CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

•	nics Commission Filers)	2 Total pages filed:				JSE ONLY
00087760	1	57			Date Received	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mr.	FIRST E. Chevo		MI	ELECTRONICA	ALLY FILED
NAME					01/16/2024	
	NICKNAME	LAST		SUFFIX		
4 ORIGINAL		Pastrano		Jr.	Date Hand-delivered or	Date Postmarked
4 ORIGINAL REPORT TYPE	χ January 15	Runoff		(specify)	Descript //	1 A
	July 15	Exceeded modified	· · · ·		Receipt #	Amount
	30th day before election	appointment (office	holder only)		Date Processed	
	8th day before election	Final Report (Attac	h C/OH-FR)			
5 ORIGINAL PERIOD COVERED	Month Day Yea		Month Day	Year	Date Imaged	
	07/01/2023	THROUGH	12/31/2023	}		
6 EXPLANATION OF						
We deleted a duplica	ate entry and added an entry	/ that was missed. We	also had the wrong	name on an exp	enditure.	
7 AFFIDAVIT			ear, or affirm, under correct.	penalty of perju	ry, that this corrected	l report is true
		Che	ck the box next to a	ny and all applica	able statements:	
		X		faith and withou	or affirm that the origination of the origination of the origination of the origination of the original of the	
			report not later tha that the report as o	n the 14th busin originally filed is i at any error or o	n, that I am filing this ess day after the dat inaccurate or incomp mission in the report	e I learned blete. I
					Destrope In	
				Mr. E. Chevo P		
AFFIX NOTARY S	TAMP / SEAL ABOVE		Signa	uure of Candidat	te or Officeholder	
Sworn to and subs	cribed before me, by the sai	d		thic	the	dav
	, 20, to cer				uic	day
0i	, 20, 10 001					
Signature of offic	cer administering oath	Printed name of o	ficer administering o	path	Title of officer admir	nistering oath
	set administering out	i integritario of o		~~~~!		listoring outin
	Remember To At Nee	tach Any Part Of ded To Report A			port Form	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

	FORM	C/OH
COVER	SHEE	T PG 1

The C/OH Instruction (Guide explains how to c	omplete this form.	1 Filer ID (Ethics Con 000877	nmission Filers) 60	2	2 Total pages	filed: 57
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI		OFFICE	USE ONLY
OFFICEHOLDER NAME	Mr.	E. Chevo				Date Received	CALLY FILED
	NICKNAME	LAST		SUFFI		01/16/2024	
	NICKNAME	Pastrano		Jr.	^	01/10/2021	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; PO Box 2587	APT / SUITE #; CI	TY;	ZIP CC		Date Hand-delivered	d or Date Postmarked Amount
Change of Address	Kyle, TX 78640				-	Date Processed	
						Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-		
TREASURER NAME		Shea Seale					
	NICKNAME	LAST		SUFFI	 K		
		Jones					
6 CAMPAIGN	STREET ADDRESS (N	O PO BOX PLEASE);	, A	APT / SUITE #;	CITY;	S	TATE; ZIP CODE
TREASURER ADDRESS	PO Box 2587						
(Residence or Business)	Kyle, TX 78640						
7 CAMPAIGN TREASURER PHONE	AREA CODE 1 (512) 468-4279	PHONE NUMBER	EXTENSION				
8 REPORT TYPE	X January 15	30th day befo	re election	Runoff			campaign treasurer
	July 15	8th day before	e election	Exceeded modified reporting limit			fficeholder only) ttach C/OH-FR)
9 PERIOD COVERED	Month Day Y 07/01/2023	′ear T	HROUGH	Month 12/3	Day 1/2023	Year	
10 ELECTION	ELECTION DAT Month Day Y 03/05/2024		Primary	ELECTION TY	PE	Other	
	00/00/2024		General	Special			
11 OFFICE	OFFICE HELD (if any)	·		12 OFFICE SO State Repr		f known) ive District 45	5
				I			
		GO	TO PAGE 2	2			
Forms provided by Te	xas Ethics Commission	ז www.e	ethics.state.tx	(.us		Ve	ersion V3.5.1.0bfcfb67

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 3 of 57

13 C / OH NAME	Pastrano Jr., E. Chev	o (Mr.)	14 Filer ID 00087760	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditud These expenditures may have been made without the officeholders are required to report this information	he candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 35,368.15
EXPENDITURE TOTALS		ZED POLITICAL EXPENDITURES		\$ 0.00
		AL EXPENDITURES		\$ 71,916.13
	REPORTING PE			\$ 14,885.29
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS (TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.	of perjury, that the act	companying report is o be reported by me
		Mr. E. C	Chevo Pastrano Jr.	
		Signature of	Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of offic	er administering	Printed name of officer administering	Title of office	r administering oath
Forms provided by Te:	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.0bfcfb67

SU	JBT	OTALS - C/OH	C		ORM C/OH SHEET PG 3 4 of 57
18 FILE Pasi		IE Jr., E. Chevo (Mr.)	19 Filer ID 00087760	(Ethics Co	ommission Filers)
		E SUBTOTALS SCHEDULE		SUB	TOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	33,670.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,698.15
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	63,951.62
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	7,964.51
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (DF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F	RETURNED	\$	

			1 Total pages Schedule A1:
The Instru	ction Guide explains how to complete	e this form.	Sch: 1/31 Rpt: 5/57
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Pastrano Jr.	, E. Chevo (Mr.)		00087760
4 Date	5 Full name of contributor Out-of-state PA	AC (ID#:)	7 Amount of Contribution (\$)
12/22/2023	Anderson, Charles		\$25.00
	6 Contributor address; City; State; Zip Code		
	San Marcos, TX 78667		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruction	
MD		Self	
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
12/22/2023	Arredondo, Albert	¬C (IDπ,	\$100.00
	Kyle, TX 78640		
	ipation / Job title (See Instructions)	Employer (See Instruction	ls)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
12/22/2023	Arredondo, Cynthia		\$50.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	
Sr Business	,	Lower Colorado River A	
Date	Full name of contributor Out-of-state PA		Amount of Contribution (\$)
07/17/2023	Arredondo, Frank	AC (ID#)	\$100.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
	ipation / Job title (See Instructions)	Employer (See Instruction	ls)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
09/12/2023	Arredondo, Lupe		\$250.00
	Contributor address; City; State; Zip Code		
	Kyle, TX 78640		
Principal occu	Ipation / Job title (See Instructions)	Employer (See Instruction	
Self		Employed	5)

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/31 Rpt: 6/57	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Pastrano Jr.	, E. Chevo (Mr.)			00087760	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/31/2023	Avalos, Chris				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		San Marcos, TX 78666				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Owner		All Makes Collision	-		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	_
	12/31/2023	Avalos, Christopher				\$50.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	Manager		All Makes Automotive	,		
⊢	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	12/29/2023	Avalos, Michael	/			\$50.00
	12/20/2020	Contributor address; City; State; Zip Code				400.00
		Kyle, TX 78640				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Truck Driver		A.R.A. Transportation			
F	Date	Full name of contributor Out-of-state PAC (ID#:	:)	Ī	Amount of Contribution (\$)	
	10/25/2023	Baird, Charles				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Austin TV 70740				
\vdash	Dringing occu	Austin, TX 78748 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney		Baird Farrelly Criminal E		énce	
╞				ло. Т		
	Date 07/10/2023	Full name of contributor Out-of-state PAC (ID#: Baker, Brian)		Amount of Contribution (\$)	\$500.00
				-		Φ000.00
		Contributor address; City; State; Zip Code				
		San Marcos, TX 78667				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self-Employed			
i i						

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	The Instru	ction Guide explains how to co	omplete this for	n.	1	Total pages Schedule A1: Sch: 3/31 Rpt: 7/57	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Pastrano Jr.	E. Chevo (Mr.)				00087760	,
4	Date	5 Full name of contributor 🗌 out	-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/16/2023	Barba, Leon					\$100.00
		6 Contributor address; City; State; Zip	Code				
		Buda, TX 78610	I				
8		pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Civil Enginee			City of Kyle			
	Date		-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/29/2023	Barba, Leon					\$50.00
		Contributor address; City; State; Zip	Code				
		Buda, TX 78610					
⊢	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Civil Engine			City of Kyle	,		
╞	Date					Amount of Contribution (\$)	
	10/26/2023	Benoist Templeton, Cassandra	-of-state PAC (ID#:)			\$100.00
	10/20/2020	Contributor address; City; State; Zip	Codo				\$100.00
			Code				
		Driftwood, TX 78619					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Attorney			Caldwell County			
	Date	Full name of contributor	-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/01/2023	Bergen, David					\$250.00
		Contributor address; City; State; Zip	Code				
		Spring, TX 77386	I		<u> </u>		
		pation / Job title (See Instructions)		Employer (See Instructions The Buzbee Law Firm)		
	Attorney						
	Date		-of-state PAC (ID#:)		Amount of Contribution (\$)	#F0 00
	12/31/2023	Biersdorfer, Justin					\$50.00
		Contributor address; City; State; Zip	Code				
		San Marcos, TX 78666					
⊢	Principal occu	pation / Job title (See Instructions)	I	Employer (See Instructions)		
	Owner	,		Come And Plumb It	,		
⊢			I				

