CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commis 00021186	sion Filers)	2 Total pages fil	led: 62
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE (JSE ONLY
OFFICEHOLDER NAME	The Honorable	Richard E. Pe	na		Date Received ELECTRONICA	ALLY FILED
	NICKNAME	LAST Raymond		SUFFIX	07/15/2024	
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 450349				Receipt #	Amount
Change of Address	Laredo, TX 78045				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME		Eva				
	NICKNAME	LAST	•••••	SUFFIX		
		Raymond				
6 CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE);	AP1	/ SUITE #; CITY	; STA	ATE; ZIP CODE
TREASURER ADDRESS	11024 Winburn Drive					
(Residence or Business)	Laredo, TX 78045					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO (956) 286-9500	NE NUMBER E	EXTENSION			
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after ca	
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	IROUGH	06/30/20	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE	C Otto	
	Month Day Year 03/05/2024		rimary	Runoff	Other	
	03/03/2024	G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	·		12 OFFICE SOUGH	T (if known)	
	State Representative Dis	trict 42 Webb		State Represen	tative District 42	
	•					
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 62

13 C / OH NAME	Raymond, Richard E	Pena (The Honorable)	14 Filer ID 00021186	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or politi These expenditures may have been many the been many the been of the officeholders are required to report the	ade without the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE COMMITTEE NAME			
ш	GENERAL	Richard Pena Raymond Future o	f Texas Fund	
		COMMITTEE ADDRESS		
	X SPECIFIC	PO Box 450349		
		Laredo, TX 78045		
		COMMITTEE CAMPAIGN TREASUR	ER NAME	
		Raymond, Richard		
		COMMITTEE CAMPAIGN TREASUR	ER ADDRESS	
		PO Box 450349		
		Laredo, TX 78045		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (ES OF LOANS, OR CONTRIBUTIONS		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEE	S OF LOANS)	\$ 31,675.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 13,313.06
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 359,381.87
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED A	S OF THE LAST DAY OF THE	\$ 282,786.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	S LOANS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT			under penalty of perjury, that the ac nd includes all information required ction Code.	
		The	Honorable Richard E. Pena R	aymond
		•	Signature of Candidate or Officeho	older
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal	of office.	
Signature of office	cer administering	Printed name of officer administe	oring Title of office	er administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

						3 of 62		
18 FILER NAME Raymond, Richard E. Pena (The Honorable) 19 Filer ID (Ethics Commission Filers) 00021186								
	DULE SUBTOTALS OF SCHEDULE				SUBTO	OTAL AMOUNT		
1.	X SCHEDULE A1: MONE	TARY POLITICAL CONTRIBUTIONS			\$	30,925.00		
2.	X SCHEDULE A2: NON-I	MONETARY (IN-KIND) POLITICAL CONT	RIBUTIONS		\$	750.00		
3.	SCHEDULE B: PLEDG	ED CONTRIBUTIONS			\$			
4.	SCHEDULE E: LOANS				\$			
5.	X SCHEDULE F1: POLIT	ICAL EXPENDITURES FROM POLITICAL	_ CONTRIBUTION	S	\$	335,510.28		
6.	SCHEDULE F2: UNPA	D INCURRED OBLIGATIONS			\$			
7.	SCHEDULE F3: PURC	HASE OF INVESTMENTS FROM POLITIC	CAL CONTRIBUTI	ONS	\$			
8.	X SCHEDULE F4: EXPE	NDITURES MADE BY CREDIT CARD			\$	23,871.59		
9.	SCHEDULE G: POLITI	CAL EXPENDITURES FROM PERSONAL	- FUNDS		\$			
10.	SCHEDULE H: PAYME	NT FROM POLITICAL CONTRIBUTIONS	TO A BUSINESS	OF C/OH	\$			
11.	SCHEDULE I: NON-PO	LITICAL EXPENDITURES FROM POLITIC	CAL CONTRIBUTION	ONS	\$			
12.	SCHEDULE K: INTERE TO FILER	ST, CREDITS, GAINS, REFUNDS, AND C	CONTRIBUTIONS	RETURNED	\$	300.00		
					-			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instruc	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/62	
2	FILER NAME Raymond, R	ichard E. Pena (The Honoral	ole)		3	Filer ID (Ethics Commission 00021186	on Filers)
4	Total Date 02/26/2024 Total Date 02/26/2024 Total Date Total Da		7	Amount of Contribution (\$)	\$1,000.00		
_	<u> </u>	Washington, DC 20001		2 5 1 (0 1 1 1			
8	Principal occu	pation / Job title (See Instruction	5)	9 Employer (See Instructions	;)		
	Date 04/19/2024	Full name of contributor Barrera, Ashley Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$2,500.00
	Dringinal occu	San Diego, TX 78384 pation / Job title (See Instruction		Employer (See Instructions			
