#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015992 3 COMMITTEE NAME **OFFICE USE ONLY** Deputy Sheriff's Association of Bexar County Political Action Committee Date Received **ELECTRONICALLY FILED** 01/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 9200 Broadway, Ste. 106 Change of Address San Antonio, TX 78217 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Devin D. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Tutor CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 9200 Broadway, Ste. 106 STREET **ADDRESS** (Residence or Business) San Antonio, TX 78217 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1539 Sandalwood Lane MAILING **ADDRESS** Change of Address San Antonio, TX 78209 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (210) 223-2213 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2023 12/25/2023

**GO TO PAGE 2** 

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12	COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
	Deputy Sheriff's Associa	tion of Bexar County F	Political Action Committee	00015992			
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
- 1	Attach lists on plain paper to complete this eport if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Commissioner Justin Rodrigue: (Precinct 2)	z Bexar Cou	inty Commissioner		
	CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00		
		2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,510.00		
	EXPENDITURE FOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00		
		4. TOTAL POLITICA	L EXPENDITURES	\$	5,063.82		
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	22,282.86		
	OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00		
16	AFFIDAVIT			· ·			
			I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.				
			Mr. Devii	n D. Tutor			
	Signature of Campaign Treasurer						
	AFFIX NOTARY	STAMP / SEAL ABOVE					
	Sworn to and subscribed	before me, by the said	, th	is the	day		
	of	, 20, to certify v	which, witness my hand and seal of office.				
	Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title of office	cer administering oath		

# **SUBTOTALS - MPAC**

# FORM MPAC **COVER SHEET PG 3**

3 07 11									
		EE NAME	(Ethics Commission Filers)						
Бер	Deputy Sheriff's Association of Bexar County Political Action Committee 00015992								
		E SUBTOTALS SCHEDULE	SUBTOTAL AMOUNT						
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 8,510.00					
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	)R	\$					
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$					
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$					
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$					
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$					
9.		SCHEDULE E: LOANS		\$					
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 5,063.82					
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

	MONET	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/11	
2	FILER NAME Deputy Sher	riff's Association of Bexar County Political Action Co	ommittee	3 Filer ID (Ethics Commission Filers) 00015992
4	Date 11/30/2023	<ul> <li>Full name of contributor</li></ul>	7 Amount of Contribution (\$) \$8,210.0	
		San Antonio, TX 78217		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: Tooke, Ronald  Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$300.0
	Principal occu	San Antono, TX 78217  upation / Job title (See Instructions)	Employer (See Instruction: Deputy Sheriffs Associa	s) ation of Bexar County (DSABC)

### 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

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

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

ent Solicitation/Fundraising Expense
se Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

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: 1/7 Rpt: 5/11	Deputy Sheriff's Association of Bexar County Political Action 00015992					
4 Date	5 Payee name					
12/10/2023	Circle K					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$64.68	8102 Callaghan Rd					
Expenditure from						
corporate funds	San Antonio, TX 78230					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.					
-	Expense Check if Austin, TX, officeholder living expense  Fuel					
	ruei					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·					
5.						
Date	Payee name					
12/20/2023	Circle K					
Amount (\$)	Payee address; City; State; Zip Code					
\$58.66	8102 Callaghan Rd					
Expenditure from						
corporate funds	San Antonio, TX 78230					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Transportation Equipment & Related					
EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense					
	Fuel					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI						
Date	Payee name					
12/01/2023	Costco					
Amount (\$)	Payee address; City; State; Zip Code					
\$30.29	5611 UTSA Boulevard					
Expenditure from						
corporate funds	San Antonio, TX 78249					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Transportation Equipment & Related					
EXI ENDITORE	Expense					
	Fuel					
Complete Chill V if all a	Condidate/Officeholder name					
Complete <u>ONLY</u> 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 Candidate/Officeholder/Political Committee