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	The Instru	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A1: Sch: 4/31 Rpt: 8/57
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		., E. Chevo (Mr.)		00087760
4	Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of Contribution (\$)
	12/21/2023	Boling, Anna		\$250.0
		6 Contributor address; City; State; Zip Code		1
		Kyle, TX 78640		
8		upation / Job title (See Instructions)	9 Employer (See Instructions	
	Attorney		The Boling Law Firm PL	_LC
	Date	Full name of contributor Dut-of-state PAC	(ID#:)	Amount of Contribution (\$)
	11/06/2023	Boykin, Leslie		\$50.0
		Contributor address; City; State; Zip Code		1
		Austin, TX 78701		
		upation / Job title (See Instructions)	Employer (See Instructions	
	Attorney		Law Office Of Leslie J. E	Boykin
Γ	Date	Full name of contributor Out-of-state PAC ((ID#:)	Amount of Contribution (\$)
	12/09/2023	Brown, Jerome		\$250.0
		Contributor address; City; State; Zip Code		1
	<u></u>	Dripping Springs, TX 78620		<u> </u>
		upation / Job title (See Instructions)	Employer (See Instructions	3)
	Attorney		The Brown Law Firm	
	Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
	10/25/2023	Campise, Charles		\$50.0
		Contributor address; City; State; Zip Code		
		Can Marcas TV 79666		
	Dringing occ	San Marcos, TX 78666	Employer (See Instruction	
	Principal occu Driver	upation / Job title (See Instructions)	Employer (See Instructions Uber	3)
				
	Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
	12/31/2023	Cardenas, Elaine		\$100.0
		Contributor address; City; State; Zip Code		
		Mimberlay, TV 70676		
		Wimberley, TX 78676		<u> </u>
		upation / Job title (See Instructions)	Employer (See Instructions	3)
	County Clerk	<u> </u>	Hays County TX	

The Instruction Guide explains how to complete this form. 1. Total pages Schedule A1; Sch: 5/31 Rpt: 9/57 2 FILER NAME Pastrano Jr., E: Chevo (Mr.) 3. Filer D. (Ethics Commission Filers) 00087760 4 Date 5. Full name of contributor Interd-state PAC (De- Kyle, TX 78640 7. Amount of Contribution (\$) 11/13/2023 6 Contributor address; City; State; Zip Code 7. Amount of Contribution (\$) S50.00 7. Amount of Contribution (\$) S50.00 8 Principal occupation / Job title (See Instructions) Not Employed 9. Employer (See Instructions) Not Employed Amount of Contribution (\$) S100.00 Date Castilleja, Johanne of contributor Interd-state PAC (De- Maxwell, TX 78656 Amount of Contribution (\$) S100.00 Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) S100.00 10/25/2023 Full name of contributor Interd-state PAC (De- Maxwell, TX 78656 Amount of Contribution (\$) S100.00 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S150.00 12/05/2023 Full name of contributor Interd-state PAC (De- Maxwell, TX 78656 Amount of Contribution (\$) S150.00 Principal occupation / Job title (See Instructions) Retired <td< th=""><th>The instruction Guide explains how to complete this form. Sch: S/31 Rpt: 9/57 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Pastran Jr., E. Chevo (Mr.) 3 Filer ID (Ethics Commission Filers) 4 Date 5 Foll name of contributor out-of-state PAC (Dir:</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></td<>	The instruction Guide explains how to complete this form. Sch: S/31 Rpt: 9/57 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Pastran Jr., E. Chevo (Mr.) 3 Filer ID (Ethics Commission Filers) 4 Date 5 Foll name of contributor out-of-state PAC (Dir:							
Pastrano Jr., E. Chevo (Mr.) 00087760 4 Date 5 Full name of contributor out-of-state PAC (D#) 7 Amount of Contribution (S) 11/13/2023 6 Commongo 6 Commongo 7 Amount of Contribution (S) 8 Principal occupation / Job title (See instructions) 9 Employer (See Instructions) Amount of Contribution (S) 10/25/2023 Casalleja, Frank 0x4-of-state PAC (D#) Amount of Contribution (S) 10/25/2023 Casalleja, Frank Commbutor address; City; State: Zip Code Amount of Contribution (S) Principal occupation / Job title (See instructions) Retired Amount of Contribution (S) Patiend Full name of contributor out-of-state PAC (D#) Amount of Contribution (S) 10/25/2023 Casalleja, Julia Contributor address; City; State; Zip Code Amount of Contribution (S) 10/25/2023 Casalleja, Julia Contributor address; City; State; Zip Code Amount of Contribution (S) Principal occupation / Job title (See instructions) Employer (See Instructions) Amount of Contribution (S) 10/25/2023 Full name of contributor out-ot-state PAC (D#) Amount of Contribution (S) 12/06/2023 Full name of contributor out-ot-state PAC (D#) Amount of Con	Pastrano Jr., E. Chevo (Mr.) 00087760 4 Date 5 Full mame of contributor out-of-state PAC (Der) 7 Amount of Contribution (\$) 11/13/2023 Cassilleja, Domingo 6 Contributor address; City: State; Zip Code 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 10/25/2023 Cassilleja, Frank 2000 Amount of Contribution (\$) 10/25/2023 Cassilleja, Frank 2000 Amount of Contribution (\$) Retired Maxwell, TX 78656 Employer (See Instructions) Retired Date I/ Job title (See instructions) Retired Amount of Contribution (\$) Retired Full name of contributor out-of-state PAC (Der		The Instru	ction Guide explains how to complete this	form.	1		
Pastrano Jr., E. Chevo (Mr.) 00087760 4 Date 5 Full name of contributor out-of-state PAC (D#) 7 Amount of Contribution (S) 5 Contributor address: City: State; Zip Code 7 Amount of Contribution (S) \$50.00 6 Principal occupation / Job tile (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Amount of Contribution (S) 10/25/2023 Full name of contributor out-of-state PAC (D#) Amount of Contribution (S) 10/25/2023 Cassilleja, Frank Contributor address; City: State; Zip Code Amount of Contribution (S) Principal occupation / Job tile (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) 10/25/2023 Cassilleja, Julia Out-of-state PAC (D#) Amount of Contribution (S) 10/25/2023 Cassilleja, Julia Out-of-state PAC (D#) Amount of Contribution (S) 10/25/2023 Cassilleja, Julia Contributor address; City; State; Zip Code Amount of Contribution (S) 12/06/2023 Full name of contributor Out-of-state PAC (D#) Amount of Contribution (S) 12/06/2023 Full name of contributor Out-of-state PAC (D#) Amount of Contribution (S) 12/06/2023 Full name of contributor Out-of-state PAC (D#	Pastrano Jr., E. Chevo (Mr.) 00087760 4 Date 5 Full mame of contributor out-of-state PAC (Der) 7 Amount of Contribution (\$) 11/13/2023 Cassilleja, Domingo 6 Contributor address; City: State; Zip Code 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 10/25/2023 Cassilleja, Frank 2000 Amount of Contribution (\$) 10/25/2023 Cassilleja, Frank 2000 Amount of Contribution (\$) Retired Maxwell, TX 78656 Employer (See Instructions) Retired Date I/ Job title (See instructions) Retired Amount of Contribution (\$) Retired Full name of contributor out-of-state PAC (Der	2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
11/13/2023 Castilleja, Domingo \$\$50.00 6 Contributor address: City: State: Zip Code \$\$50.00 8 Principal occupation / Job titie (See Instructions) Not Employed Amount of Contribution (\$) Castilleja, Frank 10/25/2023 Full name of contributor Castilleja, Frank out-of-state PAC (10# Amount of Contribution (\$) S100.00 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S100.00 10/25/2023 Full name of contributor Contributor address; City: State; Zip Code Amount of Contribution (\$) S100.00 10/25/2023 Full name of contributor Contributor address; City: State; Zip Code Amount of Contribution (\$) S100.00 10/25/2023 Full name of contributor Contributor address; City: State; Zip Code Amount of Contribution (\$) S100.00 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S150.00 12/06/2023 Full name of contributor Contributor address; City: State; Zip Code Amount of Contribution (\$) S150.00 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S150.00 10/02/2023 Full name of contributor Contributor address; City: State; Zip Code Amount of Contributon (11/13/2023 Castilleja, Domingo \$\$0.00 6 Contributor address; City; State: Zip Code \$\$\$0.00 8 Principal occupation / Job title (See Instructions) Not Employed \$\$\$\$0.00 Date Full name of contributor out of state PAC (D#			, E. Chevo (Mr.)				
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Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/06/2023 Chapa, Evangelina \$150.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$150.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) San Marcos, TX 78666 San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/06/2023 Chapa, Evangelina \$150.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$150.00 Kyle, TX 78640 Employer (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina	\vdash	Princinal occu		Employer (See Instructions	<u> </u> ເ)		
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/06/2023 Chapa, Evangelina \$150.00 Contributor address; City; State; Zip Code \$150.00 Kyle, TX 78640 Employer (See Instructions) Retired Retired Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/06/2023 Chapa, Evangelina \$150.00 Contributor address; City; State; Zip Code Kyle, TX 78640 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor 0ut-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina Contributor address; City; State; Zip Code Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)					,		
12/06/2023 Chapa, Evangelina \$150.00 Contributor address; City; State; Zip Code Kyle, TX 78640 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	12/06/2023 Chapa, Evangelina \$150.00 Contributor address; City; State; Zip Code Kyle, TX 78640 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)					Г	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Kyle, TX 78640 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor 0ut-of-state PAC (ID#:) Amount of Contribution (\$) Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Code Kyle, TX 78640 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions))		Amount of Contribution (\$)	\$150.00
Kyle, TX 78640 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Chapman, Christina Amount of Contribution (\$) San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Kyle, TX 78640 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor on out-of-state PAC (ID#:) 10/02/2023 Chapman, Christina Contributor address; City; State; Zip Code Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)		12/00/2023			-		\$130.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)			Contributor address, City, State, Zip Code				
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)							
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)			Kyle, TX 78640				
Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code \$150.00 San Marcos, TX 78666 San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code San Marcos, TX 78666 \$150.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	\vdash	Principal occu	-	Employer (See Instructions	1 5)		
10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code \$150.00 San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)	10/02/2023 Chapman, Christina \$150.00 Contributor address; City; State; Zip Code \$150.00 San Marcos, TX 78666 Employer (See Instructions)							
Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)	F	Date	Full name of contributor out-of-state PAC (ID#	• :)		Amount of Contribution (\$)	
San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)	San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions)		10/02/2023	Chapman, Christina				\$150.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)			Contributor address; City; State; Zip Code		1		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)							
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)							
				San Marcos, TX 78666				
Grant Coordinator Texas State University	Grant Coordinator Texas State University	Γ	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			Grant Coord	inator	Texas State University			
					-			

