

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00087760	2 Total pages filed: 57	OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST E. Chevo	MI MI
	NICKNAME	LAST Pastrano	SUFFIX Jr.
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit _____	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)	
5 ORIGINAL PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023
Date Received ELECTRONICALLY FILED 01/16/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged			

6 EXPLANATION OF CORRECTION
 We deleted a duplicate entry and added an entry that was missed. We also had the wrong name on an expenditure.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

 Mr. E. Chevo Pastrano Jr.
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087760	2 Total pages filed: 57	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST E. Chevo	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2024
	NICKNAME	LAST Pastrano	SUFFIX Jr.	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 2587 Kyle, TX 78640		ZIP CODE	Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Shea Seale	MI	
	NICKNAME	LAST Jones	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); PO Box 2587 Kyle, TX 78640		APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 468-4279	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 45	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

3 of 57

13 C / OH NAME Pastrano Jr., E. Chevo (Mr.)	14 Filer ID (Ethics Commission Filers) 00087760
--	---

15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	35,368.15
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	71,916.13
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	14,885.29
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. E. Chevo Pastrano Jr.
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Pastrano Jr., E. Chevo (Mr.)	19 Filer ID (Ethics Commission Filers) 00087760
--	---

20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 33,670.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,698.15
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 63,951.62
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 7,964.51
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/31 Rpt: 5/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Charles <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78667	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) Self
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo, Albert <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo, Cynthia <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sr Business Coordinator		Employer (See Instructions) Lower Colorado River Authority
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo, Frank <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo, Lupe <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/31 Rpt: 6/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avalos, Chris <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) All Makes Collision
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avalos, Christopher <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) All Makes Automotive
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avalos, Michael <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Truck Driver		Employer (See Instructions) A.R.A. Transportation
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Baird Farrelly Criminal Defense
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Brian <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78667	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/31 Rpt: 7/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 09/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barba, Leon	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Buda, TX 78610	
8 Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions) City of Kyle
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barba, Leon	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Buda, TX 78610	
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) City of Kyle
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoist Templeton, Cassandra	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Driftwood, TX 78619	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Caldwell County
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergen, David	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Spring, TX 77386	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Buzbee Law Firm
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biersdorfer, Justin	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Marcos, TX 78666	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Come And Plumb It

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/31 Rpt: 8/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boling, Anna <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) The Boling Law Firm PLLC
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Leslie <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office Of Leslie J. Boykin
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jerome <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Brown Law Firm
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campise, Charles <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Uber
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Elaine <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Hays County TX

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 ID (Ethics Commission Filers) 00087760
4 Date 11/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castilleja, Domingo <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castilleja, Frank <hr/> Contributor address; City; State; Zip Code Maxwell, TX 78656	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castilleja, Julia <hr/> Contributor address; City; State; Zip Code Maxwell, TX 78656	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Evangelina <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Christina <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Grant Coordinator		Employer (See Instructions) Texas State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/31 Rpt: 11/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullom, Jacqueline <hr/> 6 Contributor address; City; State; Zip Code Seguin, TX 78155	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) City of San Marcos
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullom, Jacqueline <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) City of Alexandria
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Monica <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Glow Laser and Beauty
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Ruben <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Texas Education Agency
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietz, Elly Del <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Del Prado Dietz PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/31 Rpt: 12/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 07/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbins, Liz <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78667	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbins, Lizbeth <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78667	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Larry <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engels, Melanie <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-4584	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Customer Service Rep		Employer (See Instructions) City of Dripping Springs - Ranch Park
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Claudia <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Customer Service Manager		Employer (See Instructions) Texas Department of Licensing and Regulation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/31 Rpt: 13/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Jose	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Luling, TX 78648		
8 Principal occupation / Job title (See Instructions) Field tech		9 Employer (See Instructions) Bobwhite
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Martin	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etheredge, Mary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fahy, Nancy	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Alta	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Buda, TX 78610		
Principal occupation / Job title (See Instructions) Monitor		Employer (See Instructions) Hays CISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/31 Rpt: 14/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Mario <hr/> 6 Contributor address; City; State; Zip Code Lockhart, TX 78644	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Rachel <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Heart to Heart
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Rachel <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Heart to Heart
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Sylvia <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friesenhahn, Vincent <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/31 Rpt: 15/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes, Francisco <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Chairman		9 Employer (See Instructions) US Hispanic Contractors Association
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Belinda <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Aveanna
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Carolina <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Vice president		Employer (See Instructions) Big Robs Burgers
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Jesse <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Staff Attorney		Employer (See Instructions) NDS
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Lisa <hr/> Contributor address; City; State; Zip Code Maxwell, TX 78656	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Respiratory Therapist/Case Manager		Employer (See Instructions) PAM Rehabilitation and Specialty Hospital of Luling

