CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Eth 00067768	ics Commission Filers)	 Total pages filed 67 	1:	_		OFFICE US	SEONLY
3	CANDIDATE /	MS / MRS / MR	FIRST			MI		
	OFFICEHOLDER NAME	The Honorable	Emilio F.			WII	ELECTRONICAL 01/17/2024	LY FILED
		NICKNAME	LAST			SUFFIX		
		Mano	DeAyala				Date Hand-delivered or D	Date Postmarked
4	ORIGINAL REPORT TYPE	X January 15 July 15	Runoff	od roporting lim	Other (sp	pecify)	Receipt #	Amount
		30th day before election	15th day after ca	mpaign treasur				Amount
		8th day before election	appointment (offi				Date Processed	
5	ORIGINAL PERIOD COVERED	Month Day Yea		Month	Day	Year	Date Imaged	
		07/01/2023	THROUGH	12/	31/2023			
6	EXPLANATION OF C	o correct an input keying err	or for the balance of	loan principa	l to 60K. Th	ne original repo	rt filed reflected 40K	due to human error.
7	AFFIDAVIT							
				swear, or affin nd correct.	m, under pe	enalty of perjury	/, that this corrected I	report is true
			C	heck the box	next to any	and all applica	ble statements:	
			×	was made	e in good fa	ith and without	affirm that the origina an intent to mislead ned in the report.	
				report not that the re swear, or	later than t port as orig	he 14th busine ginally filed is in any error or on	that I am filing this c ss day after the date haccurate or incomple nission in the report a	l learned ete. l
					The H	onorable Emi	lio F. DeAyala	
			—				e or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE						
		ribed before me, by the said					he	day
	Signature of offic	er administering oath	Printed name of	officer admin	istering oat	h -	Title of officer admini	stering 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 co	mplete this form.	1 Filer ID (Ethics Commiss 00067768	sion Filers)	2 Total pages f	ïled: 67
3 CANDIDATE /	MS / MRS / MR	FIRST	·	MI	OFFICE	USE ONLY
OFFICEHOLDER	The Honorable	Emilio F.				
NAME					Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/17/2024	
	Mano	DeAyala				
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #: CI	ITY:	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER	12335 Kingsride Lane		,			
MAILING ADDRESS					Receipt #	Amount
Change of Address	Houston, TX 77024				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME		Mike				
INAIVIE						
	NICKNAME	LAST		SUFFIX		
		Moody		00111/		
		Woody				
6 CAMPAIGN TREASURER	STREET ADDRESS (NC		; APT	/ SUITE #; CITY;	51	ATE; ZIP CODE
ADDRESS	23033 Grand Circle Bl	vd Suite 200				
(Residence or Business)						
	Katy, TX 77449					
7 CAMPAIGN TREASURER		HONE NUMBER	EXTENSION			
PHONE	(713) 346-0182					
8 REPORT TYPE						
	X January 15	30th day befo		Runoff	appointment (of	ampaign treasurer ficeholder only)
	July 15	8th day before	e election	Exceeded modified	Final Report (At	
				reporting limit	_	
9 PERIOD	Month Day Ye	ar		Month Day	Year	
COVERED	07/01/2023		HROUGH	12/31/202		
10 ELECTION	ELECTION DAT	=		ELECTION TYPE		
			Primary	Runoff	Other	
	03/05/2024					
			General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	State Representative	District 133		State Represent	ative District 133	3
		60	TO PAGE 2			
		60	IU FAGE Z			
Forms provided by Te	exas Ethics Commission	www.e	ethics.state.tx.us		Ver	sion V3.5.1.0bfcfb67

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 3 of 67

13 C / OH NAME	14 Filer ID (E 00067768	Ethics Commission Filers)							
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without the officeholders are required to report this information	he candidate's or officel	nolder's knowledge or					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	X GENERAL	Texas Alliance for LIfe PAC							
		COMMITTEE ADDRESS							
	SPECIFIC	8000 Centre Park Drive Suite 380							
		Austin, TX 78754							
		Shaw, James							
		COMMITTEE CAMPAIGN TREASURER ADDRES	S						
		4505 Corazon Cove							
		Round Rock, TX 78681							
16 CONTRIBUTION TOTALS1.TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)\$\$									
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 279,154.99					
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 238,176.70					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 174,413.92					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS (TING PERIOD	OF THE LAST DAY	\$ 60,000.00					
17 AFFIDAVIT									
		l swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.							
		The Honora	able Emilio F. DeAya	la					
		Signature of	Candidate or Officehold	er					
AFFIX NOT	TARY STAMP / SEAL AB	DVE							
Sworn to and subso	ribad bafara ma by tha s	aid	this the	day					
		aid ertify which, witness my hand and seal of office.	, ulis ule	uay					
Signature of offic	cer administering	Printed name of officer administering	Title of officer	administering oath					
Forms provided by Tex	xas Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.0bfcfb67					

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 4 of 67 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00067768 DeAyala, Emilio F. (The Honorable) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 237,500.60 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 41,654.39 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. X SCHEDULE E: LOANS \$ 10,000.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 238,176.70 \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

_							
	The Instru	ction Guide explains how to complete t	his fo	rm.	1	Total pages Schedule A1: Sch: 1/25 Rpt: 5/67	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		nilio F. (The Honorable)				00067768	,
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7	Amount of Contribution (\$)	
	10/20/2023	Abney, Will					\$1,000.00
		6 Contributor address; City; State; Zip Code			1		
		Houston, TX 77024					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Executive			Plains All American			
	Date	Full name of contributor 🔲 out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	10/04/2023	Alford, Joan					\$100.00
		Contributor address; City; State; Zip Code			1		
		Houston, TX 77024					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor 🔲 out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	09/13/2023	Anderson, Catherine					\$520.51
		Contributor address; City; State; Zip Code			1		
		Houston, TX 77042					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor 🔲 out-of-state PAC	·			Amount of Contribution (\$)	
	12/30/2023	Associated General Contractors - Texas B					\$1,000.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
					_		
	Date	Full name of contributor 🗌 out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	08/25/2023	Baum, Alan					\$25.00
		Contributor address; City; State; Zip Code					
⊢	Duin sin 1	Houston, TX 77057		Freedom (Co. 1. 1. 1.	Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
⊢	Retired			Retired			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/25 Rpt: 6/67	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
ľ		nilio F. (The Honorable)		ľ	00067768	5111 11013)
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/03/2023	Bechtol, Carter				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77024				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Investments		Roan Residential			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/09/2023	Beer Alliance of Texas)			\$1,000.00
	12/03/2023					φ1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/23/2023	Birdwell, Steven				\$1,041.02
		Contributor address; City; State; Zip Code				
		Houston, TX 77024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	CEO		Iron Horse Terminals LL			
	CLO					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/03/2023	Breed, J. Carter				\$1,041.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77055				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Real Estate		NewTrust Real Estate			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u>	Г	Amount of Contribution (\$)	
	11/15/2023	Brown, Susan W.)			\$200.00
	11/13/2023					φ200.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77024				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Comptroller		Alsoft			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/25 Rpt: 7/67	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		nilio F. (The Honorable)			00067768	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/20/2023	Brown Jr., Harvey G.				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77024				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Attorney		Lanier Law Firm			
	Date	Full name of contributor out-of-state PAC (ID#:	·)	Γ	Amount of Contribution (\$)	
	12/30/2023	Buckley, Brad				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Salado, TX 76571				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Veterinarian		Self			
_	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	11/07/2023	Burkett, Sheree)			\$20.82
	11/01/2023					Ψ20.02
		Contributor address; City; State; Zip Code				
		Houston, TX 77079				
-	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Retired		Retired	5)		
				<u> </u>		
	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	#00.00
	11/07/2023	Burkett, Sheree				\$20.82
		Contributor address; City; State; Zip Code				
		Houston TX 77070				
	Deine in all a servi	Houston, TX 77079	England (Or a last motion			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	S)		
	Relifeu		Relifed	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/21/2023	Burrow, Harry				\$520.51
		Contributor address; City; State; Zip Code				
		Houston, TX 77027				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
			•			

				-		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/25 Rpt: 8/67	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		ilio F. (The Honorable)			00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/20/2023	Bybee, Dean Bigby				\$50.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77024				
-	Dringing ogg	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
°	Best efforts		Best efforts	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/11/2023	Calpine Corporation PAC				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
				-,		
	Data			<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	+050 00
	10/04/2023	Cammack & Strong P.C.				\$250.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	10/20/2023	Clay III, Albert W.	/			\$500.00
	10/20/2023	-				Ψ300.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77057				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	10/16/2023	Clinton, Dan)			\$250.00
	10/10/2023					φ200.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77057				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Retired		Retired			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/25 Rpt: 9/67	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
	DeAyala, Err	nilio F. (The Honorable)			00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	12/09/2023	Cokinos, Gregory				\$2,602.54
	ļ	6 Contributor address; City; State; Zip Code		"		
	ļ	1				
		Houston, TX 77024	9 Employer (See Instructions			
	Principal occu Attorney	pation / Job title (See Instructions)	s)			
	Date	Full name of contributor out-of-state PAC (ID#)	Ī	Amount of Contribution (\$)	_
	12/19/2023	Comiskey, Frank				\$500.00
	ļ	Contributor address; City; State; Zip Code	·····	1		
	ļ	1				
	ļ	1				
		Houston, TX 77257				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
L	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	T	Amount of Contribution (\$)	
	10/04/2023	Conner, Matthew				\$250.00
	ļ	Contributor address; City; State; Zip Code]		
	ļ	1				
	ļ	0. TY 77422				
⊢	Drineipal again	Cypress, TX 77433	Employer (Cool potructions			
	Best efforts	pation / Job title (See Instructions)	Employer (See Instructions Best efforts	5)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#	e:)		Amount of Contribution (\$)	* 250.00
	11/20/2023	Cuenod, Ronald P.				\$250.00
	ļ	Contributor address; City; State; Zip Code				
	ļ	1				
		Huston, TX 77057				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	⊥ s)		
	Retired	,	Retired	-,		
╞	Date	Full name of contributor out-of-state PAC (ID#	<u>+</u> .)	Τ	Amount of Contribution (\$)	
	09/29/2023	Dade Phelan Campaign	·/			\$15,000.00
		Contributor address; City; State; Zip Code				4-0 ,0
	ļ					
	ļ	1				
	ļ	Austin, TX 78763				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 6/25 Rpt: 10/67	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	nilio F. (The Honorable)		00067768	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/29/2023	DeGeorge, Greg			\$1,000.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77057			
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	; ;)	
Real Estate		Self		
Date	Full name of contributor X out-of-state PAC (ID#:_	#C00782292)	Amount of Contribution (\$)	
11/02/2023	DentaQuest PAC			\$1,000.00
	Contributor address; City; State; Zip Code			
	Boston, MA 02129			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/24/2023	Dippel, Colleen			\$104.10
	Contributor address; City; State; Zip Code			
	Spring, TX 77382			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Education A	dministrator	Families Empowered		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/04/2023	Dusek, Kenneth			\$50.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77024			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Self		Self		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/04/2023	Elliott, Joe			\$520.51
	Contributor address; City; State; Zip Code			
	Houston, TX 77079			
	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Business O	wner	Walker Elliott, LP		