The Instrue	ction Guide explains how to complete tl	his form.	1 Total pages Schedule A1: Sch: 6/31 Rpt: 10/57
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Pastrano Jr.,	, E. Chevo (Mr.)		00087760
4 Date	5 Full name of contributor out-of-state PAC	. (ID#:)	7 Amount of Contribution (\$)
10/25/2023	Cisneros, Mary		\$25.00
	6 Contributor address; City; State; Zip Code		
	Kyle, TX 78640	i	
-	pation / Job title (See Instructions)	9 Employer (See Instruction	ns)
Retired		Retired	
Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
12/23/2023	Cougot, Cynthia		\$50.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78758	i	
	ipation / Job title (See Instructions)	Employer (See Instruction	ns)
Not Employe	;d	Not Employed	
Date	Full name of contributor out-of-state PAC	, (ID#:)	Amount of Contribution (\$)
12/31/2023	Criss, Susan		\$250.00
	Contributor address; City; State; Zip Code		
	Salado, TX 76571	i	
	pation / Job title (See Instructions)	Employer (See Instruction	•
Lawyer		Criss & Rousseau Law	v Firm.L.L.P.
Date	Full name of contributor 🔲 out-of-state PAC	, (ID#:)	Amount of Contribution (\$)
09/02/2023	Cuellar, Katherine		\$200.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666	<u> </u>	
	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Retired		Retired	
Date	Full name of contributor out-of-state PAC	, (ID#:)	Amount of Contribution (\$)
12/29/2023	Cuellar, Katherine		\$100.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666	<u> </u>	
-	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Retired		Retired	

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 7/31 Rpt: 11/57	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
[, E. Chevo (Mr.)		ľ	00087760	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/08/2023	Cullom, Jacqueline				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Seguin, TX 78155				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Attorney		City of San Marcos			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/31/2023	Cullom, Jacqueline				\$25.00
		Contributor address; City; State; Zip Code		1		
		Alexandria, VA 22314				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		City of Alexandria			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/31/2023	Davidson, Monica				\$100.00
		Contributor address; City; State; Zip Code		1		
		Buda, TX 78610				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Owner		Glow Laser and Beauty			
	Date	Full name of contributor out-of-state PAC (ID#:_	·)	Γ	Amount of Contribution (\$)	
	12/31/2023	Diaz, Ruben				\$50.00
		Contributor address; City; State; Zip Code		1		
		San Marcos, TX 78666				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Analyst		Texas Education Agenc	у		
F	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/11/2023	Dietz, Elly Del				\$250.00
		Contributor address; City; State; Zip Code		1		
		San Marcos, TX 78666				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Del Prado Dietz PLLC			
⊢			_1			

	The Instru	ction Guide explains how to complete th	is form.	1 Total pages Schedule A1: Sch: 8/31 Rpt: 12/57
2	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Pastrano Jr.,	E. Chevo (Mr.)		00087760
4	Date	5 Full name of contributor Out-of-state PAC (I	D#:)	7 Amount of Contribution (\$)
	07/20/2023	Dobbins, Liz		\$500.00
		6 Contributor address; City; State; Zip Code		
		San Marcos, TX 78667		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction:	is)
	Not Employe	d	Not Employed	
F	Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
	12/29/2023	Dobbins, Lizbeth		\$500.00
		Contributor address; City; State; Zip Code		
		San Marcos, TX 78667		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	is)
	Not Employe	d	Not Employed	
	Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
	12/31/2023	Douglas, Larry		\$45.00
		Contributor address; City; State; Zip Code		
		Round Rock, TX 78665		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)
	Not Employe	d	Not Employed	
F	Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
	12/31/2023	Engels, Melanie		\$45.00
		Contributor address; City; State; Zip Code		
		Austin, TX 78737-4584		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)
	Customer Se	ervice Rep	City of Dripping Springs	s - Ranch Park
F	Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
	12/28/2023	Enriquez, Claudia		\$50.00
		Contributor address; City; State; Zip Code		
		Buda, TX 78610		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)
	Customer Se	ervice Manager	Texas Department of Li	icensing and Regulation

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 9/31 Rpt: 13/57	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	5)
	, E. Chevo (Mr.)		00087760	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/30/2023	Enriquez, Jose		\$50	0.00
	6 Contributor address; City; State; Zip Code			
	Luling, TX 78648			
	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Field tech		Bobwhite		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/27/2023	Espinoza, Martin		\$50	0.00
	Contributor address; City; State; Zip Code			
	Kyle, TX 78640			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)	
Not Employe	ed Sector Se	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/25/2023	Etheredge, Mary		\$100	0.00
	Contributor address; City; State; Zip Code			
	Kyle, TX 78640			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/27/2023	Fahy, Nancy		\$45	5.00
	Contributor address; City; State; Zip Code			
	kyle, TX 78640			
	ipation / Job title (See Instructions)	Employer (See Instructions	3)	
Not Employe	3d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/30/2023	Fleming, Alta		\$50	0.00
	Contributor address; City; State; Zip Code			
	Buda, TX 78610			
-	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Monitor		Hays CISD		
				_

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 10/31 Rpt: 14/57	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Pastrano Jr.	, E. Chevo (Mr.)			00087760	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/05/2023	Flores, Mario				\$500.00
		6 Contributor address; City; State; Zip Code		1		
		Lockhart, TX 78644	1			
		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
	09/16/2023	Flores, Rachel]		\$250.00
		Contributor address; City; State; Zip Code				
		Luling, TX 78648				
—	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Office Manag		Heart to Heart	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_		Τ	Amount of Contribution (\$)	
	12/29/2023	Flores, Rachel	/			\$45.00
		Contributor address; City; State; Zip Code		ł		¥ 10.00
		Luling, TX 78648				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Office Manag	ger	Heart to Heart			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/29/2023	Flores, Sylvia				\$45.00
		Contributor address; City; State; Zip Code		1		
		Buda TV 79610				
_	Drincipal occu	Buda, TX 78610 Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	5)		
				Τ	Amount of Contribution (¢)	
	Date 12/31/2023	Full name of contributor out-of-state PAC (ID#: Friesenhahn, Vincent)		Amount of Contribution (\$)	\$50.00
	12/01/2020			-		ψυυ.υυ
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Owner		Self			
			.1			

	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/31 Rpt: 15/57	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		., E. Chevo (Mr.)				00087760	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/13/2023	Fuentes, Francisco					\$1,000.00
		6 Contributor address; City; St	ate; Zip Code		1		
		Austin, TX 78759					
8	Princinal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ນ		
ľ	Chairman)	US Hispanic Contractors		ssociation	
⊨		Full name of contributor			1		
	Date 12/05/2023	Garza, Belinda	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	12/03/2023						Ψ23.00
		Contributor address; City; St	ale; Zip Code				
		San Marcos, TX 78666					
	Principal occu	L pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	Nurse			Aveanna			
╞	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/27/2023	Garza, Carolina					\$50.00
		Contributor address; City; St	ate: Zip Code				
			,p =				
		Kyle, TX 78640					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Vice preside	nt		Big Robs Burgers			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/29/2023	Garza, Jesse					\$50.00
		Contributor address; City; St	ate; Zip Code		1		
┝	Drineinel eeu	Kyle, TX 78640	<u>,</u>				
	Staff Attorne	pation / Job title (See Instructions))	Employer (See Instructions NDS	5)		
╘				ND3	-		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	¢45.00
	12/31/2023	Garza, Lisa					\$45.00
		Contributor address; City; St	ate; Zip Code				
		Maxwell, TX 78656					
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
		Therapist/Case Manager				ecialty Hospital of Luling	
⊢	. ,						

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 12/31 Rpt: 16/57
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Pastrano Jr., E. Chevo (Mr.)	00087760
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/27/2023 Garza, Shirley	\$50.00
6 Contributor address; City; State; Zip Code	
San Marcos, TX 78666	
 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction 	ns)
Court clerk II Hays County	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/31/2023 Glickler, David	\$45.00
Contributor address; City; State; Zip Code	
Kyle, TX 78640	
Principal occupation / Job title (See Instructions) Employer (See Instruction Attorney Self	15)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/30/2023 Gonzales, Edward	\$45.00
Contributor address; City; State; Zip Code	
Kyle, TX 78640	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Pipe fitter DSI	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/29/2023 Guerrero, Ruben	\$100.00
Contributor address; City; State; Zip Code	
Kyle, TX 78640	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/27/2023 Henderson, Clint	\$50.00
Contributor address; City; State; Zip Code	
Thorndale, TX 76577	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Pipefitter Dynamic Systems	

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 13/31 Rpt: 17/57	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
Pastrano Jr.,	, E. Chevo (Mr.)		00087760	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/16/2023	Hendricks, Diana F			\$50.00
	6 Contributor address; City; State; Zip Code			
	San Marcos, TX 78666-5178			
	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Texas State	University	Director of Communicati	ons ALERRT	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/27/2023	Hennigan, Shanna M		\$	\$100.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77230			
	pation / Job title (See Instructions)	Employer (See Instructions))	
Legal Consu		Shanna M Hennigan		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/10/2023	Hernandez, Angela		\$	\$200.00
	Contributor address; City; State; Zip Code			
	Kyle, TX 78640			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/08/2023	Hernandez, Angela			\$200.00
	Contributor address; City; State; Zip Code			
	Kyle, TX 78640			
	pation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2023	Hernandez, Angela		\$	\$200.00
	Contributor address; City; State; Zip Code			
	Kyle, TX 78640			
	pation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		

