### MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

### FORM MPAC COVER SHEET PG 1

Tł	e MPAC Instruction (	2 Total pages filed: 4					
3	COMMITTEE NAME	OFFICE USE ONLY					
	Habla Y Vota Actio	n Fund					
			ELECTRONICALLY FILED				
			02/04/2024				
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP					
	ADDRE35	P.O. Box 19712					
	_						
	Change of Address	Austin, TX 78760	Date Hand-delivered or Date Postmarked				
5	CAMPAIGN	MS/MRS/MR FIRST MI					
	TREASURER	Dr. Susana	Receipt # Amount				
	NAME						
			Date Processed				
		NICKNAME LAST SUF	FIX				
		Carranza	Date Imaged				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY;	STATE; ZIP CODE				
	TREASURER STREET	40 N. IH35 Apt #4B1					
	ADDRESS						
	(Residence or Business)	Austin, TX 78701					
Ŀ							
7	CAMPAIGN TREASURER		STATE; ZIP CODE				
	MAILING	40 N. IH35 Apt #481					
	ADDRESS						
	Change of Address	Austin, TX 78701					
8	CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION					
	TREASURER						
	PHONE	(512) 981-3732					
9	REPORT TYPE						
		X Monthly 10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)				
10	MONTHLY						
1.0	REPORT FILING	January 5 April 5 July 5	October 5				
	DEADLINE						
		X February 5 May 5 August 5	November 5				
		March 5 June 5 September 5	December 5				
11	. PERIOD	Month Day Year Mon	h Day Year				
1	COVERED	THROUGH	5/2024				
	GO TO PAGE 2						
L Fo	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.9000c47f						
			10.001100000411				

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)					
Habla Y Vota Action Fu	0008657	7					
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if	A. Supported					
	applicable, classify by party.)						
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures	A. Supported					
	(Describe by date and location of election and nature of issue.)						
		B. Opposed					
	<ol> <li>Officeholders Assisted</li> </ol>						
	(Identify by name or, if applicable, classify by party.)						
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00			
	2. TOTAL POLITICA	L CONTRIBUTIONS	\$	0.00			
OTHER THAN PLEDGES, LOA EXPENDITURE 3. TOTAL UNITEMIZED POLITICA TOTALS		· · · · /	\$	0.00			
	4. TOTAL POLITICA	L EXPENDITURES	\$	10.00			
CONTRIBUTION BALANCE	ION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	611.47			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00			
16 AFFIDAVIT	•						
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.							
			a Carranza				
		Signature of Ca	mpaign frea	Suiei			
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed	his the	day					
of	of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of of	fficer administering oath			
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.9000c47f			

SUBTOTALS - MPAC	FORM MPAC	
	C	OVER SHEET PG 3 3 of 4
17 COMMITTEE NAME Habla Y Vota Action Fund	(Ethics Commission Filers)	
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 10.00
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$
		I

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food/Beverage Expense / - Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 4/4	Habla Y Vota Action Fund		00086577
4 Date	5 Payee name		
12/29/2023	Frost Bank		
6 Amount (\$) \$10.00	7 Payee address; City; State; P.O. Box 1600	Zip Code	
Expenditure from corporate funds	San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Fees	Check if travel outsid	de of Texas. Complete Schedule T. officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	L Candidate/Officeholder name Of H	fice sought	Office held