	The Instru	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 7/25 Rpt: 11/67	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		nilio F. (The Honorable)			-	00067768	,
4	Date	5 Full name of contributor out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	
	12/12/2023	Ford, Steve					\$5,000.00
		6 Contributor address; City; State; Zip Code					
		Houston, TX 77055					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Real Estate			Self			
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	10/04/2023	Fowler, Roger					\$1,000.00
							. ,
		Contributor address, City, State, Zip Code					
		Bellaire, TX 77401					
⊢	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
	Retired			Retired	''		
					_		
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	10/04/2023	Garver, Mike					\$1,000.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77055					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Founder			BRH-Garver			
	Date	Full name of contributor 🛛 out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	10/04/2023	Garza, Rene					\$500.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77063					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
╞	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	12/04/2023	George, Tog					\$500.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77057					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	L;)		
	Retired			Retired	,		
⊢							
1							

	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 8/25 Rpt: 12/67	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	DeAyala, En	ilio F. (The Honorable)				00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	08/09/2023	George, Tog					\$500.00
		6 Contributor address; City; State; Zip Code					
		Houston, TX 77057					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	12/29/2023	Griffin, Allyson					\$260.25
		Contributor address; City; State; Zip Code					
		Houston, TX 77024					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Mortgage ba	nker		Crosscountry			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	08/22/2023	Hachtman, Michael					\$2,602.50
		Contributor address; City; State; Zip Code					
		Houston, TX 77079					
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	CEO			48forty			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	10/04/2023	Hargrove, Thomas					\$250.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77002					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Investments			Gulfstar Group			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	12/08/2023	Harter, Steve					\$5,000.00
		Contributor address; City; State; Zip Code					
		Houston TV 77007					
⊢	<u> </u>	Houston, TX 77007		E I I I I I I I I I I	Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Financial			Notre Capital			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/25 Rpt: 13/67	
2	FILER NAME			3	Filer ID (Ethics Commissi	ion Filers)
	DeAyala, En	nilio F. (The Honorable)			00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/20/2023	Henson, Jane Cowper				\$100.00
	I	6 Contributor address; City; State; Zip Code				
	I					
		Houston, TX 77057				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions) Retired)		
	Date Full name of contributor out-of-state PAC (ID#:)				Amount of Contribution (\$)	
	09/11/2023 Hill, Thad					\$2,500.00
	Contributor address; City; State; Zip Code					
	I					
	I	Usuaton TV 77010				
⊢	Dringing occu	Houston, TX 77019	Employer (See Instructions)	<u> </u>		
	CEO	pation / Job title (See Instructions)	Employer (See Instructions) Calpine)		
⊨			l		() () () () () () () () () ()	
	Date 10/05/2023	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$52.05
	10/05/2023	Holsworth, Amy				Ф 52.05
	l	Contributor address; City; State; Zip Code				
	l					
	I	Houston, TX 77057				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions))		
	Paralegal		Estes Law Firm			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/20/2023	Hord, Dan				\$10,000.00
	I	Contributor address; City; State; Zip Code				
	l					
	I					
		Midland, TX 79702				
		pation / Job title (See Instructions)	Employer (See Instructions))		
	Owner		Hedloc Investments			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±=00.00
	09/20/2023	Houston Apartment Association Political Action (\$500.00
	l	Contributor address; City; State; Zip Code				
	l					
	I	Houston, TX 77041				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
				,		
⊢						

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 10/25 Rpt: 14/67
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
DeAyala, Emilio F. (The Honorable)	00067768
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/12/2023 Houston Pilots PAC	\$500.00
6 Contributor address; City; State; Zip Code	
Deer Park, TX 77536	
8 Principal occupation / Job title (See Instructions)9 Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/04/2023 Houston Police Officers' Union PAC	\$1,500.00
Contributor address; City; State; Zip Code	
Houston, TX 77007	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/04/2023 Howell, Evan	\$100.00
Contributor address; City; State; Zip Code	
Houston TV 779EE	
Houston, TX 77255 Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Self	1
	Amount of Contribution (ft)
Date Full name of contributor out-of-state PAC (ID#:) 11/16/2023 Howell, Ginger	Amount of Contribution (\$)
	\$250.00
Contributor address; City; State; Zip Code	
Houston, TX 77024	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Realtor Self	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	\$100.00
10/04/2023 Hye, Afifa	
10/04/2023 Hye, Afifa Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	

	The Instru	ction Guide explains how to cor	mplete this fo	orm.	1	Total pages Schedule A1: Sch: 11/25 Rpt: 15/67	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		milio F. (The Honorable)				00067768	,
4	Date	5 Full name of contributor out-o	of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/14/2023	Iglesias, David					\$520.51
		6 Contributor address; City; State; Zip (
		Tyler, TX 75701					
8		upation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Attorney			Iglesias Law Firm			
	Date	Full name of contributor out-o	of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/27/2023	Joyce, Jeff					\$260.25
		Contributor address; City; State; Zip (
		Houston, TX 77024					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Lawyer			Joyce + McFarland LLP			
	Date	Full name of contributor out-o	of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/06/2023	Juarez, Lenin					\$1,000.00
		Contributor address; City; State; Zip C					
		Houston, TX 77079					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner			Action Gypsum			
	Date	Full name of contributor out-o	of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/20/2023	Klein, Roman					\$100.00
		Contributor address; City; State; Zip (
		Houston, TX 77079					
		upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-o	of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/04/2023	Lamb, Jennifer					\$52.05
		Contributor address; City; State; Zip (Code				
		Houston, TX 77042					
		upation / Job title (See Instructions)		Employer (See Instructions			
	Office Manag	ger		AXYS Industrial Solutior	าร		

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	The Instru	ction Guide explains how to com	plete this fo	rm.	1	Total pages Schedule A1: Sch: 12/25 Rpt: 16/67	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		nilio F. (The Honorable)			-	00067768	,
4	Date	5 Full name of contributor out-of-	state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/04/2023	Landrum, Michael					\$1,000.00
		6 Contributor address; City; State; Zip C					
		Houston, TX 77024					
8		pation / Job title (See Instructions)	ę	B Employer (See Instructions)		
	Attorney			Self			
	Date	Full name of contributor out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	12/11/2023	Lawhon, Susan					\$5,000.00
		Contributor address; City; State; Zip C					
		Houston, TX 77056					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired			Retired			
	Date	Full name of contributor 🛛 out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2023	Lee A. Woods Political Action Com					\$500.00
		Contributor address; City; State; Zip C					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor 🛛 out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2023	Liggett, Jeffrey					\$104.10
		Contributor address; City; State; Zip C					
		Houston, TX 77024					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired			Retired			
	Date	Full name of contributor 🛛 out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	10/04/2023	Lindley, Robin					\$400.00
		Contributor address; City; State; Zip C	ode				
L		Houston, TX 77005					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Attorney			Buck Keenan LLP			

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 13/25 Rpt: 17/67
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ilio F. (The Honorable)		00067768
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
11/13/2023	Littwitz, David		\$26.03
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77024		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)
Real Estate		Sole Employer	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/20/2023		/	\$500.00
	Contributor address, City, State, Zip Code		
	Dallas, TX 75201		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	I ;)
	· · · · · · · · · · · · · · · · · · ·		, ,
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/31/2023	Madden, Steve	/	\$20,820.32
	Contributor address; City; State; Zip Code		
	Houston, TX 77024		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Management	t	Ashburn	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/06/2023	Madden, Steven		\$50,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77024		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)
Management	t	Apex Heritage Group	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/04/2023	Mafrige, Sophia		\$150.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77024		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	·)
Attorney		Self	

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	The Instru	ction Guide explains how to complete t	his f	orm.	1	Total pages Schedule A1: Sch: 14/25 Rpt: 18/67	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		nilio F. (The Honorable)				00067768	,
4	Date	5 Full name of contributor out-of-state PAC	: (ID#:_)	7	Amount of Contribution (\$)	
	12/15/2023	Martinez, Daniel					\$500.00
		6 Contributor address; City; State; Zip Code			1		
		Houston, TX 77079					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	<u>ا</u>		
ľ		President of Manufacturing		TechnipFMC	<i>''</i>		
╞				· · · · · · · · · · · · · · · · · · ·	_	Amount of Contribution (f)	
	Date 10/04/2023	Full name of contributor out-of-state PAC Mathews, Susan	; (ID#:_)		Amount of Contribution (\$)	\$250.00
	10/04/2023						φ250.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77057					
⊢	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions			
	Attorney			Baker Donelson			
╞	Date	Full name of contributor Out-of-state PAC	; (ID#:)		Amount of Contribution (\$)	
	10/05/2023	McNair Jr., R Cary	` _				\$2,500.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77024					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	CEO			McNair Interest			
	Date		: (ID#:_)		Amount of Contribution (\$)	
	09/21/2023	Moger, Sandie					\$104.10
		Contributor address; City; State; Zip Code					
		Houston, TX 77077					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Finance			MogerMedia	<i>'</i>		
⊨	Date	Full name of contributor Out-of-state PAC				Amount of Contribution (\$)	
	11/18/2023	Full name of contributor out-of-state PAC Moody, John	, (ID#)			\$1,000.00
	11,10,2020	Contributor address; City; State; Zip Code					¢1,000100
		Houston, TX 77019					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Real Estate			Parkside Capital			
I I							