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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 14/31 Rpt: 18/57	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		, E. Chevo (Mr.)		[00087760	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/29/2023	Hernandez, Angela				\$200.00
		6 Contributor address; City; State; Zip Code		1		
		Kyle, TX 78640				
8	Principal occu	I Ipation / Job title (See Instructions)	9 Employer (See Instructions	 S)		
	Not Employe		Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	12/31/2023	Hernandez, George	/			\$50.00
				1		
		Buda, TX 78610				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	·)	Γ	Amount of Contribution (\$)	
	12/27/2023	Hipolito, Shawn				\$50.00
		Contributor address; City; State; Zip Code		1		
		Buda, TX 78610		Ĺ		
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Kyrish	S)		
			<u> </u>			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷ (5 00
	12/29/2023	Jansen, Dena				\$45.00
		Contributor address; City; State; Zip Code				
		Buda, TX 78610				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Author	······································	Self	-,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/28/2023	Johnson, Tanisha				\$45.00
		Contributor address; City; State; Zip Code		1		
		Round Rock, TX 78664				
		pation / Job title (See Instructions)	Employer (See Instructions			
	Business Ow	/ner	A&P Quality Care Medic	cal		

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 15/31 Rpt: 19/57
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	., E. Chevo (Mr.)		00087760
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/27/2023			\$45.00
	6 Contributor address; City; State; Zip Code		1
C Dringingloco	Kansas City, MO 64113		
Attorney	upation / Job title (See Instructions)	9 Employer (See Instructions Fenimore Kay	3)
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/29/2023			\$50.00
	Contributor address; City; State; Zip Code		
	Kyle, TX 78640		
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
Business		Self employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/31/2023			\$45.00
	Contributor address; City; State; Zip Code		1
	Austin, TX 78737		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Realtor		Self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/31/2023	Knight, Lila		\$50.00
	Contributor address; City; State; Zip Code		1
	Kyle, TX 78640		
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employ		Not Employed	<i>"</i>
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
12/31/2023		J	\$50.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Bookkeeper	r/Office Manager	Sergi & Associates	
		-1	

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/31 Rpt: 20/57	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
-		, E. Chevo (Mr.)			00087760	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/27/2023	Lopez, Benjamin				\$250.00
		6 Contributor address; City; State; Zip Code				
		Luling, TX 78648				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Drilling		Helmerich & Payne			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)	
	12/27/2023	Lopez, David	,			\$100.00
				·		
		Buda, TX 78610				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L s)		
	Concrete Co		David	-,		
╞					Amount of Contribution (ft)	
	Date)		Amount of Contribution (\$)	¢100.00
	12/31/2023	Lozano, Richard				\$100.00
		Contributor address; City; State; Zip Code				
		Lockhart, TX 78644				
⊢	Dringinglagou					
	Worker	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	WUIKEI		Hays County			
	Date)		Amount of Contribution (\$)	
	12/27/2023	Magnesio, Joe				\$100.00
		Contributor address; City; State; Zip Code				
		Spring, TX 77379				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	COMPANY	OWNER	WINSUPPLY INC.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/29/2023	Mann, Brandy				\$45.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78749				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		HHSC			
⊢			1			

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 17/31 Rpt: 21/57
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	, E. Chevo (Mr.)		00087760
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/31/2023	Martinez, Enrique		\$45.00
	6 Contributor address; City; State; Zip Code		
	Kyle, TX 78640		
	pation / Job title (See Instructions)	9 Employer (See Instructions))
Teacher		HAYS CISD	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/31/2023	Martinez, Rebecca		\$50.00
	Contributor address; City; State; Zip Code		
	Kyle, TX 78640		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Billing Assist	ance	ARA Transportation	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/18/2023	Martinez Sr., Ricardo		\$1,000.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Business ow	ner	Business owner	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/29/2023	Martinez Sr., Ricardo		\$250.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Gen. Mgr		PMTService	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/10/2023	Mayo, Sonia		\$50.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78757		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Executive As	ssistant	State of Texas	
		-	

	The Instru	ction Guide explains how to c	complete this for	m.	1	Total pages Schedule A1: Sch: 18/31 Rpt: 22/57	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
	Pastrano Jr., E. Chevo (Mr.)				00087760	,	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/18/2023	McNabb, Billy					\$500.00
		6 Contributor address; City; State; Z	Zip Code				
		Now Prounfold TV 79122					
0	Principal occu	New Braunfels, TX 78132 pation / Job title (See Instructions)	a	Employer (See Instructions	<u> </u>		
ľ	Attorney		5	Law firm	<i>)</i>		
╞					_	Amount of Contribution (¢)	
	Date 12/31/2023	Full name of contributor o	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$45.00
	12/31/2023		Zia Cada				φ45.00
		Contributor address; City; State; Z	Lip Code				
		San Marcos, TX 78666					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Lawyer			McNutt Law Firm			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/29/2023	Medina, David M.					\$100.00
		Contributor address; City; State; Z	Zip Code		1		
		Houston, TX 77030			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions Chamberlain Hrdlicka	5)		
	Attorney						
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 15 00
	12/30/2023	Moore, Irene					\$45.00
		Contributor address; City; State; Z	Zip Code				
		Luling, TX 78648					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ټ)		
	Retired	· · · · · · · · · · · · · · · · · · ·		Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/28/2023	Morales, Jeffrey					\$45.00
		Contributor address; City; State; Z	Zip Code				
⊢	Delevit 1	Buda, TX 78610	ı -				
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
⊢	Not Employe	:u		Not Employed			

The Instru	ction Guide explains how to complete this	s form.		Fotal pages Schedule A1: Sch: 19/31 Rpt: 23/57	
2 FILER NAME	2 FILER NAME			-iler ID (Ethics Commission	n Filers)
	, E. Chevo (Mr.)			00087760	
4 Date	5 Full name of contributor Out-of-state PAC (ID#	#:)	7 A	Amount of Contribution (\$)	
09/05/2023	Morris, Kathy				\$250.00
	6 Contributor address; City; State; Zip Code		"		
	San Marcos, TX 78666				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Retired		Retired			
Date	Full name of contributor out-of-state PAC (ID#		A	Amount of Contribution (\$)	
12/03/2023	Munoz, Joe			× -	\$250.00
			·		
	Kyle, TX 78640				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Manager		Texas State University			
Date	Full name of contributor out-of-state PAC (ID#	#:)	A	Amount of Contribution (\$)	
09/16/2023	Najera, Raquel				\$100.00
	Contributor address; City; State; Zip Code		·		
	Buda, TX 78610	<u>.</u>			
	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
Self employe	2d	Self			
Date	Full name of contributor out-of-state PAC (ID#	#:)	A	Amount of Contribution (\$)	
07/21/2023	Nevarez Law Group PC				\$500.00
	Contributor address; City; State; Zip Code		"		
	Eagle Pass, TX 78852		<u> </u>		
	ipation / Job title (See Instructions)	Employer (See Instructions	S)		
Law firm					
Date	Full name of contributor out-of-state PAC (ID#	#:)	A	Amount of Contribution (\$)	
12/31/2023	Padron, Mary				\$45.00
	Contributor address; City; State; Zip Code				
	Can Marcas, TV 79666				
Dringing ago	San Marcos, TX 78666	Employer (Cool Instructions	<u> </u>		
	ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	S)		
Not Employe	ja				

The In	struction Guide explains how to co	mplete this form.	1 Total pages Schedul Sch: 20/31 Rpt: 24	
2 FILER N	IAME		3 Filer ID (Ethics Co	mmission Filers)
	io Jr., E. Chevo (Mr.)		00087760	
4 Date	5 Full name of contributor out-o	of-state PAC (ID#:)	7 Amount of Contributi	on (\$)
12/27/2		·		\$50.00
		Code		
	San Marcos, TX 78666			
8 Principa	l occupation / Job title (See Instructions)	9 Employer (See Instruction	ns)	
Small b	usiness owner	Small business owner		
Date	Full name of contributor out-o	of-state PAC (ID#:)	Amount of Contributi	on (\$)
07/01/2	2023 Pastrano, Anna			\$100.00
	Contributor address; City; State; Zip	Code		
	San Marcos, TX 78666			
Principa	l occupation / Job title (See Instructions)	Employer (See Instruction	ns)	
Area S	pecialist	CFAN company		
Date	Full name of contributor out-o	of-state PAC (ID#:)	Amount of Contributi	on (\$)
08/01/2	-			\$100.00
	Contributor address; City; State; Zip	Code		
	San Marcos, TX 78666			
	l occupation / Job title (See Instructions)	Employer (See Instructio	ns)	
Area S	pecialist	Cfan		
Date	Full name of contributor out-	of-state PAC (ID#:)	Amount of Contributi	on (\$)
12/28/2	· · ·			\$100.00
	Contributor address; City; State; Zip]	
	San Antonio, TX 78237			
•	l occupation / Job title (See Instructions)	Employer (See Instructio	ns)	
Owner		Charles Pastrano		
Date		of-state PAC (ID#:)	Amount of Contributi	on (\$)
10/25/2	2023 Pastrano, Eusebio			\$500.00
	Contributor address; City; State; Zip	Code		
	Kyle, TX 78640			
	l occupation / Job title (See Instructions)	Employer (See Instructio	ns)	
Retired		Retired		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 21/31 Rpt: 25/57
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Pastrano Jr., E. Chevo (Mr.)	00087760
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/27/2023 Pastrano, Eusebio	\$45.00
6 Contributor address; City; State; Zip Code	1
Kyle, TX 78640	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions	5)
Retired Retired	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/31/2023 Pastrano, Jose	\$50.00
Contributor address; City; State; Zip Code	1
Rockdale, TX 76567	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
Welder Bulldog Welding LLC	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/27/2023 Pastrano, Pedro	\$45.00
Contributor address; City; State; Zip Code	1
San Antonio, TX 78222	
Principal occupation / Job title (See Instructions) Employer (See Instructions	3)
Construction Pedro Pastrano	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/29/2023 Payne, Rosie	\$50.00
Contributor address; City; State; Zip Code	
Kyle, TX 78640	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	~
Bookkeeper Centro Cultural Hispanc	
Date Full name of contributor out-of-state PAC (ID#:) 12/20/2022 Decelor loc	Amount of Contribution (\$)
12/29/2023 Peralez, Joe	\$50.00
Contributor address; City; State; Zip Code	
Buda TX 78610	
Buda, TX 78610 Principal occupation / Job title (See Instructions) Employer (See Instructions)	2)
Principal occupation / Job title (See Instructions) Employer (See Instructions	