	not employed		5)	not employed	')		
	Date 01/24/2024	Full name of contributor Bemporad, Raphael Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
		New York, NY 11231					
	Principal occu Marketing	pation / Job title (See Instruction	5)	Employer (See Instructions BBMG	i)		
	Date 02/24/2024	Full name of contributor Bemporad, Raphael Contributor address; City; S New York, NY 11231)		Amount of Contribution (\$)	\$25.00
	Principal occu Marketing	pation / Job title (See Instruction	5)	Employer (See Instructions BBMG)		
Date O3/24/2024 Bemporad, Raphael Contributor address; City; State; Zip Code New York, NY 11231			Amount of Contribution (\$)	\$25.00			
	Principal occu Marketing	pation / Job title (See Instruction	5)	Employer (See Instructions BBMG	·)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/62	
2	FILER NAME Raymond, R	ichard E. Pena (The Honorab	le)			3	Filer ID (Ethics Commissi 00021186	on Filers)
4	4 Date 04/24/2024 5 Full name of contributor out-of-state PAC (ID#:) Bemporad, Raphael 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00			
8		New York, NY 11231 pation / Job title (See Instructions	·)		Employer (See Instructions	 - s)		
	Marketing Date 05/24/2024	Full name of contributor Bemporad, Raphael Contributor address; City; Si			BBMG		Amount of Contribution (\$)	\$25.00
	Principal occu Marketing	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> 5)		
	Date 06/24/2024	Full name of contributor Bemporad, Raphael Contributor address; City; Si	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
		New York, NY 11231 pation / Job title (See Instructions)		Employer (See Instructions	 5)		
	Date 01/24/2024	Full name of contributor Benavides, Carlos Y. Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu rancher	pation / Job title (See Instructions)		Employer (See Instructions self employed	i)		
	Date 05/03/2024	Full name of contributor Dilworth Jr., Blackstone (I Contributor address; City; Si Sandia, TX 76383)		Amount of Contribution (\$)	\$10,000.00
	Principal occu owner/devel	pation / Job title (See Instructions oper)		Employer (See Instructions Dillworth Development	5)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/62		
2	FILER NAME Raymond, R	ichard E. Pena (The Honorable)		3	Filer ID (Ethics Commission 00021186	on Filers)	
4	Date 01/01/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00	
_	Deinsinal	Austin, TX 78757	O Frankrije (Construction				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 02/01/2024	Full name of contributor out-of-state PAC (ID#:_ Garcia, Dillia Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00	
	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 03/01/2024	Full name of contributor)		Amount of Contribution (\$)	\$25.00	
		Austin, TX 78757					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 01/03/2024	Full name of contributor out-of-state PAC (ID#:_ HILLCO PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 01/26/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/62	
2	FILER NAME Raymond, R	tichard E. Pena (The Honorable)		3	Filer ID (Ethics Commission 00021186	on Filers)
4	Date 01/26/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_		Washington, DC 20004				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 01/24/2024	Full name of contributor out-of-state PAC (ID#:_Perdue, Brandon, Fielder, Collins & Mott, LLP Contributor address; City; State; Zip Code Lubbock, TX 79408			Amount of Contribution (\$)	\$500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:_ Savoy, Jacquelyn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Port Arthur, TX 77642				
	not employe	pation / Job title (See Instructions) d	Employer (See Instructions not employed)		
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_ Savoy, Jacquelyn Contributor address; City; State; Zip Code Port Arthur, TX 77642			Amount of Contribution (\$)	\$50.00
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions not employed)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_Savoy, Jacquelyn Contributor address; City; State; Zip Code Port Arthur, TX 77642			Amount of Contribution (\$)	\$50.00
	Principal occu not employe	upation / Job title (See Instructions)	Employer (See Instructions not employed)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/62	
2	FILER NAME Raymond, R	chard E. Pena (The Honorable)		3	Filer ID (Ethics Commission 00021186	on Filers)
4	Date 06/01/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Port Arthur, TX 77642 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	not employed		not employed			