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/25 Rpt: 19/67	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		nilio F. (The Honorable)			00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/26/2023	Moody III, Dan				\$1,041.02
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77098		Ĺ		
	Principal occu Real Estate	pation / Job title (See Instructions)	 9 Employer (See Instructions Moody Rambin 	5)		
				_		
	Date)		Amount of Contribution (\$)	
	10/08/2023	Muschalik, Jim				\$104.10
		Contributor address; City; State; Zip Code				
		Houston TV 77024				
	Dringinglossy	Houston, TX 77024				
	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/08/2023	Nichols, Bruce				\$104.10
		Contributor address; City; State; Zip Code]		
		Heisten TV 77024				
	Drin sinel eeeu	Houston, TX 77024		Ĺ		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
				.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷100.00
	10/20/2023	Nichols, Bruce F.				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Retired		Retired	,		
-	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	11/20/2023	Norton, Calvin V.	,			\$10.00
		Contributor address; City; State; Zip Code		ł		
		Houston, TX 77042				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Best Efforts		Best Efforts			

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/25 Rpt: 20/67	
2	FILER NAME			2	Filer ID (Ethics Commissio	on Filers)
ľ		nilio F. (The Honorable)		ľ	00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/16/2023	O'Shell, Michael				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		· · · · · · · · · · · · · · · · · · ·				
		Houston, TX 77024				
8	Principal occu Surgeon	pation / Job title (See Instructions)	9 Employer (See Instructions Self	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/20/2023	Oldham, Dudley				\$300.00
				ł		
		Houston, TX 77024				
⊢	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> د)		
	Retired		Retired	,		
╞				<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	****
	10/20/2023	Othon, Blanca				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77042				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Best efforts		Best efforts			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/09/2023	Pappas, Dean				\$500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	10/29/2023	Paton, Adana	/			\$520.51
	10/20/2020			ł		<i>QOLOIOT</i>
		Contributor address; City; State; Zip Code				
		Houston, TX 77024				
⊢	Principal accu		Employor (Soo Instructions	<u> </u>		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Relieu		Reliieu			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/25 Rpt: 21/67	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	DeAyala, En	nilio F. (The Honorable)			00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/04/2023	Penland, William				\$200.00
	1	6 Contributor address; City; State; Zip Code				
		1				
		Houston, TX 77057				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
	Retired	,	Retired			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	10/03/2023	Perdomo, Eddie				\$104.10
	I	Contributor address; City; State; Zip Code				
		1				
		Houston, TX 77055				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	VP	,	Arch Floors Inc			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/30/2023	Phillips 66 PAC				\$2,500.66
	1	Contributor address; City; State; Zip Code				
		1				
		1				
		Washington, DC 20004				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
L			<u> </u>	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/30/2023	Phillips, Bob				\$5,205.08
		Contributor address; City; State; Zip Code				
		1				
		Houston, TX 77007				
⊢	Dringing occu		Employer (Soo Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions) Retired	9 J		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>*1 000 00</u>
	12/20/2023	Plains All American GP LLC PAC - Texas				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Houston, TX 77002				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>ר</u>		
	Fillopu ooca			ワ		
⊢			<u> </u>			

The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 18/25 Rpt: 22/67	
2 FILER NAME	3	Filer ID (Ethics Commissio	on Filers)
DeAyala, Emilio F. (The Honorable)		00067768	,
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10/20/2023 Raynor, Gilbert			\$25.00
6 Contributor address; City; State; Zip Code			
Houston, TX 77282			
8Principal occupation / Job title (See Instructions)9Employer (See Instruction)			
Executive Raynor and Associate	es		
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/05/2023 Roa, Michael			\$2,000.00
Contributor address; City; State; Zip Code			
Houston, TX 77057			
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)		_
Auto Dealership Team Autoplex			
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/04/2023 Robert, Richard			\$1,000.00
Contributor address; City; State; Zip Code			
Houston, TX 77082			
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)		
Retired Retired			
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/13/2023 Robertson, Courtney			
			\$780.76
Contributor address; City; State; Zip Code			\$780.76
			\$780.76
Contributor address; City; State; Zip Code			\$780.76
Contributor address; City; State; Zip Code Houston, TX 77024			\$780.76
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions)	ons)		\$780.76
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Estate	ons)		\$780.76
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Date Full name of contributor out-of-state PAC (ID#:)	ons)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Estate	ons)		\$780.76
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Date Full name of contributor 09/13/2023 Sanders, Joshua	ons)		
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Date Full name of contributor 09/13/2023 Sanders, Joshua	ons)		
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Date Full name of contributor 09/13/2023 Sanders, Joshua Contributor address; City; State; Zip Code	ons)		
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Date Full name of contributor 09/13/2023 Sanders, Joshua Contributor address; City; State; Zip Code Cypress, TX 77433			
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Date Full name of contributor 09/13/2023 Sanders, Joshua Contributor address; City; State; Zip Code Cypress, TX 77433 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)			
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Real Estate Date Full name of contributor 09/13/2023 Sanders, Joshua Contributor address; City; State; Zip Code Cypress, TX 77433			

The Instr	uction Guide explains how to complete this f	orm.	1	otal pages Schedule A1: Sch: 19/25 Rpt: 23/67	
2 FILER NAM	E		 3 ⊢	Filer ID (Ethics Commission	n Filers)
	Emilio F. (The Honorable)		1	00067768	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 A	mount of Contribution (\$)	
12/11/2023					\$260.25
	6 Contributor address; City; State; Zip Code		1		
	Houston, TX 77024				
8 Principal oc	cupation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Investor		Misson-Heights			
Date	Full name of contributor out-of-state PAC (ID#:_)	A	mount of Contribution (\$)	
10/20/2023	3 Saunders, Stuart D.				\$250.00
	Contributor address; City; State; Zip Code		1		
	Houston, TX 77024				
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	s)		
Investor		Mission-Heights			
Date	Full name of contributor out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
10/19/2023					\$104.10
	Contributor address; City; State; Zip Code		•		
	Houston, TX 77024				
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	s)		
Retired		Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
10/10/2023					\$52.05
	Contributor address; City; State; Zip Code		ł		•
	Houston, TX 77079				
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	s)		
Co-owner		Jostens			
Date	Full name of contributor out-of-state PAC (ID#:_)	ΙA	mount of Contribution (\$)	
10/20/2023					\$52.00
	Contributor address; City; State; Zip Code		ł		Ŧ -
	Houston, TX 77024				
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Retired		Retired			
•••••••					

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/25 Rpt: 24/67	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		nilio F. (The Honorable)			00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/25/2023	Sicola, Vincent				\$520.51
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77024				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	VP	1	OEC			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/11/2023	Snoots, Aimee				\$5,205.08
						1
		Houston, TX 77024				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions)		
	Retired		Retired			
╞	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/09/2023	Strake, George	,			\$200.00
		Contributor address; City; State; Zip Code				T
		Houston, TX 77024				
⊢	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Real Estate		Cushman Wakefield			
╞	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/22/2023	Striegel, James				\$25.00
		Contributor address; City; State; Zip Code				
		Flower Mound, TX 75022				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Retired	1	Retired			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/04/2023	Swinbank, Joe				\$5,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77224				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Co-Founder	1	The Sprint Companies			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 21/25 Rpt: 25/67	
2	FILER NAME			3	Filer ID (Ethics Commissi	ion Filers)
		nilio F. (The Honorable)			00067768	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	C00284885)	7	Amount of Contribution (\$)	
	07/13/2023	THE HOME DEPOT INC. POLITICAL ACTION				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
_	D i simpli e est	WASHINGTON, DC 20004		Ĺ		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/20/2023	10/20/2023 Telle, Michael S.				\$1,000.00
		Contributor address; City; State; Zip Code		1		
_	D i sizal essi	Houston, TX 77024		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions Vinson Elkins	S)		
_	Attorney			1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	*=00.00
	10/04/2023	Tellepsen, Tadd				\$500.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77024				
<u> </u>	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Construction		Tellepsen Corporation			
-	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/08/2023	Texans for Lawsuit Reform PAC				\$40,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
L						
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/20/2023	Texas Apartment Assn. PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
<u> </u>	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	•					
-						
1						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/25 Rpt: 26/67	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	DeAyala, En	nilio F. (The Honorable)			00067768	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/16/2023	Texas REALTORS Political Action Committee	.TORS Political Action Committee			\$2,500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78768				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor Dut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/12/2023	Texas Trial Lawyers Association PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
⊢	<u> </u>	Austin, TX 78701		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
╘						
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#0 500 00
	12/28/2023	The Pinkerton Law Firm PLLC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77007				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	[;)		
	•	· · · · · · · · · · · · · · · · · · ·		,		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/20/2023	Timko, Phyllis				\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77056				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
Γ	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/03/2023	Tog, George				\$1,041.02
		Contributor address; City; State; Zip Code				
L		Houston, TX 77057				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
I I						

	The Instru	ction Guide explains how to co	mplete this for	m.	1	Total pages Schedule A1: Sch: 23/25 Rpt: 27/67	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
[nilio F. (The Honorable)			ľ	00067768	
4	Date	5 Full name of contributor 🗌 out-	of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/16/2023	Treadwell, Brett					\$520.51
		6 Contributor address; City; State; Zip	Code				
		Houston, TX 77024					
8		pation / Job title (See Instructions)	9	Employer (See Instructions			
	CFO			RIDA Development Cor	por	ation	
	Date		of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/20/2023	Trozzo, Ernest C.					\$100.00
		Contributor address; City; State; Zip					
	Deinsteallesse	Houston, TX 77079	i				
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date		of-state PAC (ID#:)		Amount of Contribution (\$)	* 4 000 00
	11/15/2023						\$1,000.00
		Contributor address; City; State; Zip	Code				
		San Antonio, TX 78288					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> յ)		
					,		
╞	Date	Full name of contributor	of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/30/2023	Union Pacific Corporation Fund 1	or Effective Gove	rnment			\$1,500.00
		Contributor address; City; State; Zip					
		Washington, DC 20004					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor 🛛 out-	of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/20/2023	Vanzant, Earl A.					\$25.00
		Contributor address; City; State; Zip			1		
⊢	<u> </u>	Houston, TX 77063			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
∟	Best efforts			Best efforts			
I I							

_						
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 24/25 Rpt: 28/67	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		nilio F. (The Honorable)		00067768	,	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	out-of-state PAC (ID#:)			
	12/06/2023	Villarreal, Massey				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Sugar Land, TX 77479				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 5)		
	Business Ov		Precision Task Group Ir			
⊢	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/20/2023	Wall, Shawn D.)		, and an e contained and (+)	\$50.00
		· · · · · · · · · · · · · · · · · · ·				
		Houston, TX 77079				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Best efforts		Best efforts			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/04/2023 Wax Oxman, Wendy					\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston TX 77000				
L	Dringing ogg	Houston, TX 77008 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Tx Real Esta		Employer (See Instructions Homesmart RE	5)		
⊨				-		
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#: Weekley, Richard)		Amount of Contribution (\$)	\$2,500.00
	12/29/2023	-				\$2,500.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77027				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Real Estate	Developer	Self			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/20/2023	Williamson, Betty				\$500.00
		Contributor address; City; State; Zip Code				
L		Dallas, TX 75225				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 25/25 Rpt: 29/67 2 FILER NAME 3 Filer ID (Ethics Commission Filers) DeAyala, Emilio F. (The Honorable) 00067768 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 07/11/2023 \$260.25 Wilson Jr, Welcome 6 Contributor address; City; State; Zip Code Houston, TX 77057 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Real Estate Executive** Welcome Group LLC