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 22/31 Rpt: 26/57
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Pastrano Jr., E. Chevo (Mr.)	00087760
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
12/29/2023 Peralez, Rene	\$45.00
6 Contributor address; City; State; Zip Code	
Kyle, TX 78640	
8 Principal occupation / Job title (See Instructions) 9 Employer Pipefitter Local Ur	(See Instructions)
Date Full name of contributor out-of-state PAC (ID#:	
10/20/2023 Phillips, Michael	\$25.00
Contributor address; City; State; Zip Code	
Buda, TX 78610	
	(See Instructions)
Regional Manager Sun Auto	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
12/30/2023 Phillips, Mitchell	\$100.00
Contributor address; City; State; Zip Code	
Mountain City, TX 78610	
	(See Instructions)
Not Employed Not Emp	
Date Full name of contributor out-of-state PAC (ID#:	
12/28/2023 Prado III, Roque	\$45.00
Contributor address; City; State; Zip Code	
San Marcos, TX 78666	
	(See Instructions)
	er Cadillac
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
10/25/2023 Pulpan, Kelli	\$25.00
Contributor address; City; State; Zip Code	
Canyon Lake, TX 78133	
	(See Instructions)
Coordinator Hays Co	unty

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/31 Rpt: 27/57	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Pastrano Jr.	., E. Chevo (Mr.)			00087760	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/16/2023	Ramirez, Rosanna				\$25.00
		6 Contributor address; City; State; Zip Code				
		San Marcos, TX 78666				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/27/2023	Ramirez, Rosanna				\$45.00
		Contributor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	"		
Ĺ		San Marcos, TX 78666	-			
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	3d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	12/27/2023	Rendon, Maryalice				\$50.00
		Contributor address; City; State; Zip Code		Ϊ		
	Di sinal assi	Lockhart, TX 78644		ŕ		
	Principal occu Truck Driver	upation / Job title (See Instructions)	Employer (See Instructions Rendon Trucking	S)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±05.00
	09/19/2023	Rivera, Rose				\$25.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Production a		Cfan	5)		
⊨				—		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	ቀላፍ ሰበ
	12/30/2023	Rivera, Rose				\$45.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	(2)		
	Production a		C-fan	5)		
┝						

	The Instru	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 24/31 Rpt: 28/57	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Pastrano Jr.	E. Chevo (Mr.)				00087760	,
4	Date	5 Full name of contributor out-of-state	e PAC (ID#:)	7	Amount of Contribution (\$)	
	10/26/2023	Robert C Hilliard LLP					\$10,000.00
		6 Contributor address; City; State; Zip Code					
		Corpus Christi, TX 78401					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
╞	Date	Full name of contributor out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	11/28/2023	Rodriguez, John					\$1,000.00
		Contributor address; City; State; Zip Code					
		Kyle, TX 78640					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Small Busine	ess Owner		Self-Employed			
	Date	Full name of contributor 🔲 out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	11/28/2023	Rodriguez, John					\$1,000.00
		Contributor address; City; State; Zip Code					
		Kyle, TX 78640					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Small Busine	ss Owner		Self-Employed			
	Date		e PAC (ID#:)		Amount of Contribution (\$)	
	10/03/2023	Rodriguez, Linda A.					\$100.00
		Contributor address; City; State; Zip Code					
		Kyle, TX 78640					
⊢	Bringinal occu	pation / Job title (See Instructions)		Employer (See Instructions			
		e subject to assignment		Self)		
╞						Amount of Contribution (ft)	
	Date 12/29/2023	Full name of contributor out-of-state Routon, Tracy	e PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	12/29/2023	-					φ50.00
		Contributor address; City; State; Zip Code					
		Dripping Springs, TX 78620					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Self employe			Tracy Routon			
\vdash			I				

					4	Tatal manage Cahadula A1	
The	e Instru	ction Guide explains how to co	omplete this for	rm.	T	Total pages Schedule A1: Sch: 25/31 Rpt: 29/57	
2 FILE	ER NAME				3	Filer ID (Ethics Commission	n Filers)
Pas	strano Jr.,	E. Chevo (Mr.)				00087760	
4 Date	е	5 Full name of contributor	t-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10/2	25/2023	Sandoval, Sylvia					\$100.00
		6 Contributor address; City; State; Zip	o Code		1		
		San Marcos, TX 78666					
		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
Reti	irea			Retired	_		
Date			t-of-state PAC (ID#:)		Amount of Contribution (\$)	
07/1	11/2023	Saucedo, Andy					\$25.00
		Contributor address; City; State; Zip	o Code				
		Kyle, TX 78640					
Prin	cinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
	nductor			Amtrak	,,		
Date	0	Full name of contributor	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	- 25/2023	Scopas, Mary	I-OI-SIAIE PAC (ID#)			\$75.00
10/2	20/2020	Contributor address; City; State; Zi	n Code				¢10.00
		Universal City, TX 78148					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Οοι	urt Repor	er		Bexar County			
Date	e	Full name of contributor	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
11/2	25/2023	Scopas, Mary					\$75.00
		Contributor address; City; State; Zip	o Code		1		
		Universal City, TV 70140					
Drin		Universal City, TX 78148 pation / Job title (See Instructions)	i	Employer (Cap Instructions			
	urt Report	,		Employer (See Instructions Bexar County	s)		
				Bexar county			
Date	e 25/2023	Full name of contributor our Scopas, Mary	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$75.00
12/2	23/2023						Φ75.00
		Contributor address; City; State; Zi	5 Code				
		Universal City, TX 78148					
Prin	cipal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ة)		
Cou	urt reporte	≥r		Bexar			

_						
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/31 Rpt: 30/57	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Pastrano Jr.	., E. Chevo (Mr.)			00087760	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/29/2023	Sergi, David				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		San Marcos, TX 78666	·			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Attorney		Self			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	—
	12/28/2023	Serna, Lydia				\$45.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	Small busine		Small business owner	2)		
╞─	Date	Full name of contributor out-of-state PAC (ID#:_		Г	Amount of Contribution (\$)	
	12/29/2023	Serrano, Eddie	/			\$100.00
	14/20/2020	Contributor address; City; State; Zip Code		$\left \right $		Ψ100.00
		Martindale, TX 78655				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Logistrics		ARA Transportation			
	Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	10/15/2023	Shaw, Carl				\$500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77096				
_	Drincinal Occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> -)		
	Attorney		Shaw Law	5)		
╞		Full name of contributor Out-of-state PAC (ID#:		Τ	Amount of Contribution (¢)	
	Date 10/15/2023	Full name of contributor out-of-state PAC (ID#: Shaw, Carl)		Amount of Contribution (\$)	\$500.00
	10/10/2020	Contributor address; City; State; Zip Code		$\left \right $		Ψ000.00
		Continuation address, City, State, Zip Code				
		Houston, TX 77096				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Shaw Law			

The Instr	ruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 27/31 Rpt: 31/57
2 FILER NAM	 IE		3 Filer ID (Ethics Commission Filers)
	Ir., E. Chevo (Mr.)		00087760
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
10/15/2023	— —		\$500
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77096	i	
-	cupation / Job title (See Instructions)	9 Employer (See Instructions	s)
Attorney		Shaw Law	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/31/2023	3 Shelton, Ryan		\$45
	Contributor address; City; State; Zip Code		
	Buda, TX 78610		
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
lawyer		Edmundson Shelton We	,
-	Full name of contributor out-of-state PAC (ID#:		
Date 12/28/2023)	Amount of Contribution (\$) \$45
12/20/2020			ψτ υ
	Continuation address, City, State, Zip Code		
	San Marcos, TX 78666		
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	;)
Self		Johnny Sierra	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/29/2023	3 Smith, Beth		\$50
	Contributor address; City; State; Zip Code		
<u> </u>	Mountain City, TX 78610		
	cupation / Job title (See Instructions)	Employer (See Instructions	3)
judge		Hays County	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/28/2023			\$50
	Contributor address; City; State; Zip Code		
	Kyle, TX 78640		
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)
Purchaser		Tx Dept of Ins	,
		· ·	

1 Total pages Schedule A1: Sch: 28/31 Rpt: 32/57
3 Filer ID (Ethics Commission Filers)
00087760
7 Amount of Contribution (\$)
\$500.00
PC
Amount of Contribution (\$)
\$45.00
Amount of Contribution (\$)
\$50.00
Amount of Contribution (\$)
\$500.00
utions
Amount of Contribution (\$)
\$500.00
utions