	Date 04/12/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Property Tax Professionals Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Helotes, TX 78023				
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/25/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Property Tax Professionals Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Helotes, TX 78023				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Sands PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$4,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78767)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		l				

ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A1
ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/62
Richard E. Pena (The Honorable)		3 Filer ID (Ethics Commission Filers) 00021186
<u> </u>		7 Amount of Contribution (\$) \$500.00
San Antonio, TX 78265		
upation / Job title (See Instructions)	9 Employer (See Instructions	s)
2	ction Guide explains how to complete this cichard E. Pena (The Honorable) 5 Full name of contributor out-of-state PAC (ID Zachry Corporation Political Action Committee 6 Contributor address; City; State; Zip Code San Antonio, TX 78265	Sichard E. Pena (The Honorable) Full name of contributor out-of-state PAC (ID#:) Zachry Corporation Political Action Committee Contributor address; City; State; Zip Code San Antonio, TX 78265

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/62 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Raymond, Richard E. Pena (The Honorable) 00021186 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 05/15/2024 Earle Aviation LLC \$750.00 | Austin - Laredo - Austin 7 Contributor address; City; State; Zip Code airfare to attend groundbreaking event San Antonio, TX 78240 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 1/29 Rpt: 11/62	Raymond, Richard E. Pena (The Honorable) 00021186	
4	Date	5 Payee name	
	02/27/2024	Ana Maria Ramos Campaign	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	P.O. Box 852227	
		Richardson, TX 75085	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		contribution	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/OI		
	Date	Payee name	
	01/25/2024	Avila, Juan (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$750.00	2704 E Locust	
		Laredo, TX 78043	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		campaign work	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	=
	05/21/2024	Avila, Juan (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$800.00	2704 E Locust	
		Laredo, TX 78043	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense campaign work	
		- Campaign work	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (output a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 2/29 Rpt: 12/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	06/08/2024	Best Western-El Paso
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$491.73	2001 Airway Blvd
		El Paso, TX 79925
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		lodging for campaign staff for Texas Democratic
		Party state convention
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	01/22/2024	CitiBank
	Amount (\$)	Payee address; City; State; Zip Code P.O. Box 44180
	\$11,653.01	P.O. Box 44180
		Jacksonville, FL 32231
_	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		credit card payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/05/2024	CitiBank
	Amount (\$)	Payee address; City; State; Zip Code
	\$22,827.53	P.O. Box 44180
	, ,	
		Jacksonville, FL 32231
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		credit card payment
	Complete ONL V if direct	Condidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u> </u>	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		<u>_</u>
1	Total pages Schedule F1: Sch: 3/29 Rpt: 13/62	2 FILER NAME Raymond, Richard E. Pena (The Honorable) 3 Filer ID (Ethics Commission Filers) 00021186
4	Date	5 Payee name
	05/22/2024	CitiBank
6	Amount (\$) \$466.64	7 Payee address; City; State; Zip Code P.O. Box 44180
		Jacksonville, FL 32231
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		credit card payment
		Credit eard payment
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/10/2024	CitiBank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,668.11	P.O. Box 44180
		Jacksonville, FL 32231
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		credit card payment
		Silvani vana payinisini
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/27/2024	City of Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$272.45	721 Barton Springs Rd.