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/3 Rpt: 30/67					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	milio F. (The Honorable)		00067768				
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution				
10/23/2023	Associated Republicans of Texas Campaign Fur	nd	contribution (\$) description \$4,000.001 Inkind Contribution:				
	7 Contributor address; City; State; Zip Code	Campaign Digital Advertising					
	Austin, TX 78701		I Check if travel outside of Texas. Complete Schedule T.				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	•				
			-JODICIAL) (000				
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 contributo	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution				
09/12/2023	Associated Republicans of Texas Campaign Fur	nd	contribution (\$) description				
	Contributor address; City; State; Zip Code		\$2,000.001 In-Kind - Campaign Digital				
			Advertising				
	Austin, TX 78701		I Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	·				
-		• • •					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u>I</u>					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution				
10/03/2023		, ud	contribution (\$) description				
	Contributor address; City; State; Zip Code	iu	\$2,000.00 In-Kind - Campaign Digital				
	Continuou autress, City, State, Zip Coue		Advertising				
	Austin, TX 78701						
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. IDDICIAL (See instructions)				
Επιτομάι σους							
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a shild low firm of percent(a) (if any) (FOD 11 DICIAL)						
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/3 Rpt: 31/67						
2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
DeAyala, Er	milio F. (The Honorable)		00067768					
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$						
5 Date 12/31/2023	 7 Contributor address; City; State; Zip Code) nd	8 Amount of 9 In-kind contribution contribution (\$) description \$3,054.391In-Kind - Campaign Text Messages					
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.					
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)					
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 contributo	or's spouse (if any) (FOR JUDICIAL)					
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 12/19/2023	Full name of contributor out-of-state PAC (ID#: Dade Phelan Campaign Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$15,250.00 I In-Kind - Polling					
	Austin, TX 78763		I Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)					
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 12/31/2023	Full name of contributor out-of-state PAC (ID#: Smith, Inga Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$100.00 I In-Kind - Event F&B					
	Houston, TX 77024		Check if travel outside of Texas. Complete Schedule T.					
Principal occu Real Estate	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Self	-JUDICIAL) (See instructions)					
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 i	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 3/3 Rpt: 32/67			
2	FILER NAME				Filer ID (Ethics Commission Filers)	
	DeAyala, Eı	nilio F. (The Honorable)			00067768	
4	TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS					
5	Date 12/06/2023	 Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701)	8	Amount of contribution (\$) 9 In-kind contribution \$15,250.00 I In-Kind - Polling	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11		11 Employer (FOR NON	-JU			
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 contributo	or's	spouse (if any) (FOR JUDICIAL)	
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

LOANS		SCHEDULE E
The Instruction Guide explains how to complete this form.		ages Schedule E: /1 Rpt: 33/67
2 FILER NAME DeAyala, Emilio F. (The Honorable)	3 Filer ID 00067	(Ethics Commission Filers) 768
⁴ TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 7 Name of lender out-of-state PAC (ID#: 12/29/2023 DeAyala, Mano		9 Loan Amount (\$) \$10,000.00
6 Is lender a financial institution? B Lender address; City; State; Zip Code		10 Interest Rate
No Houston, TX 77024		11 Maturity Date 12/29/2035
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instruction Attorney Buck Keenan LLP	s)	
14 Description of Collateral 15 Check if personal funds w X None	ere deposite	d into political account (See Instructions)
16 GUARANTOR 17 Name of guarantor INFORMATION		19 Amount Guaranteed (\$)
X not applicable 18 Guarantor address; City; State; Zip Code		
20 Principal occupation 21 Employer (See Instruction	s)	1

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/Politica Credit Card Payment			FeesOffice Overhead/Rental ExpenseTransporFood/Beverage ExpensePolling ExpenseTravel inGift/Awards/Memorials ExpensePrinting ExpenseTravel O					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	5		C OAPIG				3	Filer ID (Ethics Commission Filers)	
1	Sch: 1/34 Rpt: 34/67 DeAyala, Emilio F. (The Honorable)						3	00067768		
4	Date	5	Payee name							
	11/16/2023		AIA Corp.							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	de				
	\$113.76		8148 Solutions Center							
			Chicago, IL 60677							
8	PURPOSE	(a)	Category (See Categories listed at the t	op of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Advertising Expense		,		Check if travel	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITORE								, officeholder living expense	
							Campaign Ac	lve	rtising	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office sou	ght			Office held	
	Date		Payee name							
	12/12/2023		AIA Corp.							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$139.51		8148 Solutions Center	,						
	\$100101									
			Chicago, IL 60677							
	PURPOSE OF		Category (See Categories listed at the t	top of this sch	iedule)	(b)	Description			
	EXPENDITURE	Advertising Expense				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
							Campaign Ac			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght			Office held	
	experiance to benefit e/or									
	Date		Payee name							
	09/28/2023		Bullhorn Communication							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$8,000.00		5016 Webster							
			Omaha, NE 68132							
	PURPOSE OF		Category (See Categories listed at the t	top of this sche	iedule)	(b)	Description			
	EXPENDITURE		Advertising Expense						ide of Texas. Complete Schedule T.	
							Campaign Ac		, officeholder living expense rtising	
							Campaign At	ave	nuonig	
		Ļ	Condidate/Officebalder serves			wh+			Office hold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	jrit			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/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 2/34 Rpt: 35/67	DeAyala, Emilio F. (The Honorable)	00067768							
4	Date 10/11/2023	5 Payee name Bullhorn Communication								
6	Amount (\$) \$700.00	 Payee address; City; State; Zip Code 5016 Webster Omaha, NE 68132 								
8	PURPOSE OF EXPENDITURE	 Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Advertising 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/10/2023	City of Austin								
	Amount (\$) \$117.04	Payee address; City; State; Zip Code 625 E. 10th St. Austin, TX 78701								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description	utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/08/2023	City of Austin								
	Amount (\$) Payee address; City; State; Zip Code \$87.84 625 E. 10th St.									
	Austin, TX 78701									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	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/Politica Credit Card Payment	Gift/Awards/Memorial mittee Legal Services	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitf/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed			
1	Total pages Schedule F1:	2	· · · · · · · · · · · · · · · · · · ·							
-	Sch: 3/34 Rpt: 36/67		Emilio F. (The Honorable)					00067768		
4	Date 09/05/2023		Payee name City of Austin							
6	Amount (\$) \$85.38		Payee address; City; 525 E. 10th St. Austin, TX 78701	State;	; Zip Coo	de				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at Travel Out of District	the top of this sch	edule)			de of Texas. Complete Schedule T. officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght		Office held		
	Date		Payee name							
	10/10/2023	(City of Austin							
	Amount (\$)		Payee address; City;	State;	; Zip Coo	de				
	\$87.51		625 E. 10th St. Austin, TX 78701							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at Fravel Out of District	the top of this sch	edule)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held		
	Date		Payee name							
	07/02/2023	(Colon and Company							
	Amount (\$) Payee address; City; State; Zip Code \$5,000.00 7941 Katy Freeway #108									
		Houston, TX 77024								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at Consulting Expense	the top of this sch	iedule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense ing		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	· · ·		•	Filer ID (Ethics Commission Filers)				
-	Sch: 4/34 Rpt: 37/67	2	DeAyala, Emilio F. (The Honorable)				00067768			
4	Date 09/05/2023		Payee name Colon and Company							
_				Zin Co						
0	Amount (\$) \$2,500.00	í	Payee address; City; State; 7941 Katy Freeway #108	Zip Co	IE					
			Houston, TX 77024							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this scheo Consulting Expense	dule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense ing			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice sou	Iht		Office held			
	Date		Payee name							
	09/20/2023		Colon and Company							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$5,000.00		7941 Katy Freeway #108 Houston, TX 77024	·						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sched Consulting Expense	dule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense ing			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	ıht		Office held			
	Date		Payee name							
	11/15/2023		Colon and Company							
	Amount (\$) \$2,500.00		Payee address; City; State; 7941 Katy Freeway #108	Zip Co	le					
			Houston, TX 77024							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schere Consulting Expense	dule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense ing			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	Jht		Office held			

			EXPENDITURE CA	TEGO	RIES FOR	во	X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Imittee Legal Services The Instruction Guide exp		Office Over Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2		·		•		3	Filer ID	(Ethics Commission Filers)
-	Sch: 5/34 Rpt: 38/67		DeAyala, Emilio F. (The Honoral	ole)					00067768	
4	Date	5	Payee name							
	12/26/2023		Colon and Company							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	de				
	\$2,500.00		7941 Katy Freeway #108							
			Houston, TX 77024							
8	PURPOSE	(a)	Category (See Categories listed at the top of	f this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Consulting Expense							plete Schedule T.
							Political Cons		officeholder living) expense
								Jun	ing	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	() Office soug	ght			Office he	eld
	Date		Payee name							
	11/22/2023		Colon and Company							
	Amount (\$)		Payee address; City;	State	; Zip Coo	de				
	\$4,000.00		7941 Katy Freeway #108		· •					
	. ,									
			Houston, TX 77024							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top o Event Expense	f this sch	nedule)			, тх,	de of Texas. Com officeholder living İON	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C) Office sou	ght			Office he	eld
	Date		Payee name							
	07/10/2023		DeAyala, Emilio							
_	Amount (\$)		Payee address; City;	State	; Zip Coo	de				
	\$10,647.58		11403 Shadow Way		,p					
			Houston, TX 77024							
	PURPOSE OF	(a)	Category (See Categories listed at the top o		nedule)	(b)	Description	outoi	de of Toylog, Com	nlata Cabadula T
	EXPENDITURE		Loan Repayment/Reimbursemer	nt					officeholder living	plete Schedule T.
										d on Jan Semi Annual
							Report 2022			
-	Complete ONLY if direct		Candidate/Officeholder name	(Office soug	ght			Office he	eld
	expenditure to benefit C/OF									