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 29/31 Rpt: 33/57	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Pastrano Jr.	., E. Chevo (Mr.)			00087760	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/27/2023	Torres, Donny				\$50.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		New Braunfels, TX 78130				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Deputy Cons		Hays County			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	· -= 00
	12/27/2023	Torres, Juan				\$45.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Educator		Austin ISD	-,		
	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Γ	Amount of Contribution (\$)	
	12/31/2023	Turner, Joseph				\$45.00
		Contributor address; City; State; Zip Code		1		-
		Austin, TX 78736				
	•	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/30/2023	Velasquez, Greg]		\$100.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	Mgr	parion / 002 and (000	Frontier	-,		
⊢	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Τ	Amount of Contribution (\$)	
	10/05/2023	Villalpando, Catalina	/			\$25.00
		Contributor address; City; State; Zip Code		ł		
		San Marcos, TX 78666				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/31 Rpt: 34/57	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		, E. Chevo (Mr.)			00087760	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/29/2023	Williams, Ben				\$50.00
		6 Contributor address; City; State; Zip Code		1		
		Kyle, TX 78640				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/16/2023	Wingo, Paul				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75208				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Lawyer		Hamilton Wingo			
	Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	12/27/2023	Winzer, Lisa				\$100.00
		Contributor address; City; State; Zip Code		1		
		Little Elm, TX 75068	,			
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	09/29/2023	Zuniga, Miguel				\$250.00
		Contributor address; City; State; Zip Code]		
	Drive sized appro-	Kyle, TX 78640		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	S)		
	Principal Sci		Luminex	.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷=0.00
	12/31/2023	Zuniga, Miguel				\$50.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640				
<u> </u>	Dringinal occi		Employer (See Instructions	<u> </u>		
	Scientist	upation / Job title (See Instructions)	Employer (See Instructions Luminex	5)		
	3010111131		Lummex			

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 31/31 Rpt: 35/57
FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
Date 5 Full name of contributor out-of-state PAC (ID#:) 12/29/2023 zayas, Cary 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$45.00
New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) 9 Employer (See Instructions))
Public Information Officer Comal County, Texas	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 1/2 Rpt: 36/57	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Pastrano Jr., E. Chevo (Mr.)			00087760	
⁴ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS			\$	
 5 Date 06 Full name of contributor out-of-state PAC (ID#:) 08/15/2023 Borrego, Henry 7 Contributor address; City; State; Zip Code 		8 Amount of 9 In-kind contribution contribution (\$) description \$1,004.65 I Trailer Logo Wrap and Installation		
Kyle, TX 78640		Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON		-JUDICIAL) (See instructions)		
Small Business Owner Self-Employed				
12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title		13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)15 Law firm of contribut		r's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of In-kind contribution	
12/01/2023	Gregson, J. Scott		contribution (\$) description \$250.00 I Office Rent	
	Contributor address; City; State; Zip Code		szsu.uuronice Rent I	
	San Marcos, TX 78666		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)			-JUDICIAL) (See instructions)	
Small Business Owner Self				
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description	
12/10/2023	L2/10/2023 Tenorio, Sam Contributor address; City; State; Zip Code		contribution (\$) description \$224.69 Supplies for Signs/installation	
	Buda, TX 78610		Check if travel outside of Texas. Complete Schedule T.	
		Employer (FOR NON	-JUDICIAL) (See instructions)	
Superintendent Seamless A		Seamless Advance	Advanced Solutions	
Contributor's principal occupation (FOR JUDICIAL) Cor		Contributor's job title	(FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a shild low firm of parent(a) (if any) (FOD 31 DICIAL)				
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 2/2 Rpt: 37/57								
2 FILER NAME			3 Filer ID (Ethics Commission Filers)								
	., E. Chevo (Mr.)		00087760								
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$								
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution								
12/10/2023	Tenorio, Sam		contribution (\$) description								
	7 Contributor address; City; State; Zip Code		\$22.67 I Supplies for Signs/installation								
	Buda, TX 78610		Check if travel outside of Texas. Complete Schedule T.								
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)								
Superintend	lent	Seamless Advance	ed Solutions								
· · ·	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)								
			(, · · · · · · · · · · · · · · · ·								
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)								
16 If contributor	16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)										
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of In-kind contribution								
12/10/2023	Tenorio, Sam		contribution (\$) description								
	Contributor address; City; State; Zip Code		\$34.98 i Supplies for								
			Signs/installation								
	Buda, TX 78610		I Check if travel outside of Texas. Complete Schedule T.								
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON									
Superintend	lent	Seamless Advance	ed Solutions								
· · ·	principal occupation (FOR JUDICIAL)	Contributor's job title									
			(, _ · · · <u>_ · · · · · · · · · · · · · · </u>								
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)								
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)										
Date	Full name of contributor out-of-state PAC (ID#:	١	Amount of In-kind contribution								
12/10/2023	Tenorio, Sam)	contribution (\$) description								
12/10/2020			\$161.16 Supplies for								
	Contributor address; City; State; Zip Code		Signs/installation								
			1								
	Puda TX 79610										
Drincipal area	Buda, TX 78610		Check if travel outside of Texas. Complete Schedule T.								
·	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	,								
Superintend		Seamless Advance									
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)								
Contributor		Low firm of anothic t									
Contributor's	employer/law firm (FOR JUDICIAL)	Law irm of contributo	r's spouse (if any) (FOR JUDICIAL)								
If contribute	is a shild low firm of paramt(s) (fam.) (FOD 1) (DIO(1))										
IT CONTRIBUTOR	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)										

	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 Imittee Legal Services The Instruction Guide expla	Office O Polling E Printing Salaries/	verhea xpens Expens Wage	se s/Contract Labor		Travel in District Travel Out of Distric	pment & Related Expense				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (E	Ethics Commission Filers)				
	Sch: 1/12 Rpt: 38/57		Pastrano Jr., E. Chevo (Mr.) 00087760										
4	Date	5	Payee name										
	09/01/2023		ATX Web Designs										
6	Amount (\$)	7	7 Payee address; City; State; Zip Code										
	\$5,000.00 11801 Domain Blvd. 3rd Fl.												
			Austin, TX 78758										
8	PURPOSE OF		Category (See Categories listed at the top of this	s schedule)	(b)	Description							
	EXPENDITURE		Advertising Expense					de of Texas. Complet officeholder living ex					
						Website desi		onicentitider inving ex	pende				
							5						
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held					
	Date		Payee name										
	12/31/2023		ActBlue										
	Amount (\$)		Payee address; City; Si	ate; Zip C	ode								
	\$449.87		PO Box 441146										
			Somervillle, MA 02144										
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of thi Accounting/Banking	s schedule)	(b)		, тх,	de of Texas. Complet officeholder living ex					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held					
	Date		Payee name										
	11/15/2023		Alfred Stanley & Associates										
	Amount (\$)		Payee address; City; Si	ate; Zip C	ode								
	\$3,000.00		PO Box 5674										
	DUDDOSE		Austin, TX 78763		(b)	Description							
	PURPOSE OF		Category (See Categories listed at the top of thi Consulting Expense	s schedule)	(0)	Description	outsi	de of Texas. Complet	te Schedule T.				
	EXPENDITURE		Consularly Expense				, тх,	officeholder living ex					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held					

	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 nmittee Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing E Salaries/V	erhead pense xpense Vages/	e '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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 2/12 Rpt: 39/57		Pastrano Jr., E. Chevo (Mr.)					00087760				
4	Date 10/23/2023	5	Payee name Amazon									
6	Amount (\$) \$9.73	\$9.73 410 Terry Ave. N. Seattle, WA 98109										
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Image: Check if Austin, TX, officeholder living expense Kick off decorations Check if Austin, TX, officeholder living expense Kick off decorations								officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				
	Date		Payee name									
	08/15/2023		Austin Labor Council									
	Amount (\$) \$289.79		Payee address; City; Star PO Box 87 Austin, TX 78767	te; Zip Co	ode							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Contributions/Donations Made By Candidate/Officeholder/Political Com					de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				
	Date		Payee name									
	10/13/2023		Casa Maria's									
	Amount (\$) \$2,397.70		Payee address; City; Sta 706 S. Guadalupe St	te; Zip Co	ode							
			San Marcos, TX 78666									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Event Expense	chedule)				de of Texas. Complete Schedule T. officeholder living expense				
ļ	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				