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/31 Rpt: 17/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 09/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Diana F <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666-5178	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Texas State University		9 Employer (See Instructions) Director of Communications ALERRT
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennigan, Shanna M <hr/> Contributor address; City; State; Zip Code Houston, TX 77230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Legal Consultant		Employer (See Instructions) Shanna M Hennigan
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Angela <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Angela <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Angela <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/31 Rpt: 18/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Angela <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, George <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hipolito, Shawn <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Kyrish
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jansen, Dena <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Tanisha <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) A&P Quality Care Medical

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/31 Rpt: 19/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalahurka, Steph <hr/> 6 Contributor address; City; State; Zip Code Kansas City, MO 64113	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Fenimore Kay
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karowalia, Asifali <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Self employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilpatrick, Crystal <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Lila <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longoria, Naomi <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Bookkeeper/Office Manager		Employer (See Instructions) Sergi & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/31 Rpt: 20/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Benjamin <hr/> 6 Contributor address; City; State; Zip Code Luling, TX 78648	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Drilling		9 Employer (See Instructions) Helmerich & Payne
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, David <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Concrete Construction		Employer (See Instructions) David
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Richard <hr/> Contributor address; City; State; Zip Code Lockhart, TX 78644	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Worker		Employer (See Instructions) Hays County
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magnesio, Joe <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COMPANY OWNER		Employer (See Instructions) WINSUPPLY INC.
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Brandy <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) HHSC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/31 Rpt: 22/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 07/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNabb, Billy <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78132	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law firm
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNutt, Jacqueline <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) McNutt Law Firm
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, David M. <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Chamberlain Hrdlicka
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Irene <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Jeffrey <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/31 Rpt: 23/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 09/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Kathy <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Joe <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Texas State University
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Najera, Raquel <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez Law Group PC <hr/> Contributor address; City; State; Zip Code Eagle Pass, TX 78852	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Law firm		Employer (See Instructions) Law firm
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padron, Mary <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/31 Rpt: 24/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palacios, Antonio <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Small business owner		9 Employer (See Instructions) Small business owner
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrano, Anna <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Area Specialist		Employer (See Instructions) CFAN company
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrano, Anna <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Area Specialist		Employer (See Instructions) Cfan
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrano, Charles <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78237	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Charles Pastrano
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrano, Eusebio <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/31 Rpt: 25/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrano, Eusebio <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrano, Jose <hr/> Contributor address; City; State; Zip Code Rockdale, TX 76567	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Welder		Employer (See Instructions) Bulldog Welding LLC
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrano, Pedro <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78222	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Pedro Pastrano
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Rosie <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Centro Cultural Hispano
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peralez, Joe <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Plumbers & Pipefitters Local 286

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/31 Rpt: 26/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peralez, Rene	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Kyle, TX 78640	
8 Principal occupation / Job title (See Instructions) Pipefitter		9 Employer (See Instructions) Local Union 286
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Michael	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Buda, TX 78610	
Principal occupation / Job title (See Instructions) Regional Manager		Employer (See Instructions) Sun Auto Group
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Mitchell	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Mountain City, TX 78610	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado III, Roque	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code San Marcos, TX 78666	
Principal occupation / Job title (See Instructions) Service Manager		Employer (See Instructions) Cavender Cadillac
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pulpan, Kelli	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) Coordinator		Employer (See Instructions) Hays County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/31 Rpt: 27/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 09/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Rosanna	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code San Marcos, TX 78666		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Rosanna	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code San Marcos, TX 78666		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rendon, Maryalice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lockhart, TX 78644		
Principal occupation / Job title (See Instructions) Truck Driver		Employer (See Instructions) Rendon Trucking
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Rose	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Production associate		Employer (See Instructions) Cfan
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Rose	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Production associate		Employer (See Instructions) C-fan