				EXPENDITUR	E CATEGO	RIES FOR	вох	(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fe Fo Gi nmittee Le	rent Expense res rod/Beverage Expens ft/Awards/Memorials gal Services he Instruction Gu	Expense	Office Ove Polling Exp Printing Ex Salaries/W	head/R ense pense ages/C	Reimbursement Rental Expense ontract Labor e this form.		Travel in District Travel Out of Dis	quipment & Related Exper		
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission I	Filers)
-	Sch: 6/34 Rpt: 39/67			lio F. (The Ho	norable)					00067768		
4	Date	5	Payee name									
	12/07/2023		Fowler, Alex									
6	Amount (\$)	7	Payee address	; City;	State;	; Zip Co	le					
	\$400.00	\$400.00 311 Bowie Street Apt. 2301										
			Austin, TX 78	703								
8	PURPOSE	(a)	Category (See	Categories listed at th	ne top of this sch	nedule)	(b) □	escription				
	OF EXPENDITURE		Salaries/Wag	es/Contract La	abor		Ę				plete Schedule T.	
	-						L	_		officeholder living	j expense	
							C	Campaign Co		aci Ladui		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Office	holder name	C	Dffice sou	jht			Office he	eld	
	Date		Payee name									
	10/07/2023		Fox Bryant LL	С								
			-		04-4	7: 0	1					
	Amount (\$)		Payee address		State;	; Zip Co	le					
	\$15,000.00		855 W St. Su	te 2								
			Lincoln, NE 6	8508								
	PURPOSE OF EXPENDITURE		Category _{(See} Advertising E	Categories listed at th	ne top of this sch	nedule)		_	TX,	officeholder living	plete Schedule T. J expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Office	holder name	C	Dffice sou	jht			Office he	eld	
-	Date		Payee name									
	11/24/2023		Fox Bryant LL	C								
	Amount (\$)		Payee address		State	; Zip Co	ł۵					
	\$14,500.00		855 W St. Su		State,	, 20 00						
			Lincoln, NE 6	8508								
	PURPOSE OF EXPENDITURE		Category _{(See} Advertising E	Categories listed at th	ne top of this sch	iedule)	E	_	TX,	officeholder living	plete Schedule T. J expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Office	holder name	C	Dffice sou	jht			Office he	eld	

			EXPENDITURE	CATEGOF	RIES FOR	BOX 8(a	l)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex nmittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contrac	Expense ct Labor		Travel in District Travel Out of Dist	quipment & Related Expense		
1	Total pages Schedule F1:	2		C CAPITALITY		ipioto		3	Filer ID	(Ethics Commission Filers)		
1	Sch: 7/34 Rpt: 40/67	2	DeAyala, Emilio F. (The Hond	orable)				3	00067768			
4	Date	5	Payee name									
	10/15/2023		Fox Bryant LLC									
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le						
	\$16,000.00		855 W St. Suite 2									
			Lincoln NE 60500									
			Lincoln, NE 68508									
8	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Desc						
	EXPENDITURE		Advertising Expense						de of Texas. Comp officeholder living			
									Outreach	expense		
						Cam	paign ve		Ourcaon			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice sou	ht			Office he	ld		
⊨	Date		Payee name									
	12/12/2023		Genesis Photographer									
-	Amount (\$)		Payee address; City;	State [.]	Zip Co	le						
	\$500.00		9356 LIVERNOIS RD	State,								
	\$500.00		3350 LIVERNOIS RD									
			Houston, TX 77080									
	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Desc	ription					
	OF EXPENDITURE		Event Expense						de of Texas. Comp			
									officeholder living	expense		
						Ever	nt Photog	jrap	ny			
									0.000			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Ĺ	Office sou	nt			Office he	IQ		
	Date		Payee name									
	12/05/2023		Greater Houston Pachyderm									
-	Amount (\$)	-	Payee address; City;	State [.]	Zip Co	le						
	\$250.00		11542 Sandspoint Drive	,								
			Houston, TX 77072									
	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Desc	ription					
	OF EXPENDITURE		Advertising Expense						de of Texas. Comp			
	EXPENDITORE								officeholder living			
						Cam	ipaign Ev	/ent	t Sponsorshi	р		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	С	Office sou	ht			Office he	ld		
		1										

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/34 Rpt: 41/67	DeAyala, Emilio F. (The Honorable)	00067768
4	Date 12/07/2023	5 Payee name Harrington, Deanna	
6	Amount (\$) \$400.00	 7 Payee address; City; State; Zip Code 6130 Chevy Chase Dr. Houston, TX 77024 	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ontract Labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/09/2023	Harrington, Deanna	
	Amount (\$) \$766.09	Payee address; City; State; Zip Code 6130 Chevy Chase Dr.	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense eimbursement
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/09/2023	Harrington, Deanna	
	Amount (\$) \$244.43	Payee address; City; State; Zip Code 6130 Chevy Chase Dr.	
		Houston, TX 77024	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense simbursement
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 9/34 Rpt: 42/67	DeAyala, Emilio F. (The Honorable)	00067768
4	Date 11/20/2023	5 Payee name Harris County Republican Party	
6	Amount (\$) \$750.00	 Payee address; City; State; Zip Code 8588 Katy Freeway Suite 445 Houston, TX 77024 	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ing Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/15/2023	Haywood, Ethan	
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 4704 Scottish Woods Cove Austin, TX 78746	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	nutside of Texas. Complete Schedule T. TX, officeholder living expense Intract Labor
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/30/2023	Haywood, Ethan	
	Amount (\$) \$100.00	Payee address;City;State;Zip Code4704 Scottish Woods Cove	
		Austin, TX 78746	
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense ent Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

			EXPENDITURE	CATEGOF	RIES FOR	BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Innittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract L	kpense .abor		Travel in District Travel Out of Distr	uipment & Related Expense		
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)	_	
	Sch: 10/34 Rpt: 43/67	2	DeAyala, Emilio F. (The Hone	orable)				3	00067768			
4	Date	5	Payee name									
	07/10/2023		Mammoth Marketing Group									
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le						
	\$1,552.72		4500 Bissonnet St. 370									
			Bellaire, TX 77401									
_	DUDDOOF	(-)				(J-)						
8	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Descrip		outoi	de of Texas. Compl	ata Sabadula T		
	EXPENDITURE		Advertising Expense						officeholder living e			
						Campa				, ponoo		
						eampe			lionig			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C) Dffice sou	Iht			Office hel	d		
	_	-									_	
	Date		Payee name									
	07/10/2023		Mammoth Marketing Group									
	Amount (\$)		Payee address; City;	State;	Zip Co	le						
	\$135.31		4500 Bissonnet St. St. 370									
			Bellaire, TX 77401									
	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Descrip	otion					
	OF EXPENDITURE		Advertising Expense						de of Texas. Compl			
	-								officeholder living e	expense		
						Campa	aign Au	ivei	using			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	Int			Office hel	d		
	Date		Payee name									
	08/09/2023		Mammoth Marketing Group									
	Amount (\$)		Payee address; City;	State;	Zip Co	le						
	\$473.59		4500 Bissonnet St. St. 370									
			Bellaire, TX 77401									
	PURPOSE	(a)				(b) Descrip	tion					
	OF	(4)	Category (See Categories listed at the	top of this sche	edule)			outsio	de of Texas. Compl	ete Schedule T.		
	EXPENDITURE		Advertising Expense						officeholder living e			
						Campa						
						1	-		5			
-	Complete ONLY if direct	<u>_</u>	Candidate/Officeholder name		Office soug	ıht			Office hel	d		
	expenditure to benefit C/OI			C	Since Soul					u		
											_	

			EXPENDITURE		RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract	Expense : Labor		Travel in District Travel Out of Dist	uipment & Related Exp	
1	Total pages Schedule F1:	2				- F		3	Filer ID	(Ethics Commission	Filers)
-	Sch: 11/34 Rpt: 44/67	2	DeAyala, Emilio F. (The Hon	iorable)				5	00067768		11 11013)
4	Date	5	Payee name								
	09/28/2023		Mammoth Marketing Group								
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le					
	\$1,627.75		4500 Bissonnet St. St. 370								
			Bellaire, TX 77401								
8	PURPOSE	(0)				(b) Deser					
°	OF	(a)	Category (See Categories listed at the	e top of this sche	edule)	(b) Descri		outsi	de of Texas. Comp	lete Schedule T	
	EXPENDITURE		Advertising Expense						officeholder living		
							aign Ad				
							-		-		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Dffice sou	lht			Office he	ld	
	Date		Payee name								
	10/11/2023		Mammoth Marketing Group								
	Amount (\$)	\vdash	Payee address; City;	State:	Zip Co	le					
	\$473.59		4500 Bissonnet St. St. 370	Oluic,	210 000						
	ψ+10.00		4300 Dissonnet St. St. 570								
			Bellaire, TX 77401								
	PURPOSE	(a)	Category (See Categories listed at the	e top of this sche	edule)	(b) Descri	iption				
	OF EXPENDITURE		Advertising Expense						de of Texas. Comp		
									officeholder living	expense	
						Camp	aign Ad	ivei	rtising		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	Iht			Office he	ld	
		-									
	Date		Payee name								
	10/11/2023		Mammoth Marketing Group								
	Amount (\$)		Payee address; City;	State;	Zip Co	le					
	\$4,657.50		4500 Bissonnet St. St. 370								
			Bellaire, TX 77401								
	PURPOSE	(a)	Category (See Categories listed at the	e top of this sch	edule)	(b) Descri	ption				
	OF		Advertising Expense		ouuloj		•	outsi	de of Texas. Comp	lete Schedule T.	
	EXPENDITURE		5 5 5 5 7 5 5			Che	eck if Austin,	, тх,	officeholder living	expense	
						Camp	oaign Ad	lve	rtising		
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	Iht			Office he	ld	
	expenditure to benefit C/OI	Н									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide exp		Office Over Polling Exp Printing Ex Salaries/W	rheac pense pens ages	e /Contract Labor		Travel in District Travel Out of District	ng Expense ment & Related Expense gory not listed above)
1	Total pages Schedule F1:	2						3	Filer ID (Et	thics Commission Filers)
1	Sch: 12/34 Rpt: 45/67		DeAyala, Emilio F. (The Honorab	le)				-	00067768	
4	Date	5	Payee name							
	11/01/2023		Mammoth Marketing Group							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de				
	\$60.89		4500 Bissonnet St. St. 370							
			Bellaire, TX 77401							
_	51155005	<u> </u>				<u> </u>				
8	PURPOSE OF		Category (See Categories listed at the top of	this sche	edule)	(b)	Description	outeir	le of Texas. Complete	Schodulo T
	EXPENDITURE		Advertising Expense						officeholder living expe	
							Campaign Ac			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght			Office held	
	Date		Payee name							
	11/01/2023		Mammoth Marketing Group							
	Amount (\$)		Payee address; City;	State:	Zip Co	de				
	\$79.83		4500 Bissonnet St. St. 370		•					
			Bellaire, TX 77401							
	PURPOSE OF	(a)	Category (See Categories listed at the top of	this sche	edule)	(b)	Description			
	EXPENDITURE		Advertising Expense						le of Texas. Complete officeholder living expe	
							Campaign Ac			ense
							Campaignine	1001	using	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office sou	ght			Office held	
	Date		Payee name							
	11/22/2023		Mammoth Marketing Group							
	Amount (\$)		Payee address; City;	State;	Zip Co	de				
	\$7,042.43		4500 Bissonnet St. St. 370							
			Bellaire, TX 77401		_					
	PURPOSE	(a)	Category (See Categories listed at the top of	this sche	edule)	(b)	Description			
	OF EXPENDITURE		Advertising Expense						de of Texas. Complete	
							Campaign Ac		officeholder living expe	ense
							Campaign At	ivel	using	
_	Complete ONL V if direct		andidate/Officeholder name		Office soug	ht.			Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH			C	AUCE SOU	JIIL			Unice nela	