	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 Expen Imittee Legal Services The Instruction Guide 6		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)					
	Sch: 3/12 Rpt: 40/57		Pastrano Jr., E. Chevo (Mr.) 00087760										
4	Date 10/27/2023		Payee name Casa Maria's										
6	Amount (\$) \$1,923.11	7 Payee address; City; State; Zip Code 3.11 706 S. Guadalupe St San Marcos, TX 78666											
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Expense											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held					
	Date		Payee name										
	11/17/2023		Check Mark										
	Amount (\$)Payee address;City;State; Zip Code\$5,335.273217 N. IH 35												
	PURPOSE OF EXPENDITURE	(a)	Austin, TX 78722 Category (See Categories listed at the top Printing Expense	of this sch	edule)			de of Texas. Complete Schedule T. officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Office sou	ght		Office held					
	Date		Payee name										
	11/17/2023		Check Mark										
	Amount (\$) \$5,946.22		Payee address; City; 3217 N. IH 35	State;	Zip Co	de							
			Austin, TX 78722										
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Printing Expense	of this sch	edule)			de of Texas. Complete Schedule T. officeholder living expense					
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght		Office held					
					-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	se Expense	Loan Rep Office Ove Polling Ex Printing E Salaries/M	aymei erhead pense xpens Vages	ht/Reimbursement d/Rental Expense e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)		
	Sch: 4/12 Rpt: 41/57		Pastrano J	r., E. Chevo (Mr.))					00087760			
4	Date	5	Payee name										
	08/07/2023		Forbich & Associates										
6	Amount (\$)	7	Payee address; City; State; Zip Code										
	\$2,165.00		314 E. Con	nmerce St. #306		•							
			San Antoni	o, TX 78205									
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description													
-	OF	()	Advertising		ie top of this sch	iedule)	(~)		outsi	de of Texas. Com	plete Schedule T.		
	EXPENDITURE									officeholder living	g expense		
								Website desi	gn				
9	9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	Date		Payee name	ļ									
	08/31/2023		GoDaddy										
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	ode						
	\$52.32		2150 E. Wa	arner Rd.									
			Tempe, AZ	85284									
	PURPOSE	(a)	Category (S	ee Categories listed at th	ne top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Advertising			,		Check if travel	outsi	de of Texas. Com	plete Schedule T.		
	EXPENDITORE									officeholder living	g expense		
								Website host	ing				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	C	Office sou	ight			Office he	eld		
_													
	Date		Payee name										
	12/07/2023		Gonzales,										
	Amount (\$)		Payee addre		State	; Zip Co	bde						
	\$1,500.00		9301 Oak I	Hills Dr.									
			Temple, T>	(76502									
	PURPOSE OF	(a)		ee Categories listed at th	ne top of this sch	nedule)	(b)	Description					
	EXPENDITURE		Consulting	Expense						de of Texas. Com officeholder living	plete Schedule T.		
								Field consulti		onicenoider inving	j expense		
									чy				
-	Complete ONLY if direct	Ľ	Candidate/Off	iceholder name	(Office sou	l Iaht			Office he			
	expenditure to benefit C/OI			International Hallie	(5111CE 30U	gint			Unite In	Ju		
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	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	Expense	Office Ove Polling Exp Printing Ex Salaries/W	rhead/ pense pense (ages/0	Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers))
	Sch: 5/12 Rpt: 42/57		Pastrano Jr., E. Chevo (Mr.) 00087760									
4	Date	5	Payee name									
	12/29/2023		Gonzales, Kenith									
6	Amount (\$)	7 Payee address; City; State; Zip Code										
	\$1,500.00 9301 Oak Hills Dr.											
		Temple, TX 76502										
8	PURPOSE	(a)	Category (S	ee Categories listed at the	e top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Consulting		·	,	Į			de of Texas. Com		
							[officeholder living	expense	
								Field consulti	ng			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght			Office he	ld	
	Date		Payee name	ļ								
	11/02/2023		Google									
	Amount (\$)		Payee addre	ess; City;	State:	; Zip Co	de					
	\$22.77			nitheatre Parkway		, I						
	<i><i><i><i><i>ϕ<i><i><i><i><i><i><i><i><i><i><i><i><i></i></i></i></i></i></i></i></i></i></i></i></i></i></i></i></i></i></i>											
			Mountain V	/iew, CA 94043								
	PURPOSE OF	(a)		ee Categories listed at the	e top of this sch	edule)	(b) 	Description	outsio	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Advertising	Expense			ł			officeholder living		
							Ì	Website hosti	ing			
	Complete ONLY if direct	(Candidate/Off	iceholder name	0	Dffice sou	ght			Office he	ld	
	expenditure to benefit C/OI	Н					-					
-	Date		Payee name									—
	12/04/2023		Google									
			-	Qit v		7: 0	-1 -					
	Amount (\$)		Payee addre			; Zip Co	ae					
	\$30.70		1600 Ampr	hitheatre Parkway	,							
			Mountain V	'iew, CA 94043								
	PURPOSE	(a)	Category (S	ee Categories listed at the	e top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Advertising				[de of Texas. Com		
	EXPENDITORE						Į			officeholder living	expense	
							1	Website desig	gn			
	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ght			Office he	ld	
	expenditure to benefit C/OI	Η										

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Guid		Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	FILER	NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 6/12 Rpt: 43/57		no Jr., E. Chevo (Mr.)					00087760			
4	Date	Payee	name								
	08/14/2023	Hays (County Democratic Par	ty							
6	Amount (\$)	Payee	address; City;	State;	; Zip Cod	e					
	\$1,000.00	215 W	. San Antonio St.								
		San M	arcos, TX 78666								
8	PURPOSE	a) Catego	ry (See Categories listed at the	top of this sch	edule) (b) Description					
	OF EXPENDITURE	Contril	outions/Donations Mac	le By			outs	ide of Texas. Com	plete Schedule T.		
		Candio	late/Officeholder/Politi	cal Comm	ittee		ι, TX	, officeholder living	j expense		
						donation					
		Condida				b 4		Office he			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Canulua	e/Officeholder name	Ċ	Office soug	n		Office he	eiu		
⊨	Date	Davias	20220								
	11/29/2023	Payee Havs (County Democratic Pa	rtv.							
_			-	-	Zin Cod	0					
	Amount (\$)	-	address; City;	State,	; Zip Cod	е					
	\$750.00	212 00	. San Antonio St.								
		San M	arcos, TX 78666								
	PURPOSE OF	a) Catego	ry (See Categories listed at the	top of this sch	edule)	b) Description			alata Cabada la T		
	EXPENDITURE	Fees						ide of Texas. Com , officeholder living			
						Filing fee		-			
	Complete ONLY if direct	Candida	e/Officeholder name	C	Office soug	ht		Office he	eld		
	expenditure to benefit C/OI										
	Date	Payee	name								
	10/16/2023	Hays (County Tejano Dems								
	Amount (\$)	Payee	address; City;	State;	; Zip Cod	e					
	\$1,000.00	PO Bo	x 781								
		Buda,	TX 78610								
	PURPOSE OF		ry (See Categories listed at the		edule)	b) Description					
	EXPENDITURE		outions/Donations Mac date/Officeholder/Politi		ittoo			ide of Texas. Com , officeholder living			
		Canul		car Comm	littee	sponsorship	1, 1 A	, onicendider hving	l exhense		
						-1ik					
-	Complete ONLY if direct	Candida	e/Officeholder name	C	Office soug	ht		Office he	eld		
	expenditure to benefit C/OI				5						

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Imittee Legal Services The Instruction Guide ex		Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)					
	Sch: 7/12 Rpt: 44/57		Pastrano Jr., E. Chevo (Mr.)					00087760					
4	Date	5	Payee name										
	12/08/2023		LASR Signs										
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de							
	\$248.02		1109 S. Main										
			Lockhart, TX 78644										
8	PURPOSE	<u> </u>	Category (See Categories listed at the top o	6 41-1 h		(b) Description							
ľ	OF		Printing Expense	of this sche	edule)		outsi	ide of Texas. Complete Schedule T.					
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense					
						Printing							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office sou	ght		Office held					
	Date		Payee name										
	12/14/2023		Rush T-Shirt Printing										
_	Amount (\$)	-	Payee address; City;	State:	Zip Co	de							
	\$1,791.41		9777 Harwin Dr. #501	ouno,	p 00.								
			Houston, TX 77036										
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top o Printing Expense	of this sche	edule)			ide of Texas. Complete Schedule T. , officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C)ffice sou	ght		Office held					
	Date		Payee name										
	12/20/2023		Rush T-Shirt Printing										
	Amount (\$)		Payee address; City;	State.	Zip Co	de							
	\$1,791.40		9777 Harwin Dr. #501	otate,	210 000								
	φ1,701.40												
			Houston, TX 77036										
	PURPOSE OF	(a)	Category (See Categories listed at the top o	of this sche	edule)	(b) Description							
	EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T. , officeholder living expense					
-	Complete ONLY if direct		andidate/Officeholder name	C	Office sou	ght		Office held					
	expenditure to benefit C/OI					y -							
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	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 Exper	nse	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense xpense /ages/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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 8/12 Rpt: 45/57		Pastrano Jr., E. Chevo (Mr.)					00087760				
4	Date 12/03/2023	5	5 Payee name Sams Club									
6	6 Amount (\$) \$95.30 \$95.30 and Marcos, TX 78666 7 Payee address; City; State; Zip Code 1350 Leah Ave. San Marcos, TX 78666											
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if Check if Check if Check if Check if Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held				
	Date		Payee name									
	12/03/2023		Sams Club									
	Amount (\$) \$16.22		Payee address; City; 1350 Leah Ave.	State;	; Zip Co	de						
			San Marcos, TX 78666									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Event Expense	of this sch	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held				
	Date		Payee name									
	08/23/2023		Strother & Company									
	Amount (\$) \$4,500.00		Payee address; City; 120 Madisons Cv.	State;	; Zip Co	de						
			Buda, TX 78610									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Consulting Expense	of this sch	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense ulting				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Ever Fees Food Gift/ nmittee Lega	nt Expense	ense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursemen rhead/Rental Expense pense pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)			
	Sch: 9/12 Rpt: 46/57		Pastrano Jr., E. Chevo (Mr.) 00087760										
4	Date	5	Payee name										
	08/28/2023		Strother & Company										
6	Amount (\$)	7	Payee address; City; State; Zip Code										
	\$11,250.00 120 Madisons Cv.												
	Buda, TX 78610												
_													
8	PURPOSE OF	(a)	Category (See Ca		op of this sch	edule)	(b) Description		ide of Tourse Open	alata Oshadula T			
	EXPENDITURE		Consulting Exp	ense					ide of Texas. Com , officeholder living	•			
							Campaign			(expense			
							Campaign	00110	anng				
9	Complete ONLY if direct		Candidate/Officeh	oldor namo		Office sou	sht		Office he	bld			
9	expenditure to benefit C/OF		andidate/Onicen	older Hame		JIICE SOU	jin		Onice ne	eiu.			
	Date		Payee name										
	09/18/2023		Texas Democra	atic Party									
	Amount (\$)		Payee address;	City;	State [.]	; Zip Co	de						
	\$1,300.00		PO Box 15707	0.0),	etate,	, <u> </u>							
	φ1,500.00												
			Austin, TX 787	61									
	PURPOSE	(a)	Category (See Ca	ategories listed at the to	p of this sche	edule)	(b) Description						
	OF EXPENDITURE		Contributions/E						ide of Texas. Com				
			Candidate/Offic	ceholder/Politica	al Comm	ittee			, officeholder living	expense			
							Voter Data	l					
	Complete ONLY if direct		Candidate/Officeh	older name	C	Office sou	ght		Office he	eld			
	expenditure to benefit C/OI	-											
	Date		Payee name										
	08/14/2023		USPS										
-	Amount (\$)	-	Payee address;	City;	State [.]	; Zip Co	de						
	\$75.90		900 Bugg Lane		etate,	, <u> </u>							
	φr5.50		Soo Bugg Lune										
			San Marcos, T	X 78666									
_	DUDDOCE	(-)											
	PURPOSE OF	(a)	Category (See Ca		op of this sche	edule)	(b) Description	vol oute	ide of Texas. Com	nlata Schadula T			
	EXPENDITURE		Advertising Exp	bense					, officeholder living				
							Stamps		, enteenender intrig	, oxponed			
							_ topo						
-	Complete ONLY if direct	Ļ	Candidate/Officeh	older name	~	Office soug	t		Office he	ald			
	expenditure to benefit C/Oł		anuluale/Onicen	oluci naine	Ĺ		Jin		Onice he	5iu			
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	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	Office Ove Polling Ex Printing E Salaries/V	xpense Vages/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 F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)					
	Sch: 10/12 Rpt: 47/57		Pastrano Jr., E. Chevo (Mr.) 00087760									
4	Date 09/06/2023	5	Payee name Victory Cleaners									
6	Amount (\$) \$92.01	7 Payee address; City; State; Zip Code \$92.01 San Marcos, TX 78666										
8	PURPOSE OF EXPENDITURE	OF Drinting Expense										
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	Date		Payee name									
	10/17/2023		Wix.com									
	Amount (\$) \$36.80	Payee address; City; State; Zip Code 500 Terry A. Francois Blvd., 6th Floor San Francisco, CA 94158										
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sc Advertising Expense	hedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight		Office held					
	Date		Payee name									
	11/17/2023		Wix.com									
	Amount (\$) \$36.80		Payee address; City; State 500 Terry A. Francois Blvd., 6th Floor	e; Zip Co	ode							
			San Francisco, CA 94158									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sc Advertising Expense	hedule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight		Office held					