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense
		officeholder water, electric, trash, wastewater
		utilities for Austin rental house
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica		mmittee	Legal Services		Salaries/M		e /Contract Labor		OTHER (enter a	strict a category not listed	above)
	Credit Card Payment			The Instruction G	uide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Comm	ission Filers)
	Sch: 4/29 Rpt: 14/62		Raymond, F	Richard E. Pena	a (The Honor	able)				00021186		
4	Date	5	Payee name									
	01/30/2024		City of Aust	in								
6	Amount (\$)	7	Payee addre	ss; City;	State:	Zip Co	de					
_	\$272.62	ľ	•	Springs Rd.	,							
	*			- prinige ritin								
			Auctin TV	70704								
_		⊢	Austin, TX									
8	PURPOSE OF	(a)		ee Categories listed at		dule)	(b)	Description		d4.T O		
	EXPENDITURE		Office Over	head/Rental Ex	pense			ш		officeholder livin	nplete Schedule T. g expense	
								officeholder w				vater
								utilities for Au				
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice sou	aht			Office h	eld	
-	expenditure to benefit C/OI						9					
_	Date	Т	D									
	03/29/2024		Payee name City of Aust	in								
		<u> </u>										
	Amount (\$)		Payee addre	•	State;	Zip Co	ae					
	\$234.85		721 Barton	Springs Rd.								
			Austin, TX	78704								
	PURPOSE OF	(a)		ee Categories listed at		dule)	(b)	Description				
	EXPENDITURE		Office Over	head/Rental Ex	pense			—		de of Texas. Con officeholder livin	nplete Schedule T.	
								officeholder v				vater
								utilities for Au				
	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice sou	aht			Office h	eld	
	expenditure to benefit C/OI						9					
	Date	_	Daysos nama									
	04/30/2024		Payee name City of Aust	in								
		_			04-4	7:- 0-	-1-					
	Amount (\$)		Payee addre		State;	Zip Co	ae					
	\$212.26		721 Barton	Springs Rd.								
			Austin, TX	78704		·						
	PURPOSE OF	(a)		ee Categories listed at		dule)	(b)	Description				
	EXPENDITURE		Office Over	head/Rental Ex	pense			ш		de of Texas. Con , officeholder livin	nplete Schedule T.	
								officeholder w				vater
								utilities for Au				
	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI				0.		J					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	·	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/29 Rpt: 15/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	05/28/2024	City of Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$221.83	721 Barton Springs Rd.
		Austin, TX 78704
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		officeholder water, electric, trash, wastewater
		utilities for Austin rental house
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/02/2024	Domain Property Management
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,948.71	13552 US-183 A
		Austin, TX 78750
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI LINDITORL	X Check if Austin, TX, officeholder living expense
		rental housing in Austin for officeholder
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/02/2024	Domain Property Management
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,948.71	13552 US-183 A
		Austin, TX 78750
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAFENDITURE	X Check if Austin, TX, officeholder living expense
		rental housing in Austin for officeholder
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		vel Out of District HER (enter a category not listed above)
1	Total pages Schedule F1:	T	er ID (Ethics Commission Filers)
_	Sch: 6/29 Rpt: 16/62		021186
4	Date	5 Payee name	
	03/04/2024	Domain Property Management	
6	Amount (\$) \$3,948.71	7 Payee address; City; State; Zip Code 13552 US-183 A Austin, TX 78750	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	, , , , , , , , , , , , , , , , , , , ,	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought DH	Office held
	Date	Payee name	
	04/02/2024	Domain Property Management	
	Amount (\$) \$3,948.71	Payee address; City; State; Zip Code 13552 US-183 A	
		Austin, TX 78750	
	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 X Check if Austin, TX, office rental housing in Au	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought DH	Office held
	Date	Payee name	
	05/02/2024	Domain Property Management	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,948.71	13552 US-183 A	
		Austin, TX 78750	
	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 X Check if Austin, TX, office rental housing in Au	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought DH	Office held
			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (carbon a extension and listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	T	
1	Total pages Schedule F1: Sch: 7/29 Rpt: 17/62	2 FILER NAME Raymond, Richard E. Pena (The Honorable) 3 Filer ID (Ethics Commission Filers) 00021186
4	Date	5 Payee name
	06/03/2024	Domain Property Management
6	Amount (\$) \$3,948.71	7 Payee address; City; State; Zip Code 13552 US-183 A Austin, TX 78750
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EAPENDITORE	X Check if Austin, TX, officeholder living expense rental housing in Austin for officeholder
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/06/2024	Early Childhood Caucus of the Texas House of Representatives
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	6531 San Pedro Ave
		San Antonio, TX 78216
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/01/2024	El Manana Publishing
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 6010 McPherson Rd, 300
		Laredo, TX 78045
	PURPOSE	(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 officeholder ads
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/29 Rpt: 18/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	01/02/2024	Falcon Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$800.00	7718 McPherson Rd.