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/31 Rpt: 28/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 10/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert C Hilliard LLP <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78401	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, John <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Small Business Owner		Employer (See Instructions) Self-Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, John <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Small Business Owner		Employer (See Instructions) Self-Employed
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Linda A. <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired judge subject to assignment		Employer (See Instructions) Self
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Routon, Tracy <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Tracy Routon

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/31 Rpt: 29/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 10/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Sylvia	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code San Marcos, TX 78666		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saucedo, Andy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Conductor		Employer (See Instructions) Amtrak
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scopas, Mary	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Universal City, TX 78148		
Principal occupation / Job title (See Instructions) Court Reporter		Employer (See Instructions) Bexar County
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scopas, Mary	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Universal City, TX 78148		
Principal occupation / Job title (See Instructions) Court Reporter		Employer (See Instructions) Bexar County
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scopas, Mary	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Universal City, TX 78148		
Principal occupation / Job title (See Instructions) Court reporter		Employer (See Instructions) Bexar

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/31 Rpt: 30/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sergi, David	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code San Marcos, TX 78666		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Serna, Lydia	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Small business owner
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Serrano, Eddie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Martindale, TX 78655		
Principal occupation / Job title (See Instructions) Logistics		Employer (See Instructions) ARA Transportation
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Carl	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Shaw Law
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Carl	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Shaw Law

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/31 Rpt: 31/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 10/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Carl <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Shaw Law
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton, Ryan <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) Edmundson Shelton Weiss PLLC
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sierra, Johnny <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Johnny Sierra
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Beth <hr/> Contributor address; City; State; Zip Code Mountain City, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) judge		Employer (See Instructions) Hays County
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Lilly <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Purchaser III		Employer (See Instructions) Tx Dept of Ins

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/31 Rpt: 32/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 10/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soyars Windham Hayes, Jodi	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78232		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Soyars & Morgan Law, PC
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tello, Laurie	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code Martindale, TX 78655-3826		
Principal occupation / Job title (See Instructions) Research Clerk		Employer (See Instructions) TDI
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenorio, Daphne	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenorio, Sam	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Buda, TX 78610		
Principal occupation / Job title (See Instructions) Superintendent		Employer (See Instructions) Seamless Advanced Solutions
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenorio, Sam	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Buda, TX 78610		
Principal occupation / Job title (See Instructions) Superintendent		Employer (See Instructions) Seamless Advanced Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/31 Rpt: 33/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Donny <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Deputy Constable		9 Employer (See Instructions) Hays County
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Juan <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Austin ISD
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, Greg <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Mgr		Employer (See Instructions) Frontier
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villalpando, Catalina <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/31 Rpt: 34/57
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ben <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo, Paul <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Hamilton Wingo
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winzer, Lisa <hr/> Contributor address; City; State; Zip Code Little Elm, TX 75068	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuniga, Miguel <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Principal Scientist		Employer (See Instructions) Luminex
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuniga, Miguel <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Luminex

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
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) zayas, Cary <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78132	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Public Information Officer		9 Employer (See Instructions) Comal County, Texas