	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 exp	Office O Polling E Printing Salaries	verhea Expens Expen Wage	ise s/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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 11/12 Rpt: 48/57		Pastrano Jr., E. Chevo (Mr.)					00087760
4	Date	5	Payee name					
	12/18/2023		Wix.com					
6	Amount (\$)	7	Payee address; City; S	State; Zip C	ode			
	\$36.80		500 Terry A. Francois Blvd., 6th F	loor				
			San Francisco, CA 94158					
8	PURPOSE	(a)	Category (See Categories listed at the top of t	his schedule)	(b)	Description		
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.
						Website host		, officeholder living expense
							ing	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office so	ught			Office held
-	Date		Payee name					
	11/22/2023		Y Strategy					
				<u> </u>				
	Amount (\$)			State; Zip C	ode			
	\$4,500.00		3110 Manor Rd. Suite H					
			Austin, TX 78723					
	PURPOSE	(a)	Category (See Categories listed at the top of t	his schedule)	(b)	Description		
	OF EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T.
						Campaign co		, officeholder living expense
						Campaignee	/130	uning
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office held
	expenditure to benefit C/OI	H						
	Date		Payee name					
	12/20/2023		Y Strategy					
	Amount (\$)		Payee address; City; S	State; Zip C	ode			
	\$1,308.48		3110 Manor Rd. Suite H					
			Austin, TX 78723					
	PURPOSE	(a)	Category (See Categories listed at the top of the	his schedule)	(b)	Description		
	OF EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T.
	-						, TX,	, officeholder living expense
						Printing		
	Complete ONLY if direct	Ľ	Candidate/Officeholder name	Office so				Office held
	expenditure to benefit C/OI			Unice SU	agiit			

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 12/12 Rpt: 49/57	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Pastrano Jr., E. Chevo (Mr.) 00087760
4	Date 12/20/2023	5 Payee name Y Strategy
6	Amount (\$) \$4,500.00	7 Payee address; City; State; Zip Code 3110 Manor Rd. Suite H
		Austin, TX 78723
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign consulting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ex - Gift/Awards/Memorials Expense Printing E	Ayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense pense Travel in District ravel Qut of District Ages/Contract Labor OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 1/8 Rpt: 50/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760		
4	Date 12/01/2023	5 Payee name 118-120 N LBJ, LLC			
6	Amount (\$) \$3,500.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 120 W. Hopkins Ste. 200 San Marcos, TX 78666			
8	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 rent		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
F	Date	Payee name			
	11/10/2023	5D Farm and Feed			
	Amount (\$) \$247.50 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 519 S. Colorado St. Lockhart, TX 78644	de		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parade supples		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
	Date 07/26/2023	Payee name Capital Printing			
	Amount (\$) \$1,153.12	Payee address; City; State; Zip Co 4001 Caven Rd.	de		
	Reimbursement from political contributions intended	Austin, TX 78744			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense kpense Travel in District xpense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 2/8 Rpt: 51/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760		
4	Date 10/25/2023	5 Payee name Casa Maria			
6	Amount (\$) \$73.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 706 S. Guadalupe St San Marcos, TX 78666			
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 Volunteer Meals		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
	Date 12/26/2023	Payee name Christopher Paul Cardoza			
	Amount (\$) \$200.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1016 W. San Antonio St. San Marcos, TX 78666			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense photos		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
	Date 10/19/2023	Payee name Constant Contact			
	Amount (\$) \$815.64	Payee address; City; State; Zip Co 1601 Trapelo Road	ode		
	Reimbursement from political contributions intended	Waltham, MA 02451			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing B	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 3/8 Rpt: 52/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760			
4 Date 12/30/2023	5 Payee name Garcias				
6 Amount (\$) \$35.99 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 575 FM 150 East Ste. A Kyle, TX 78640				
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 campaign meeting			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 09/11/2023	Payee name Jalisco's				
Amount (\$) \$80.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 6601 S. Congress Ave. Austin, TX 78645	ode			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign meeting			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 10/16/2023	Payee name LASR Signs				
Amount (\$) \$564.91	Payee address; City; State; Zip Co 1109 S. Main	ode			
X Reimbursement from political contributions intended	Lockhart, TX 78644				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printin	epayment/Reimbursement Dverhead/Rental Expense Expense J Expense s/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: Sch: 4/8 Rpt: 53/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		Filer ID (Ethics Commission Filers) 00087760		
4 Date 10/23/2023	5 Payee name LASR Signs				
6 Amount (\$) \$90.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1109 S. Main Lockhart, TX 78644				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 11/30/2023	Payee name Lowe's				
Amount (\$) \$230.10 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2211 IH 35 South San Marcos, TX 78666				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 10/24/2023	Payee name Office Depot				
Amount (\$) \$33.22	Payee address; City; State; Zip 201 Springtown Way	Code			
Reimbursement from political contributions intended	San Marcos, TX 78666				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		neck if travel outside of Texas. Complete Schedule T.		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense opense Travel in District xpense Travel Out of District Vages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 5/8 Rpt: 54/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760		
4 Date 12/15/2023	5 Payee name Office Depot			
6 Amount (\$) \$92.46 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 201 Springtown Way San Marcos, TX 78666			
8 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 Office Supplies		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
09/01/2023	Ruud, Steven			
Amount (\$) \$175.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense photos		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
12/18/2023	Saltgrass Steakhouse			
Amount (\$) \$151.00	Payee address; City; State; Zip Co 1141 N. I 35	ode		
X Reimbursement from political contributions intended	San Marcos, TX 78666			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign meeting		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E /- Gift/Awards/Memorials Expense Printing E	oayment/Reimbursement erhead/Rental Expense kpense xpense 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: Sch: 6/8 Rpt: 55/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3	B Filer ID (Ethics Commission Filers) 00087760	
4 Date 12/21/2023	5 Payee name Saltgrass Steakhouse	ľ		
6 Amount (\$) \$81.24 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1141 N. I 35 San Marcos, TX 78666			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date 10/04/2023	Payee name Serrano's			
Amount (\$) \$90.77 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 9500 S. IH 35 Frontage Rd. Austin, TX 78748	ode		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date 10/04/2023	Payee name T-Mobile			
Amount (\$) \$56.25	Payee address; City; State; Zip Co 12920 SE 38th Street	ode		
Reimbursement from political contributions intended	Bellevue, WA 98006			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E by - Gift/Awards/Memorials Expense Printing F	ayment/Reimbursement erhead/Rental Expense xpense xpense Vages/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: Sch: 7/8 Rpt: 56/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		Filer ID (Ethics Commission Filers) 00087760		
4 Date 11/04/2023	5 Payee name T-Mobile				
6 Amount (\$) \$56.25	7 Payee address; City; State; Zip Code 12920 SE 38th Street Bellevue, WA 98006				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 12/04/2023	Payee name T-Mobile				
Amount (\$) \$56.25	Payee address; City; State; Zip C 12920 SE 38th Street Bellevue, WA 98006	ode			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 12/15/2023	Payee name The Texas Pie Company				
Amount (\$) \$44.05	Payee address; City; State; Zip City; 202 W. Center Street	ode			
X Reimbursement from political contributions intended	Kyle, TX 78640				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	bayment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 8/8 Rpt: 57/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760		
4 Date	5 Payee name			
08/02/2023	USPS			
6 Amount (\$) \$26.40	7 Payee address; City; State; Zip Code 900 Bugg Lane, Suite 110A			
X Reimbursement from political contributions intended	San Marcos, TX 78666			
8 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.		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
11/10/2023	Walmart			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$106.09				
Reimbursement from political contributions intended	San Marcos, TX 78666			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
12/29/2023	Walmart			
Amount (\$) \$5.27	Payee address;City;State;Zip C1904 S. Colorado St.	ode		
X Reimbursement from political contributions intended	Lockhart, TX 78644			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		