		Laredo, TX 78045
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		loan payment
		iour paymont
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	02/02/2024	Falcon Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	7718 McPherson Rd.
		Laredo, TX 78045
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		loan payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/04/2024	Falcon Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	7718 McPherson Rd.
		Laredo, TX 78045
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement
		Check if Austin, TX, officeholder living expense
		loan payment
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 9/29 Rpt: 19/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	04/02/2024	Falcon Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$800.00	7718 McPherson Rd.
		Laredo, TX 78045
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense loan payment
		ioan payment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	05/02/2024	Falcon Bank
⊢	Amount (\$)	Payee address; City; State; Zip Code
l	\$800.00	7718 McPherson Rd.
	4000.00	TT 20 INOT NOTCOTT NO.
		Laredo, TX 78045
┝	PURPOSE	
l	OF	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		loan payment
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
l	Date	Payee name
	06/03/2024	Falcon Bank
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$800.00	7718 McPherson Rd.
l		L. v. d. TV 70045
L		Laredo, TX 78045
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		loan payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/29 Rpt: 20/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	06/05/2024	Falcon Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$53,774.52	7718 McPherson Rd.
		Laredo, TX 78045
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		loan payment
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/Oi	
	Date	Payee name
	04/25/2024	Garza, Alma
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1620 San Bernardo Ave
		Laredo, TX 75040
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign work
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	- CARPONIANCE TO SOME OF CO.	
	Date	Payee name
	01/03/2024	Gracy's Cleaning Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$160.00	11508 Arrowmound Pass
		Del Valle, TX 78617
	PURPOSE	
	OF	(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.
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		cleaning services for officeholder Austin rental house
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guid	Salaries	/Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 11/29 Rpt: 21/62	Raymond,	Richard E. Pena (1	Γhe Honorable)				00021186	
4	Date	5 Payee name)						
	01/16/2024	Gracy's Cle	eaning Service						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode				
	\$160.00	11508 Arro	wmound Pass						
		Del Valle, ⁻	ΓX 78617						
8	PURPOSE	(a) Category (s	See Categories listed at the t	top of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Ove	rhead/Rental Expe	nse		_		ide of Texas. Com	
						_		, officeholder living	older Austin rental house
						cicaring serv	7100	3 IOI OIIICCII	older Adstill Tellial House
9	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Office so	ught			Office he	eld
_	Data								
	Date	Payee name							
	01/31/2024	Gracy's Cle	eaning Service						
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$160.00	11508 Arro	wmound Pass						
		Del Valle, ⁻	ΓX 78617		•				
	PURPOSE OF		See Categories listed at the t		(b)	Description			
	EXPENDITURE	Office Ove	rhead/Rental Expe	nse				ide of Texas. Com , officeholder living	
						\Box			older Austin rental house
						orearming con-			
	Complete ONLY if direct	L Candidate/Of	ficeholder name	Office so	<u>l</u> ught			Office he	eld
	expenditure to benefit C/OI				3				
	Date	Payee name	<u> </u>						
	02/22/2024	Gracy's Cl	eaning Service						
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$160.00	1 -	wmound Pass	, p					
	4200.00								
		Del Valle, ⁻	ΓX 78617						
	PURPOSE	(a) Category (s	See Categories listed at the t	top of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Ove	rhead/Rental Expe	nse		ш		ide of Texas. Com	
	LAFENDITORE					_		, officeholder living	
						cleaning serv	/ICE	es for officen	older Austin rental house
	Complete ONLY if allowed	Condid-+-/01	Soobolder ner-	Offi	uel-4			Off:!	old
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	uynt			Office he	c iu
_									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cobadula F1	
1	Total pages Schedule F1: Sch: 12/29 Rpt: 22/62	2 FILER NAME Raymond, Richard E. Pena (The Honorable) 3 Filer ID (Ethics Commission Filers) 00021186
Ļ	•	
4	Date	5 Payee name
	03/01/2024	Gracy's Cleaning Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$160.00	11508 Arrowmound Pass
		Dol Vallo, TV 79617
L		Del Valle, TX 78617
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
		cleaning services for officeholder Austin rental hous
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	n
	Date	Payee name