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
Sch: 2/7 Rpt: 6/11	Deputy Sheriff's Association of Bexar County P	
4 Date	5 Payee name	
12/20/2023	Garibaldi's Mexican	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$50.73	6938 W. Military	
Expenditure from corporate funds	San Antonio, TX 78227	
8 PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(b) Description
EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		PAC Meeting
		·
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		
Date	Payee name	
11/28/2023	Hobby Lobby	
	* *	do.
Amount (\$) \$22.70	Payee address; City; State; Zip Co 286 W Bitters Rd	ue
\$22.70	280 W Billers Ru	
Expenditure from corporate funds	San Antonio, TX 78216	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Supply	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		PAC Office Supply/Items
Complete ONLY if direct	Candidate/Officeholder name Office sour	ght Office held
expenditure to benefit C/OI	•	gnt Office field
Date	Payee name	
11/30/2023	Hobby Lobby	
Amount (\$)	Payee address; City; State; Zip Co	de
\$35.16	286 W Bitters Rd	
Expenditure from corporate funds	San Antonio, TX 78216	
PURPOSE		(b) Description
OF	Office Supply	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		PAC Office Supply/Items
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	<b>-</b>	

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/7 Rpt: 7/11	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
12/11/2023	Justin Rodriguez Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	P.O. Box 100153
Expenditure from corporate funds	San Antonio, TX 78201
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
	Campaigh Continuution (Frecinct 2)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxportantaro to sorione or o	
Date	Payee name
12/12/2023	Krispy Kreme
Amount (\$)	Payee address; City; State; Zip Code
\$16.49	12328 I-10 West
Expenditure from corporate funds	San Antonio, TX 78230
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.
E/11 E1191. C.1.	Check if Austin, TX, officeholder living expense
	PAC Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Experience to benefit 5/5/	<u> </u>
Date	Payee name
11/30/2023	La Panaderia
Amount (\$)	Payee address; City; State; Zip Code
\$27.55	8305 Broadway St
	, and the second
Expenditure from corporate funds	San Antonio, TX 78209
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	PAC Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

# SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By 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 Fil	ers)
	Sch: 4/7 Rpt: 8/11	Deputy Sheriff's Association of Bexar County Political Action 00015992	
4	Date	5 Payee name	
	12/19/2023	La Panaderia	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$86.02	8305 Broadway St	
	,		
	Expenditure from corporate funds	San Antonio, TX 78209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		PAC Meeting	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/13/2023	Las Palapas	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$47.40	8005 Callaghan Rd	
	Ψο	- cooc canagnan na	
	Expenditure from corporate funds	San Antonio, TX 78230	
	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.	
		Check if Austin, TX, officeholder living expense	
		PAC Meeting	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	11/28/2023	Luby's 0004	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.03	4541 Fredericksburg Rd	
	φου.σο	10 12 1 Todolio. lossal g Tid	
	Expenditure from corporate funds	San Antonio, TX 78201	
	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.	
		Check if Austin, TX, officeholder living expense	
		PAC Meeting	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	H .	