			EXPENDITURE CAT	EGOR	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide exp	olains h	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	•			·	3	Filer ID (Ethics Commission Filers	5)		
-	Sch: 13/34 Rpt: 46/67		DeAyala, Emilio F. (The Honorabl	e)				00067768	<i>''</i>		
4	Date	5	Payee name								
	11/22/2023		Mammoth Marketing Group								
6	Amount (\$)	7	Payee address; City;	State;	Zip Coo	e					
	\$3,438.00 4500 Bissonnet St. St. 370										
			Bellaire, TX 77401								
8	PURPOSE	(a)	Category (See Categories listed at the top of	his sche	edule)	b) Description					
	OF EXPENDITURE		Advertising Expense		ŕ			side of Texas. Complete Schedule T.			
								c, officeholder living expense			
						Campaign A	dve	ertising			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	O	Office soug	ht		Office held			
	Date		Payee name								
	11/22/2023		Mammoth Marketing Group								
	Amount (\$)		Payee address; City;	State;	Zip Coo	e					
	\$986.00		4500 Bissonnet St. St. 370	,							
	+000100										
			Bellaire, TX 77401								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of a Advertising Expense	his sche	edule)		n, TX	side of Texas. Complete Schedule T. K, officeholder living expense ertising			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	0	Office soug	ht		Office held			
	Date		Payee name						=		
	11/22/2023		Mammoth Marketing Group								
-	Amount (\$)			State [.]	Zip Coo	e					
	\$100.00		4500 Bissonnet St. St. 370	,		-					
			Bellaire, TX 77401		i						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of a Advertising Expense	his sche	edule)		n, TX	side of Texas. Complete Schedule T. K, officeholder living expense ertising			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	0	Office soug	ht		Office held			

			E	XPENDITURE C	ATEGOR	RIES FOR	BOX 8	8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food/f Gift/Av nmittee Legal	Expense Beverage Expense vards/Memorials Expe Services Instruction Guide		Office Over Polling Exp Printing Ex Salaries/W	head/Rer ense oense ages/Con			Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment &	Related Expense	
1	Total pages Schedule F1:	2							2	Filer ID	(Ethics C	Commission Filers)
-	Sch: 14/34 Rpt: 47/67	I	DeAyala, Emilio	F. (The Honor	able)					00067768		
4	Date 12/06/2023		Payee name Mammath Marke									
_		<u> </u>	Mammoth Marke		<u> </u>							
6	Amount (\$) \$7,204.80	7 Payee address; City; State; Zip Code 04.80 4500 Bissonnet St. St. 370 Bellaire, TX 77401										
8	PURPOSE						(h) Do	oorintion				
0	OF EXPENDITURE		Category _{(See Cate} Advertising Expe		p of this sche	edule)			, TX,	de of Texas. Comp officeholder living tising		ule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehol	der name	C	Office soug	ht			Office he	eld	
	Date		Payee name									
	09/05/2023		Mammoth Marke	eting Group								
	Amount (\$)		Payee address;	City;	State;	Zip Co	le					
	\$67.66		4500 Bissonnet Bellaire, TX 774									
	PURPOSE OF EXPENDITURE		Category _{(See Cate} Advertising Expe		p of this sche	edule)			, TX,	de of Texas. Compofficeholder living		ule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehol	der name	C	Office sou	ht			Office he	eld	
	Date		Payee name									
	09/05/2023		Mammoth Marke	eting Group								
	Amount (\$) \$3,125.00		Payee address; 4500 Bissonnet	City; St. St. 370	State;	Zip Coo	le					
			Bellaire, TX 774	01								
	PURPOSE OF EXPENDITURE		Category _{(See Cate} Advertising Expe		p of this sche	edule)			, TX,	de of Texas. Comp officeholder living 'tising		ule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehol	der name	C	Office soug	ht			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	B Filer ID (Ethics Commission Filers)							
	Sch: 15/34 Rpt: 48/67	DeAyala, Emilio F. (The Honorable)	00067768							
4	Date 09/05/2023	5 Payee name Mammoth Marketing Group								
6	Amount (\$) \$169.14	7 Payee address; City; State; Zip Code 4500 Bissonnet St. St. 370 Bellaire, TX 77401								
8	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense /ertising							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/05/2023	Mammoth Marketing Group								
	Amount (\$) \$10,233.77	Payee address;City;State;Zip Code4500 Bissonnet St. St. 370								
	PURPOSE	Bellaire, TX 77401 (a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Advertising Expense	itside of Texas. Complete Schedule T. IX, officeholder living expense /ertising							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/05/2023	Mammoth Marketing Group								
	Amount (\$) \$608.91	Payee address;City;State;Zip Code4500 Bissonnet St. St. 370								
		Bellaire, TX 77401								
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense /ertising							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Inmittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	5					3	Filer ID (Ethics Commission Filers)	
-	Sch: 16/34 Rpt: 49/67	2	DeAyala, Emilio F. (The Hone	orable)				00067768	
4	Date	5	Payee name						
	07/10/2023		Mammoth Marketing Group						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de			
	\$2,500.00		4500 Bissonnet St. St. 370						
			Bellaire, TX 77401						
8	PURPOSE	(₂)				(b) Description			
°	OF	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Description	d outs	side of Texas. Complete Schedule T.	
	EXPENDITURE		Consulting Expense					c, officeholder living expense	
						Campaign (
						1 5		5	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held							Office held		
	Date		Payee name						
	11/01/2023		Mammoth Marketing Group						
			Payee address; City;	State:	Zip Co	de			
	.,		4500 Bissonnet St. St. 370	State,	, zip coo	ue			
	\$2,500.00		4500 DISSUIIIEL SL. SL. 370						
			Bellaire, TX 77401						
	PURPOSE	(a)	a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		Consulting Expense					side of Texas. Complete Schedule T.	
								K, officeholder living expense	
						Campaign (Cons	sulting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office held	
	Date		Payee name						
	07/02/2023		Mammoth Marketing Group						
-	Amount (\$)	-	Payee address; City;	State [.]	Zip Co	de			
	\$5,000.00		4500 Bissonnet St. St. 370	otato,	, 210 000				
	\$3,000.00		4300 Dissonnet St. St. 970						
			Bellaire, TX 77401						
	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Description			
	OF		Consulting Expense		,	Check if trave	l outs	side of Texas. Complete Schedule T.	
EXPENDITURE								c, officeholder living expense	
						Political Co	nsult	ting	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						Office held			
	expenditure to benefit C/OI	Η							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Corr	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explai	Office OV Polling E Printing E Salaries/	verhea xpense Expense Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 17/34 Rpt: 50/67		DeAyala, Emilio F. (The Honorable)					00067768	
4	Date	5	Payee name						
	09/28/2023		Mammoth Marketing Group						
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip C	ode				
	\$128.55		4500 Bissonnet St. St. 370						
			Bellaire, TX 77401						
_	51155005				4				
8	PURPOSE OF		Category (See Categories listed at the top of this	schedule)	(b)	Description	outei	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Fees					, officeholder living expense	
						Registration			
						-			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office name Office sought Office held									
	Date		Payee name						
	07/10/2023		Mammoth Marketing Group						
	Amount (\$)		Payee address; City; Sta	ate; Zip C	ode				
	\$1,028.38		4500 Bissonnet St. St. 370						
	. ,								
			Bellaire, TX 77401						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.	
						Political Rese		, officeholder living expense	
						r unical Rest	an		
	Complete ONLY if direct		andidate/Officeholder name	Office so	laht			Office held	
	expenditure to benefit C/OI				agin				
	Date		Payee name						
	07/10/2023		Mammoth Marketing Group						
	Amount (\$)		Payee address; City; Sta	ate; Zip C	ode				
	\$514.19		4500 Bissonnet St. St. 370						
			Bellaire, TX 77401						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.	
						Political Rese		, officeholder living expense	
						i unical rest	σαι		
_	Complete ONL V if direct	Ľ	andidate/Officeholder name	Office so				Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF				ayın				
-									