	03/03/2024	Gracy's Cleaning Service
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$160.00	11508 Arrowmound Pass
	Φ100.00	TIOO AIIUWIIIUUIIU FASS
		Del Valle, TX 78617
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAFEINDITUKE	X Check if Austin, TX, officeholder living expense
		cleaning services for officeholder Austin rental house
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
H	Date	Payee name
	03/12/2024	Gracy's Cleaning Service
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$160.00	11508 Arrowmound Pass
		Del Valle, TX 78617
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		cleaning services for officeholder Austin rental hous
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Н

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Sal		ages	/Contract Labor		OTHER (enter		t listed above)
				The Instruction G	uide explains how	to con	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ē					3	Filer ID	(Ethics C	commission Filers)
	Sch: 13/29 Rpt: 23/62		Raymond, F	Richard E. Pena	(The Honorab	le)				00021186		
4	Date	5	Payee name									
	03/29/2024			aning Service								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zi	ip Cod	de					
	\$160.00		11508 Arrov	wmound Pass								
			Del Valle, T	X 78617								
8	PURPOSE	(a)				. 1	(h)	Description				
ľ	OF	(")		ee Categories listed at t head/Rental Ex		⁽²⁾	(5)		outsi	de of Texas. Co	mplete Schedu	ule T.
	EXPENDITURE		Office Over	nead/Nental Ex	perise					officeholder livi		
								cleaning serv	rice	s for office	nolder Au	stin rental house
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Offic	e soug	jht			Office I	neld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	04/10/2024		Gracy's Cle	aning Service								
	Amount (\$)		Payee addres	ss; City;	State; Zi	ip Cod	le					
	\$160.00		11508 Arrov	wmound Pass								
			Del Valle, T	X 78617								
	PURPOSE	(a)		ee Categories listed at t		. 10	(h)	Description				
	OF	(")		ee Categories listed at t head/Rental Ex		'	(~)	_ ·	outsi	de of Texas. Co	mplete Schedu	ule T.
	EXPENDITURE				po.100			X Check if Austin	, TX,	officeholder livi	ng expense	
								cleaning serv	ice	s for office	nolder Au	stin rental house
	Complete ONLY if direct		Candidate/Offi	ceholder name	Offic	e soug	jht			Office I	neld	
	expenditure to benefit C/OI	П										
	Date		Payee name									
	04/24/2024		Gracy's Cle	aning Service								
	Amount (\$)		Payee addres	ss; City;	State; Zi	ip Cod	de					
	\$160.00		11508 Arrov	wmound Pass								
			Del Valle, T	X 78617								
	PURPOSE	(a)	Category (Si	ee Categories listed at t	he top of this schedule	e) ((b)	Description				
	OF EXPENDITURE			head/Rental Ex		,			outsi	de of Texas. Co	mplete Schedu	ule T.
	EXPENDITORE							_		officeholder livi		
								cleaning serv	rice	s for office	nolder Au	stin rental house
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offi	ceholder name	Offic	e soug	jht			Office I	neld	
	Oracide to borionic Oron											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Git/Jawards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Sa		ages	/Contract Labor		OTHER (enter	a category not listed abov	ve)
	oroun ouru r aymone			The Instruction G	uide explains how	v to con	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ē					3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 14/29 Rpt: 24/62		Raymond, F	Richard E. Pena	(The Honorab	ole)				00021186		
4	Date	5	Payee name									
	05/22/2024		Gracy's Cle	aning Service								
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	ip Cod	de					
	\$160.00		11508 Arrov	wmound Pass								
			Del Valle, T	X 78617								
8	PURPOSE	(a)		ee Categories listed at t	the ten of this schedule	0)	(b)	Description				
	OF	`		head/Rental Ex		e) '	(,		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Omoc Oven	ricaariteritai Ex	perioe			X Check if Austin,	, TX,	officeholder livin	g expense	
								cleaning serv	ice	s for officel	older Austin ren	tal house
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Offic	ce soug	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	06/07/2024		Gracy's Cle	aning Service								
	Amount (\$)		Payee addres	ss; City;	State; Z	ip Cod	de					
	\$160.00		11508 Arrov	wmound Pass								
			Del Valle, T	X 78617								
	PURPOSE	(a)	Category (Sc	ee Categories listed at t	the ton of this schedule	e)	(b)	Description				
	OF			head/Rental Ex					outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE			'	•			ш		officeholder livin		
								cleaning serv	ice	s for officel	nolder Austin ren	tal house
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	Offic	ce soug	ght			Office h	eld	
	experialiture to beliefit C/Oi											
	Date		Payee name									
	06/21/2024		Gracy's Cle	aning Service								
	Amount (\$)		Payee addres	ss; City;	State; Z	ip Cod	de					
	\$160.00		11508 Arro	wmound Pass								
			Del Valle, T	X 78617								
	PURPOSE	(a)	Category (Se	ee Categories listed at t	he top of this schedule	e)	(b)	Description				
	OF EXPENDITURE			head/Rental Ex				ш			nplete Schedule T.	