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 36/57	
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/15/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borrego, Henry	8 Amount of contribution (\$) \$1,004.65	9 In-kind contribution description Trailer Logo Wrap and Installation
	7 Contributor address; City; State; Zip Code Kyle, TX 78640	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Small Business Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Self-Employed	
12 Contributor's 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 contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregson, J. Scott	Amount of contribution (\$) \$250.00	In-kind contribution description Office Rent
	Contributor address; City; State; Zip Code San Marcos, TX 78666	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Small Business Owner		Employer (FOR NON-JUDICIAL) (See instructions) 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 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenorio, Sam	Amount of contribution (\$) \$224.69	In-kind contribution description Supplies for Signs/installation
	Contributor address; City; State; Zip Code Buda, TX 78610	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Superintendent		Employer (FOR NON-JUDICIAL) (See instructions) Seamless Advanced Solutions	
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)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 37/57	
2 FILER NAME Pastrano Jr., E. Chevo (Mr.)		3 Filer ID (Ethics Commission Filers) 00087760	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/10/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenorio, Sam	8 Amount of contribution (\$) \$22.67	9 In-kind contribution description Supplies for Signs/installation
	7 Contributor address; City; State; Zip Code Buda, TX 78610	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Superintendent		11 Employer (FOR NON-JUDICIAL) (See instructions) Seamless Advanced Solutions	
12 Contributor's 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 contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenorio, Sam	Amount of contribution (\$) \$34.98	In-kind contribution description Supplies for Signs/installation
	Contributor address; City; State; Zip Code Buda, TX 78610	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Superintendent		Employer (FOR NON-JUDICIAL) (See instructions) Seamless Advanced Solutions	
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 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenorio, Sam	Amount of contribution (\$) \$161.16	In-kind contribution description Supplies for Signs/installation
	Contributor address; City; State; Zip Code Buda, TX 78610	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Superintendent		Employer (FOR NON-JUDICIAL) (See instructions) Seamless Advanced Solutions	
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)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/12 Rpt: 38/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 09/01/2023	5 Payee name ATX Web Designs	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 11801 Domain Blvd. 3rd Fl. Austin, TX 78758	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website design
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2023	Payee name ActBlue	
Amount (\$) \$449.87	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Alfred Stanley & Associates	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code PO Box 5674 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 2/12 Rpt: 39/57	2	FILER NAME Pastrano Jr., E. Chevo (Mr.)	3	Filer ID (Ethics Commission Filers) 00087760	
4	Date 10/23/2023	5	Payee name Amazon			
6	Amount (\$) \$9.73	7	Payee address; City; State; Zip Code 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kick off decorations			
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held				
	Date 08/15/2023		Payee name Austin Labor Council			
	Amount (\$) \$289.79		Payee address; City; State; Zip Code PO Box 87 Austin, TX 78767			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held				
	Date 10/13/2023		Payee name Casa Maria's			
	Amount (\$) \$2,397.70		Payee address; City; State; Zip Code 706 S. Guadalupe St San Marcos, TX 78666			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kick off party			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/12 Rpt: 40/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 10/27/2023	5 Payee name Casa Maria's	
6 Amount (\$) \$1,923.11	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) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2023	Payee name Check Mark	
Amount (\$) \$5,335.27	Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2023	Payee name Check Mark	
Amount (\$) \$5,946.22	Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/12 Rpt: 41/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 08/07/2023	5 Payee name Forbich & Associates	
6 Amount (\$) \$2,165.00	7 Payee address; City; State; Zip Code 314 E. Commerce St. #306 San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website design
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name GoDaddy	
Amount (\$) \$52.32	Payee address; City; State; Zip Code 2150 E. Warner Rd. Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/07/2023	Payee name Gonzales, Kenith	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 9301 Oak Hills Dr. Temple, TX 76502	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/12 Rpt: 42/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/29/2023	5 Payee name Gonzales, Kenith	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 9301 Oak Hills Dr. Temple, TX 76502	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2023	Payee name Google	
Amount (\$) \$22.77	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Google	
Amount (\$) \$30.70	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website design
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/12 Rpt: 43/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
---	---	--

4 Date 08/14/2023	5 Payee name Hays County Democratic Party
-----------------------------	---

6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 215 W. San Antonio St. San Marcos, TX 78666
------------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
---------------------------------	---	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 11/29/2023	Payee name Hays County Democratic Party
--------------------	--

Amount (\$) \$750.00	Payee address; City; State; Zip Code 215 W. San Antonio St. San Marcos, TX 78666
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 10/16/2023	Payee name Hays County Tejano Dems
--------------------	---------------------------------------

Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 781 Buda, TX 78610
---------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--	--	--