			EXPENDITURE CATEGORIES	S FOR B	OX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Off Food/Beverage Expense Po Gift/Awards/Memorials Expense Pri	ffice Overhe olling Expen rinting Exper alaries/Wage	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 18/34 Rpt: 51/67		DeAyala, Emilio F. (The Honorable)				00067768				
4	Date	5	Payee name								
	08/09/2023		Mammoth Marketing Group								
6	Amount (\$) \$514.19		Payee address; City; State; Z 4500 Bissonnet St. St. 370 Bellaire, TX 77401	Ip Code							
8	PURPOSE	(a)		(b	Description						
0	OF		Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense	e) (D	Check if travel	, тх,	de of Texas. Complete Schedule T. officeholder living expense Ch				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Offic	ce sought			Office held				
	Date		Payee name								
	10/11/2023		Mammoth Marketing Group								
	Amount (\$)		Payee address; City; State; Z	ip Code							
	\$514.19		4500 Bissonnet St. St. 370 Bellaire, TX 77401								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense Ch				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Offic	ce sought	t		Office held				
	Date		Payee name								
	11/01/2023		Mammoth Marketing Group								
	Amount (\$) \$514.19	I	Payee address; City; State; Z 4500 Bissonnet St. St. 370	Zip Code							
			Bellaire, TX 77401	iiiii							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense	le) (b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense Ch				
Complete <u>ONLY</u> if direct expenditure to benefit C/O			andidate/Officeholder name Offic	ce sought	:		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services 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)							
1	Total pages Schedule F1:	2 FILER NAME	B Filer ID (Ethics Commission Filers)							
	Sch: 19/34 Rpt: 52/67	DeAyala, Emilio F. (The Honorable)	00067768							
4	Date 09/05/2023	Payee name Mammoth Marketing Group								
6	Amount (\$) \$514.19	Payee address; City; State; Zip Code 4500 Bissonnet St. St. 370 Bellaire, TX 77401								
8	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense ArCh							
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
	Date	Payee name								
	10/11/2023	Mammoth Marketing Group								
	Amount (\$) \$4,578.98	Payee address;City;State;Zip Code4500 Bissonnet St. St. 370								
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/11/2023	Mammoth Marketing Group								
	Amount (\$) \$905.94	Payee address;City;State;Zip Code4500 Bissonnet St. St. 370								
		Bellaire, TX 77401								
	PURPOSE OF EXPENDITURE		ıtside of Texas. Complete Schedule T. IX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

			EXPENDITURE CATEGO	ORIES FOR	R BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing Ex Salaries/W	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 20/34 Rpt: 53/67		DeAyala, Emilio F. (The Honorable)				00067768				
4	Date 11/22/2023	5	Payee name Mammoth Marketing Group								
6	Amount (\$)	-		e; Zip Co	do						
0	\$5,558.75	1	Payee address; City; Stat 4500 Bissonnet St. St. 370 Bellaire, TX 77401	ιε, Ζιρ Ου	ue						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense POSTAGE											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght		Office held				
	Date		Payee name								
	12/06/2023		Mammoth Marketing Group								
	Amount (\$)		Payee address; City; Stat	e; Zip Co	de						
	\$5,558.75		4500 Bissonnet St. St. 370 Bellaire, TX 77401								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Office Overhead/Rental Expense	chedule)			de of Texas. Complete Schedule T. . officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held				
	Date		Payee name								
	09/05/2023		Mammoth Marketing Group								
	Amount (\$) \$6,981.26		Payee address; City; Stat 4500 Bissonnet St. St. 370	e; Zip Co	de						
			Bellaire, TX 77401								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Office Overhead/Rental Expense	chedule)			de of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp nmittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2				proto tino romi	3	Filer ID	(Ethics Commission Filers)
	Sch: 21/34 Rpt: 54/67	2	DeAyala, Emilio F. (The Hond	rable)			3	00067768	
4	Date	5	Payee name						
	08/09/2023		Mammoth Marketing Group						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le			
	\$372.11		4500 Bissonnet St. St. 370						
			Bellaire, TX 77401						
_						<i>"</i> 、			
8	PURPOSE OF	(a)	Category (See Categories listed at the t		edule)	(b) Description		haida of Tayloo Com	alata Cabadula T
	EXPENDITURE		Office Overhead/Rental Expe	nse				tside of Texas. Com X, officeholder living	
						POSTAGE		, enternolder innig	o.poneo
							-		
9	Complete ONLY if direct		andidate/Officeholder name		Office soug	ıht		Office he	ald
Ŭ	expenditure to benefit C/Oł					, i c		enice ne	
_	Date	<u> </u>	D						
			Payee name						
	09/28/2023		Mammoth Marketing Group						
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le			
	\$2,029.69		4500 Bissonnet St. St. 370						
			Bellaire, TX 77401						
	PURPOSE OF	(a)	Category (See Categories listed at the t		edule)	(b) Description		laide of Toyloo, Com	alata Cabadula T
	EXPENDITURE		Office Overhead/Rental Expe	nse				tside of Texas. Com X, officeholder living	
						POSTAGE		.,	
	Complete ONLY if direct		andidate/Officeholder name	C	 Office soug	ıht		Office he	eld
	expenditure to benefit C/OI					-			
-	Date	<u> </u>	Payee name						
	10/11/2023		Mammoth Marketing Group						
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le			
	\$1,319.30		4500 Bissonnet St. St. 370						
			Bellaire, TX 77401						
	PURPOSE	(a)	Category (See Categories listed at the t	op of this sche	edule)	(b) Description			
	OF EXPENDITURE		Office Overhead/Rental Expe	nse				tside of Texas. Com	
							X, officeholder living	expense	
						POSTAGE	=		
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						eld			
		-1							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	erhea pense xpens Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
-	Sch: 22/34 Rpt: 55/67		DeAyala, Emilio F. (The Honorable)					00067768	
4	Date	5	Payee name						
	09/28/2023		Mammoth Marketing Group						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de				
	\$3,750.00		4500 Bissonnet St. St. 370	•					
			Dellaire TV 77401						
			Bellaire, TX 77401						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description			
	EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T. officeholder living expense	
						Political Rese			
							Juit		
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	aht			Office held	
-	expenditure to benefit C/OI				5				
_	Date		Payee name						
	09/28/2023		•						
			Mammoth Marketing Group						
	Amount (\$)			; Zip Co	de				
	\$311.22		4500 Bissonnet St. St. 370						
			Bellaire, TX 77401						
	PURPOSE	(a)	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		Printing Expense					de of Texas. Complete Schedule T.	
		Check if Austin, T						officeholder living expense	
						Officeholder	Prir	nting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held	
		1							
	Date		Payee name						
	09/20/2023		Mammoth Marketing Group						
	Amount (\$)			; Zip Co	ode				
	\$2,500.00		4500 Bissonnet St. St. 370						
			Bellaire, TX 77401						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Consulting Expense			Check if travel	outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE							officeholder living expense	
						Politcal Cons	ulti	ng	
						Office held			
expenditure to benefit C/OH									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)						
	Sch: 23/34 Rpt: 56/67	DeAyala, Emilio F. (The Honorable)	00067768						
4	Date 10/27/2023	5 Payee name Mammoth Marketing Group							
6	Amount (\$) \$92.01	 Payee address; City; State; Zip Code 4500 Bissonnet St. St. 370 Bellaire, TX 77401 							
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense rertising						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/27/2023	Mammoth Marketing Group							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,319.30	4500 Bissonnet St. St. 370 Bellaire, TX 77401							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense tting						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H							
	Date	Payee name							
	10/27/2023	Mammoth Marketing Group							
	Amount (\$) \$541.25	Payee address;City;State;Zip Code4500 Bissonnet St. St. 370							
		Bellaire, TX 77401							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense I rCh						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense umittee Legal Services The Instruction Guide exp		Office Over Polling Exp Printing Ex Salaries/W	rhead lense pens ages	e /Contract Labor		Solicitation/Fundraising B Transportation Equipmen Travel in District Travel Out of District OTHER (enter a categor	nt & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME			-		3	Filer ID (Ethic	cs Commission Filers)	
-	Sch: 24/34 Rpt: 57/67		DeAyala, Emilio F. (The Honorab	le)					00067768		
4	Date	5	Payee name								
	10/27/2023		Mammoth Marketing Group								
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de					
	\$101.48		4500 Bissonnet St. St. 370		•						
			Bellaire, TX 77401								
8	DUDDOSE	<u> </u>				(h)	Description				
ð	PURPOSE OF		Category (See Categories listed at the top of	this sch	edule)	(u)	Description	outsi	de of Texas. Complete Sc	hodulo T	
	EXPENDITURE		Advertising Expense						officeholder living expens		
							Campaign Ad	dve	rtising		
									U		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice sou	ght			Office held		
	Date		Payee name								
	10/27/2023		Mammoth Marketing Group								
				Stata	Zip Co	40					
	Amount (\$)			State,	, ZIP CO	Je					
	\$54.12		4500 Bissonnet St. St. 370								
			Bellaire, TX 77401								
	PURPOSE	(a)	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE		Advertising Expense				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
										se	
							Campaign Ac	dve	rtising		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office held		
	Date		Payee name								
	12/01/2023		Mammoth Marketing Group								
-	Amount (\$)			State [.]	Zip Co	de					
	\$2,500.00		4500 Bissonnet St. St. 370	otato,	, 210 000						
	\$2,000.00										
			Bellaire, TX 77401								
	DUDDOCE				i	(h)	Description				
	PURPOSE OF		Category (See Categories listed at the top of	this sch	edule)	(D)	Description	outei	de of Texas. Complete Sc	hedule T	
	EXPENDITURE		Consulting Expense						officeholder living expens		
							Political Cons				
									5		
L	Complete ONLY if direct	Ļ	andidate/Officeholder name	- -	Office soug	thr			Office held		
	expenditure to benefit C/Oł			Ľ	Suice Soul	jiit			Unice field		

			EXPENDITURE CA	TEGOR	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens mittee Legal Services The Instruction Guide e:		Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission File	ers)		
	Sch: 25/34 Rpt: 58/67		DeAyala, Emilio F. (The Honoral	ble)				00067768			
4	Date	5	Payee name								
	12/01/2023		Mammoth Marketing Group								
6	Amount (\$) \$514.18		Payee address; City; 4500 Bissonnet St. St. 370 Bellaire, TX 77401	State;	Zip Cod	9					
8	PURPOSE	(a)	Category (See Categories listed at the top of	of this scho) (alube	b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expense			Check if travel	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense Ch			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	0)ffice sougl	nt		Office held			
	Date		Payee name								
	11/09/2023		Memorial West Republican Women								
	Amount (\$)		Payee address; City;	State;	Zip Cod	9					
	\$105.00		815 Elk Run Circle Houston, TX 77079								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top on Event Expense	of this sche	edule) (I		, TX	ide of Texas. Complete Schedule T. , officeholder living expense It Expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	0	Office sough	nt		Office held			
	Date	1	Payee name								
	07/01/2023		Miller, Chelsie								
	Amount (\$) \$2,000.00		Payee address; City; 21503 Harbor Water Dr.	State;	Zip Cod	Ģ					
			Cypress, TX 77433								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Salaries/Wages/Contract Labor	of this sche	edule) (I		, TX	ide of Texas. Complete Schedule T. , officeholder living expense ract Labor			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	0)ffice sougl	nt		Office held			