	LAI LINDITORE							_		officeholder livin		
								cleaning serv	ice	s for officer	nolder Austin ren	tal house
	Commission ONU Wife allows	L,	On malial - t - 10 ""		0"		u la +			Office 1	ald	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Jandidate/Offi	ceholder name	Offic	ce soug	ynt			Office h	eiu	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		
	orean out a tyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 15/29 Rpt: 25/62	Raymond, Richard E. Pena (The Honorable) 00021186	
4	Date	5 Payee name	
	02/22/2024	House Democratic Campaign Committee	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$8,000.00	P.O. Box 1925	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee	
		Contribution	
_	Complete ONLY if direct	Condidate/Officeholder name Office country	_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_			_
	Date	Payee name	
	03/25/2024	Infocus Campaigns	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,636.00	PO Box 10726	
		Fort Worth, TX 76114	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense build voter contact files	
		build voter cortact mes	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
		Cuellar, Nosie (Ms.) State Representative District of Mone	_
	Date	Payee name	
	05/06/2024	Jarvis Johnson Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10,000.00	PO Box 16600	
		Houston, TX 77222	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	EXPENDITORE	Candidate/Officeholder/Political Committee	
		contribution	
			_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	experiorare to belieff C/OI	1	
<u> </u>	rms provided by Tayas E	thics Commission Warrion V/ 1.0 d378abs	_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 16/29 Rpt: 26/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	03/28/2024	LULAC #22387
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$800.00	P.O. Box 420516
		Laredo, TX 78042
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		donation
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/17/2024	Laredo Gateway Rotary Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 6246
		Laredo, TX 78042
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Candidate/Officeholder/Political Committee
		donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	exponditure to benefit 6/01	•
	Date	Payee name
L	05/16/2024	Lone Star Project
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	700 13th St. N.W., Ste 600
		Washington, DC 76111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAI LINDITURE	Candidate/Officeholder/Political Committee
		contribution
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	CAPETIGITUTE TO DETICITE C/OI	

SCHEDULE F1

The straining Expense Event Expense Event Expense Loan Repayment/Reimbur Community Com

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 17/29 Rpt: 27/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	04/02/2024	Mike Villarreal Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	3301 S Buena Vista, Ste A
		Laredo, TX 78040
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAFENDITORE	Candidate/Officeholder/Political Committee
		contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/08/2024	Mundo Publicitario
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	1001 Market
		Laredo, TX 78040
_	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		officeholder ads
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/21/2024	Richard Pena Raymond Future of Texas Fund
-	Amount (\$)	Payee address; City; State; Zip Code
	\$50,000.00	P.O. Box 450349
	Ψ50,000.00	1.0. 500 430043
		Laureda, TV 70045
		Laredo, TX 78045
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/29 Rpt: 28/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	05/28/2024	Rosie Cuellar Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20,000.00	PO Box 451801
		Laredo, TX 78045
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
		contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
٥	expenditure to benefit C/O	
_	Date	Davies same
	01/02/2024	Payee name Sciaraffa, Frank
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 3735
	!	