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/12 Rpt: 44/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/08/2023	5 Payee name LASR Signs	
6 Amount (\$) \$248.02	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	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name Rush T-Shirt Printing	
Amount (\$) \$1,791.41	Payee address; City; State; Zip Code 9777 Harwin Dr. #501 Houston, TX 77036	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2023	Payee name Rush T-Shirt Printing	
Amount (\$) \$1,791.40	Payee address; City; State; Zip Code 9777 Harwin Dr. #501 Houston, TX 77036	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/12 Rpt: 45/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/03/2023	5 Payee name Sams Club	
6 Amount (\$) \$95.30	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) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2023	Payee name Sams Club	
Amount (\$) \$16.22	Payee address; City; State; Zip Code 1350 Leah Ave. San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2023	Payee name Strother & Company	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 120 Madisons Cv. Buda, TX 78610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/12 Rpt: 46/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 08/28/2023	5 Payee name Strother & Company	
6 Amount (\$) \$11,250.00	7 Payee address; City; State; Zip Code 120 Madisons Cv. Buda, TX 78610	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2023	Payee name Texas Democratic Party	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter Data
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name USPS	
Amount (\$) \$75.90	Payee address; City; State; Zip Code 900 Bugg Lane, Suite 110A San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/12 Rpt: 47/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
--	---	--

4 Date 09/06/2023	5 Payee name Victory Cleaners
-----------------------------	---

6 Amount (\$) \$92.01	7 Payee address; City; State; Zip Code 418 S. LBJ Dr. San Marcos, TX 78666
---------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Logo embroidery
---------------------------------	---	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 10/17/2023	Payee name 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 schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website hosting
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 11/17/2023	Payee name 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 schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website hosting
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/12 Rpt: 48/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/18/2023	5 Payee name Wix.com	
6 Amount (\$) \$36.80	7 Payee address; City; State; Zip Code 500 Terry A. Francois Blvd., 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2023	Payee name Y Strategy	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 3110 Manor Rd. Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2023	Payee name Y Strategy	
Amount (\$) \$1,308.48	Payee address; City; State; Zip Code 3110 Manor Rd. Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/12 Rpt: 49/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 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) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting
9 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	
Date 11/10/2023	Payee name 5D Farm and Feed	
Amount (\$) \$247.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 519 S. Colorado St. Lockhart, TX 78644	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade supplies
	9 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 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4001 Caven Rd. Austin, TX 78744	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
	9 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer Meals
9 Complete ONLY 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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense photos
Complete ONLY 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 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign meeting
9 Complete ONLY 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 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 6601 S. Congress Ave. Austin, TX 78645	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meeting
Complete ONLY 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 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1109 S. Main Lockhart, TX 78644	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/8 Rpt: 53/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 10/23/2023	5 Payee name LASR Signs	
6 Amount (\$) \$90.00 <input checked="" type="checkbox"/> 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	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
9 Complete ONLY 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 <input checked="" type="checkbox"/> 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	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY 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 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 201 Springtown Way San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2023	Payee name Ruud, Steven	
Amount (\$) \$175.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4711 Spicewood Springs Rd. Unit 261 Austin, TX 78759	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense photos
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Saltgrass Steakhouse	
Amount (\$) \$151.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1141 N. I 35 San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 6/8 Rpt: 55/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 12/21/2023	5 Payee name Saltgrass Steakhouse	
6 Amount (\$) \$81.24 <input checked="" type="checkbox"/> 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	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meeting
9 Complete ONLY 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 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9500 S. IH 35 Frontage Rd. Austin, TX 78748	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meeting
Complete ONLY 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 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 12920 SE 38th Street Bellevue, WA 98006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Phone
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 7/8 Rpt: 56/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 11/04/2023	5 Payee name T-Mobile	
6 Amount (\$) \$56.25 <input type="checkbox"/> Reimbursement from political contributions intended	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	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Phone
	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 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 12920 SE 38th Street Bellevue, WA 98006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Phone
	Complete ONLY 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 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 202 W. Center Street Kyle, TX 78640	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer lunch
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 8/8 Rpt: 57/57	2 FILER NAME Pastrano Jr., E. Chevo (Mr.)	3 Filer ID (Ethics Commission Filers) 00087760
4 Date 08/02/2023	5 Payee name USPS	
6 Amount (\$) \$26.40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 900 Bugg Lane, Suite 110A 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/10/2023	Payee name Walmart	
Amount (\$) \$106.09 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1015 Highway 80 San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV for door prize
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/29/2023	Payee name Walmart	
Amount (\$) \$5.27 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1904 S. Colorado St. Lockhart, TX 78644	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	