			EXPEND	ITURE CATEGOR	RIES FOR E	3OX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services	Expense morials Expense ion Guide explains I	Office Overhe Polling Exper Printing Expe Salaries/Wag	nse es/Contract Labor	Transportation E Travel in District Travel Out of Dis	-		
_	Tatal wares Oak adula E4			ion Guide explains i	now to comp	nete this form.		(Ethics Occurrication Films)		
1	Total pages Schedule F1: Sch: 26/34 Rpt: 59/67		FILER NAME DeAyala, Emilio F. (Th	e Honorable)			3 Filer ID 00067768	(Ethics Commission Filers)		
4	Date			· · · · · · ,						
4	09/05/2023		Payee name Miller, Chelsie							
6	Amount (\$)	7	Payee address; City;	State;	Zip Code	•				
	\$1,000.00		21503 Harbor Water D	r.						
			Cypress, TX 77433							
8	PURPOSE	(a)	Category (See Categories lis	ted at the top of this sch	edule) (b	Description				
	OF EXPENDITURE		Salaries/Wages/Contra	act Labor			outside of Texas. Com I, TX, officeholder living			
						Campaign Co		y expense		
						eanipaign et				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder na	ne C	Dffice sough	t	Office h	eld		
	Date		Payee name							
	11/21/2023		Miller, Chelsie							
	Amount (\$)		Payee address; City;	State;	Zip Code	•				
	\$1,000.00	1	21503 Harbor Water D							
		_	Cypress, TX 77433							
	PURPOSE OF EXPENDITURE		Category (See Categories lis Salaries/Wages/Contra		_{edule)} (b		outside of Texas. Com a, TX, officeholder living Ontract Labor			
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder na	ne C	Dffice sough	t	Office h	eld		
	Date		Payee name							
	08/09/2023		Miller, Chelsie							
	Amount (\$)		Payee address; City;	State;	Zip Code	•				
	\$1,000.00		21503 Harbor Water D		•					
			Cypress, TX 77433							
	PURPOSE	(a)	Category (See Categories lis	ted at the top of this sch	edule) (b	Description				
	OF EXPENDITURE		Salaries/Wages/Contra	act Labor			outside of Texas. Com			
							ı, TX, officeholder livinç Ontract Labor	y expense		
						Campaign Co				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder na	me C	Office sough	t	Office h	eld		

			EXPENDITURE CA	ATEGOF	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper mittee Legal Services The Instruction Guide e		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Lat	ense bor	Travel in District Travel Out of Dis	quipment & Related Expense		
1	Tatal pages Cabadula F1	1						Filer ID	(Ethico Commission Filoro)		
1	Total pages Schedule F1: Sch: 27/34 Rpt: 60/67		FILER NAME DeAyala, Emilio F. (The Honora	able)			3	Filer ID 00067768	(Ethics Commission Filers)		
4	Date	5	Payee name								
	10/28/2023		Miller, Chelsie								
6	Amount (\$)	7	7 Payee address; City; State; Zip Code								
	\$1,000.00		21503 Harbor Water Dr								
			Cypress, TX 77433								
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sche	edule)	b) Description					
	OF EXPENDITURE		Salaries/Wages/Contract Labor					side of Texas. Comp K, officeholder living			
									expense		
			Campaign Contract Labor								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Dffice soug	ht		Office he	ld		
	Date		Payee name								
	07/01/2023		Raconteur Media Co								
	Amount (\$)		Payee address; City;	State:	Zip Coo	e					
	\$875.00	I	1717 W 6th St. Suite 215	otato,	, <u> </u>						
	\$010.00										
			Austin, TX 78703								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Advertising Expense	of this sch	edule)		if travel outs if Austin, TX	side of Texas. Com K, officeholder living ertising			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Dffice soug	ht		Office he	eld		
	Date		Payee name								
	07/10/2023		Raconteur Media Co								
-	Amount (\$)	\vdash	Payee address; City;	State:	Zip Coo	е					
	\$1,000.00		1717 W 6th St. Suite 215	,	,p						
			Austin, TX 78703								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Advertising Expense	of this sch	edule)		if travel outs if Austin, TX	side of Texas. Com K, officeholder living B rtising			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Office soug	ht		Office he	łd		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 28/34 Rpt: 61/67	DeAyala, Emilio F. (The Honorable)	00067768					
4	Date 08/09/2023	5 Payee name Raconteur Media Co						
6	Amount (\$) 7 Payee address; City; State; Zip Code \$125.00 1717 W 6th St. Suite 215 Austin, TX 78703							
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if Austin, TX, officeholder living expense Campaign Advertising Check if Austin, TX, officeholder living expense Campaign Advertising							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/05/2023	Raconteur Media Co						
	Amount (\$) \$3,000.00	Payee address;City;State;Zip Code1717 W 6th St. Suite 215						
		Austin, TX 78703						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Vertising					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/21/2023	Raconteur Media Co						
	Amount (\$) \$10,000.00	Payee address;City;State; Zip Code1717 W 6th St. Suite 215						
		Austin, TX 78703						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Vertising					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 29/34 Rpt: 62/67	DeAyala, Emilio F. (The Honorable)	00067768					
4	Date 09/28/2023	5 Payee name Right Side Compliance						
6	Amount (\$) 7 Payee address; City; State; Zip Code \$600.00 4ustin, TX 78738							
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complaince Consulting							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/10/2023	Right Side Compliance						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$6,630.77	3595 RR 620 S. Suite 200 Austin, TX 78738						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Consulting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/09/2023	SBISD Council of PTA						
	Amount (\$) \$1,040.00	Payee address; City; State; Zip Code 955 Campbell Rd.						
		Houston, TX 77024						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Ivertising					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 30/34 Rpt: 63/67	DeAyala, Emilio F. (The Honorable) 00067768						
4	Date 09/05/2023	5 Payee name SBISD Council of PTA						
6	Amount (\$) \$325.00							
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Civic Organization Membership Fee							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/01/2023 Simms, Joanne							
	Amount (\$) \$15,750.00	Payee address; City; State; Zip Code 210 Woodland Oaks Trail						
	PURPOSE OF EXPENDITURE	X Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Accommodations					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/28/2023	Spectrum						
	Amount (\$) \$72.42	Payee address; City; State; Zip Code 2344 Rutland Drive						
		Austin, TX 78758						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense - Gift/Awards/Memorials Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule E1:	12		CAPICITY OF	1000 10 000			3	Filer ID (Ethics Commission Filers)
T	Sch: 31/34 Rpt: 64/67							O0067768	
4	Date	5	Payee name						
	10/26/2023		Spectrum						
6	Amount (\$) \$72.42								
8	PURPOSE OF EXPENDITURE	OF Travel Out of District							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office held
	Date		Payee name						
	09/26/2023		Spectrum						
	Amount (\$)		Payee address; City;	State	; Zip Co	de			
	\$72.42 2344 Rutland Drive Austin, TX 78758								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Travel Out of District	op of this sch	nedule)	(b)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office held
	Date		Payee name						
	07/26/2023		Spectrum						
	Amount (\$) \$72.42		Payee address; City; 2344 Rutland Drive	State	; Zip Co	de			
			Austin, TX 78758						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Travel Out of District	op of this sch	nedule)	(b)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office sou	ght			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Credit Card Payment								Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schodula E1	5		5 110 10 00	mp.		5	Eller ID (Ethics Commission Eilers)
1	Sch: 32/34 Rpt: 65/67							Filer ID (Ethics Commission Filers) 00067768
4	Date	5	Payee name					
	10/06/2023	Stellar Bank						
6	Amount (\$) \$3.00		Payee address; City; State 8727 W. Sam Houston Parkway N. Houston, TX 77040	e; Zip Cc	ode			
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description		
	OF EXPENDITURE Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fee							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held
	Date		Payee name					
	10/06/2023		Stellar Bank					
	Amount (\$)		Payee address; City; State	e; Zip Co	ode			
	\$12.00		8727 W.Sam Houston Parkway N. Houston, TX 77040					
PURPOSE OF EXPENDITURE		I	Category (See Categories listed at the top of this so	chedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			andidate/Officeholder name	Office sou	ight			Office held
	Date		Payee name					
	11/24/2023		Stellar Bank					
	Amount (\$)		Payee address; City; State	e; Zip Co	ode			
	\$3.00		8727 W. Sam Houston Parkway N.					
			Houston, TX 77040					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Fees	chedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 EII ER NAME	3 Filer ID (Ethics Commission Filers)						
-	Sch: 33/34 Rpt: 66/67	DeAyala, Emilio F. (The Honorable)	00067768						
4	Date	5 Payee name							
	11/24/2023	Stellar Bank							
6	Amount (\$) 7 Payee address; City; State; Zip Code \$25.00 8727 W. Sam Houston Parkway N. Houston, TX 77040								
8	DUDDOSE								
ŏ	OF EXPENDITURE								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/06/2023	Texas Pastor Council							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$250.00	P.O. Box 692207 Houston, TX 77269							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ent Expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/28/2023	Texas Right to Life							
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 4500 Bissonnet St #305							
		Bellaire, TX 77401							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ent Expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2		•		•	3	Filer ID (Ethics Commission Filers)
-	Sch: 34/34 Rpt: 67/67	-	DeAyala, Emilio F. (The	Honorable)				00067768
4	Date	5	Payee name					
	09/05/2023		The Gober Group					
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	le		
	\$2,054.00		PO Box 341016					
			Austin, TX 78734					
8	PURPOSE					(b) Description		
Ŭ	OF		Category (See Categories listed Legal Services	at the top of this sche	edule)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE		Legar Cervices			Check if Austin	, TX	, officeholder living expense
						Legal Service	es	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office sou	Iht		Office held
	Date		Payee name					
	07/10/2023		The Gober Group					
	Amount (\$) Payee address; City; State; Zip Code							
	\$3,397.00		PO Box 341016					
			Austin, TX 78734					
	PURPOSE OF EXPENDITURE		Category (See Categories listed Legal Services	at the top of this sch	edule)		, TX	ide of Texas. Complete Schedule T. , officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O			andidate/Officeholder name	С	Dffice sou	Jht		Office held
	Date		Payee name					
	11/09/2023		Village Republican Wom	ens				
-	Amount (\$)		Payee address; City;		; Zip Co	10		
	\$1,000.00		PO Box 79924	Olule,	, 20 00			
	φ1,000.00		10 000 13324					
			Houston, TX 77279					
	PURPOSE OF	(a)	Category (See Categories listed	at the top of this sch	edule)	(b) Description		
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense It Sponsorship
						Campaign El	/CII	α οροπουτοπηρ
	Complete ONILV & diversit	Ļ	andidata/Office het later			.bt		Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	JIIL		Office held