONLY if direct expenditure to benefit C/OH	Canuldate/Office	noidei naine		Onice Sought		Onice Helu			
_	CIOII									

# SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Expense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER	NAME			3 Filer ID (Ethics Commission Filers)
L	Sch: 6/7 Rpt: 79/82	Canale	es, Terry (The Honorable)			00065230
4	Date	<b>5</b> Payee	name			
	05/12/2023	Wiley,	Jerry			
6	Amount (\$)	7 Payee	address; City; State	; Zip Co	ode	
	\$500.00	2614 9	Sunset Blvd			
	Reimbursement from political contributions intended	Missio	n, TX 78574			
8	PURPOSE OF	(a) Catego	ry (See Categories listed at the top of this so	hedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel	In District		L	Check if Austin, TX, officeholder living expense
					Pilot Expense for	flights to Austin for legislative session
9	Complete ONLY if direct expenditure to benefit	Candidate/0	Officeholder name		Office sought	Office held
	C/OH					
	Date	Payee	name			
	05/09/2023	Wiley,	Jerry			
	Amount (\$)	Payee	address; City; State	; Zip Co	ode	
	\$605.00	2614 9	Sunset Blvd			
	Reimbursement from political contributions intended	Missio	n, TX 78574			
	PURPOSE	Catego	ry (See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel	In District			Check if Austin, TX, officeholder living expense
	_,, _, _, _, _				Pilot Expense for	flights to Austin for legislative session
	Complete ONLY if direct expenditure to benefit	Candidate/	Officeholder name		Office sought	Office held
	C/OH					
	Date	Payee	name			
	05/01/2023	wiley,	Jerry			
	Amount (\$)	Payee	address; City; State	e; Zip Co	ode	
	\$500.00	2614 9	Sunset Blvd			
	Reimbursement from political contributions intended	Missio	n, TX 78574			
	PURPOSE	Catego	ry (See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel	In District			Check if Austin, TX, officeholder living expense
					Pilot Expense for	flights to Austin for legislative session
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/0	Officeholder name		Office sought	Office held

### SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services  The Instruction Guide explains h	Office Ov Polling Ex Printing E Salaries/	Expense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 7/7 Rpt: 80/82		Canales, Terry (The Honorable)				00065230
4	Date	5	Payee name				
	05/01/2023		Wiley, Jerry				
6	Amount (\$) \$500.00	7	Payee address; City; State; 2614 Sunset Blvd	Zip Co	ode		
	Reimbursement from political contributions intended		Mission, TX 78574		_		
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description	=	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Travel In District		L	_	neck if Austin, TX, officeholder living expense
					Pilot Expense for	IΙΙŲ	hts to Austin for legislative session
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	04/27/2023		Wiley, Jerry				
	Amount (\$)		Payee address; City; State;	Zip Co	ode		
	\$500.00		2614 Sunset Blvd				
	Reimbursement from political contributions intended		Mission, TX 78574				
	PURPOSE OF		Category (See Categories listed at the top of this sche	dule)	Description	⊒ .	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Travel In District		Pilot Expense for	_	neck if Austin, TX, officeholder living expense ghts to Austin for legislative session
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

CH			

The Insti	ruction (	Guide explains	this form.	1 Total pages Schedule T: Sch: 1/2 Rpt: 81/82						
2 FILER NAME					3 Filer ID (Ethics Commission Filers)					
Canales, Terry (					00065230					
4 Name of Contribut NBC4 Newstand	Name of Contributor / Corporation or Labor Organization / Pledgor /Payee     NRC4 Newstand									
5 Contribution / Expe		oorted on:								
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1					
Schedule F2	브	Schedule F4	Schedule G	Schedule H	Schedule COH-UC					
6 Dates of Travel	7 Name	of person(s) traveli	ina							
		es, Terry	9							
	8 Depart	ure city or name of	departure location							
02/07/2023	McAlle	en								
	9 Destina	ation city or name o	of destination location							
02/08/2023	Washi	ington DC								
10 Means of transport		· ·	ivel (including name of c		other event)					
Commercial Airp	olane ————	Trip to Wash	nington DC for meetin	gs 						
		ation or Labor Orga	anization / Pledgor /Paye	ee						
Stan's Restaura		ported on:								
Contribution / Expe		Schedule B	Schodulo P(1)	Schodulo C2	Schedule D Schedule F1					
Schedule F2	브	Schedule F4	Schedule B(J)  Schedule G	Schedule C2 Schedule H	Schedule COH-UC					
				Schedule H	Scriedule CON-OC					
Dates of Travel		of person(s) traveli	ng							
		es, Terry	f donortura location							
02/07/2023	McAlle		f departure location							
02/01/2020			of destination location							
02/08/2023		ington DC								
Means of transpor	l		vel (including name of c	onference, seminar, or	other event)					
Commercial Airp	olane	Trip to Wash	nington DC for meetin	gs						
Name of Contribut	or / Corpor	ation or Labor Orga	anization / Pledgor /Paye	ee						
The Madison Ho	tel									
Contribution / Expe	enditure rep	oorted on:								
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1					
Schedule F2	X	Schedule F4	Schedule G	Schedule H	Schedule COH-UC					
Dates of Travel	Name	of person(s) traveli	ng							
	Canal	es, Terry								
			departure location							
02/07/2023	McAlle	en								
00/00/2222			of destination location							
02/08/2023	l	ington DC								
Means of transport		· ·	ivel (including name of c		other event)					
Commercial Airp	лапе	The to wash	nington DC for meetin	yə ————————————————————————————————————						

				OF TEXAS	CAL EXPENDI	TURES	SCHEDULE T			
4	Name of Contribut United Airlines	or / Corpora	ation or Labor Or	ganization / Pledgor /Pag	yee					
5	Contribution / Expe		oorted on: Schedule B Schedule F4	Schedule B(J) Schedule G	Schedule C2 Schedule H	Schedule D Schedule COH-UC	Schedule F1			
6	Dates of Travel 7 Name of person(s) traveling Canales, Terry									
	02/07/2023	Mcalle	en, Texas	of departure location e of destination location						
10	02/08/2023 Means of transport	Washi	ngton, DC		conference, seminar, or o	ther event)				
	Commercial Airp	olane	Trip to Was	shington DC for meeti	ngs					