#### 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/Political Committee Credit Card Payment		ttee L	-ood/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	Expense		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 FILE		LER NAME						3	Filer ID	(Ethics Commission Filers)	
	Sch: 5/7 Rpt: 9/11	De	eputy Sher	iff's Associatio	n of Bexar C	County F	Politi	cal Action		00015992	
4	Date	<b>5</b> Pa	yee name								
	12/11/2023	Mi	i Celayens								
6	Amount (\$)	<b>7</b> Pa	yee addres	s; City;	State;	Zip Co	de				
	\$68.93	29	007 Frederi	cksburg Rd							
	Expenditure from corporate funds	Sa	an Antonio	TX 78201							
8	PURPOSE	( <b>a)</b> Ca	ategory (See	Categories listed at t	the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE	Fo	od/Bevera	ge Expense				<b>=</b>		de of Texas. Comp	
								<b>—</b>		officeholder living	expense
								PAC Meeting	J		
9	Complete ONLY if direct expenditure to benefit C/O		ididate/Offic	eholder name	C	office sou	ght			Office he	ld
	Date	Pa	yee name								
	12/01/2023	Q.	T								
	Amount (\$)	Pa	yee addres	s; City;	State:	Zip Co	de				
	\$67.77	l	•	cksburg Rd	O totto,	p					
	ΨΟΤ.ΤΤ		10 i icacii	cksburg rku							
	Expenditure from corporate funds	Sa	an Antonio	TX 78229							
	PURPOSE	<b>(a)</b> Ca	ategory (See	Categories listed at t	he top of this sch	edule)	(b)	Description			
OF EXPENDITURE				on Equipment a				<b>=</b>		de of Texas. Comp	
_/		E>	kpense					<b>-</b>	, TX,	officeholder living	expense
								Fuel			
	Complete ONLY if direct expenditure to benefit C/O		ndidate/Offic	eholder name	C	office sou	ght			Office he	ld
H	Date	Pa	yee name								
	12/18/2023	Q.	•								
				Cit."	Ctoto	Zin Ca	de				
	Amount (\$)	l	yee addres:		Siale;	Zip Co	ue				
	\$110.68	4/	TO Freder	cksburg Rd							
	Expenditure from corporate funds	Sa	an Antonio,	TX 78229							
	PURPOSE	<b>(a)</b> Ca	ategory (See	Categories listed at t	he top of this sche	edule)	(b)	Description			
	OF EXPENDITURE	ı		on Equipment a		/		:	outsio	de of Texas. Comp	olete Schedule T.
	EXPENDITURE		kpense					<b>—</b>	, TX,	officeholder living	expense
								Fuel			
L											
	Complete ONLY if direct		ndidate/Offic	eholder name	C	office sou	ght			Office he	ld
	expenditure to benefit C/OI	H									

#### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment		
Credit Card F dyment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 6/7 Rpt: 10/11	Deputy Sheriff's Association of Bexar County Political Action 00015992	
4 Date	5 Payee name	
12/14/2023	R4 Strategies	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,500.00	8000 IH 10 W Ste 600	
•		
Expenditure from corporate funds	San Antonio, TX 78230	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Consulting Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Consulting Services	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	H	
Date	Payee name	
11/29/2023	Sam's Club	
Amount (\$)	Payee address; City; State; Zip Code	_
\$78.66	5055 NW Loop 410	
Ψ10.00	3033 NW 200p 410	
Expenditure from		
corporate funds	San Antonio, TX 78229	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Food/Beverage Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	PAC Office Food/Beverage Items	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	Н	
Data		_
Date	Payee name	
12/21/2023	Sam's Club	
Amount (\$)	Payee address; City; State; Zip Code	
\$137.58	5055 NW Loop 410	
Expenditure from	San Antonio, TX 78229	
corporate funds		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	PAC Office Food & Beverage Supply/Items	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H .	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l 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: 7/7 Rpt: 11/11	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
12/19/2023	Texas Lawman
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	5121 Blanco Road
Expenditure from corporate funds	San Antonio, TX 78216
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	San Antonio Rodeo BBQ Cookoff - Cash For Kids
	Donation/Sponsorship
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>
Date	Payee name
12/02/2023	Water Works
Amount (\$)	Payee address; City; State; Zip Code
\$19.99	7912 Fredericksburg Rd
Ψ10.00	7012 Fredericksburg Rd
Expenditure from	Car Astonia TV 70000
corporate funds	San Antonio, TX 78229
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Transportation Equipment & Related  Check if travel outside of Texas. Complete Schedule T.  Check if Austin TX officeholder living expenses
	Expense Check if Austin, TX, officeholder living expense  Vehicle Expense
	Vernole Expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Ÿ .
<u> </u>	
Date	Payee name
11/27/2023	Who's Who Cocktails
Amount (\$)	Payee address; City; State; Zip Code
\$84.50	1711 Babcock Rd
Expenditure from	
corporate funds	San Antonio, TX 78228
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
LAI LINDITORE	Check if Austin, TX, officeholder living expense
	PAC Meeting
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5	