		Laredo, TX 78044
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	!	campaign work
	!	outipuigh work
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
┝	Data	
	Date 03/10/2024	Payee name Sciaraffa, Frank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	P.O. Box 3735
		Laredo, TX 78044
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign work
		Campaign None
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/29 Rpt: 29/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	04/10/2024	Sciaraffa, Frank
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code P.O. Box 3735
		Laredo, TX 78044
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign work
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/24/2024	Sciaraffa, Frank
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code P.O. Box 3735
		Laredo, TX 78044
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign work
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/01/2024	Sciaraffa, Frank
	Amount (\$) \$10,000.00	Payee address; City; State; Zip Code P.O. Box 3735
		Laredo, TX 78044
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign work
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/29 Rpt: 30/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	06/18/2024	Sciaraffa, Frank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10,000.00	P.O. Box 3735
		Laredo, TX 78044
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		campaign work
		oampaign work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
—	Date	Payee name
	05/10/2024	Shawn Thierry Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	3139 W Holcombe #A346
		Houston, TX 77025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Contribution
		Contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	06/04/2024	State Bar of Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$415.00	1414 Colorado St.
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense state bar dues for campaign staff
		State bai dues foi campaign stan
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/29 Rpt: 31/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	01/09/2024	T-Mobile
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	P.O. Box 742596
		Cincinnati, OH 45274-2596
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		cell phone for campaign staff
		Cell phone for eampaight stain
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	02/09/2024	T-Mobile
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	P.O. Box 742596
		Cincinnati, OH 45274-2596
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense cell phone for campaign staff
		Cell phone for campaigh stail
	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	Date	Payee name
	03/09/2024	T-Mobile
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	P.O. Box 742596
		Cincinnati, OH 45274-2596
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		cell phone for campaign staff
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialitate to bettern 6/01	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		
1	Total pages Schedule F1: Sch: 22/29 Rpt: 32/62	2 FILER NAME Raymond, Richard E. Pena (The Honorable) 3 Filer ID (Ethics Commission Filers) 00021186
4	Date	5 Payee name
	04/09/2024	T-Mobile
6	Amount (\$) \$125.00	7 Payee address; City; State; Zip Code P.O. Box 742596
		Cincinnati, OH 45274-2596
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	2/11/21/01/12	Check if Austin, TX, officeholder living expense
		cell phone for campaign staff
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/09/2024	T-Mobile
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	P.O. Box 742596
		Cincinnati, OH 45274-2596
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		cell phone for campaign staff
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/09/2024	T-Mobile
	00/03/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	P.O. Box 742596
		Cincinnati, OH 45274-2596
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI LIMITORE	Check if Austin, TX, officeholder living expense
		cell phone for campaign staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	•	
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/29 Rpt: 33/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	02/24/2024	Tejano Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	1000 Washington St.
		Laredo, TX 78040
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Continuation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	04/01/2024	Texas Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$15,000.00	314 E Highland Mall Blvd #508
		Austin, TX 78752
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	D :	
	Date	Payee name
	02/28/2024	Texas Gas Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$152.51	P.O. Box 31427
		El Paso, TX 79901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Uniceriolaer gas dunices for Austin rental House
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 24/29 Rpt: 34/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	01/30/2024	Texas Gas Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$147.84	P.O. Box 31427
		El Paso, TX 79901
8	PURPOSE	
ľ	OF	(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.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		officeholder gas utilities for Austin rental house
0	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	03/28/2024	Texas Gas Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.73	P.O. Box 31427
		El Paso, TX 79901
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel published at Taylor Camplete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense
		officeholder gas utilities for Austin rental house
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/26/2024	Texas Gas Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.93	P.O. Box 31427
		El Paso, TX 79901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		officeholder gas utilities for Austin rental house
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

se Travel in District
se Travel Out of Distr
se OTHER (enter a c

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract The Instruction Guide explains how to complete this			OTHER (enter a	category not listed above)	
1	Total pages Cabadula F1:			_	Tilor ID	(Ethios Commission Filors)	
1	Total pages Schedule F1: Sch: 25/29 Rpt: 35/62	Raymond, Richard E. Pena (The Honorable)	3		Filer ID 00021186	(Ethics Commission Filers)	
_	<u> </u>						
4	Date	5 Payee name					
	05/29/2024	Texas Gas Service					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$45.87	P.O. Box 31427					
		El Paso, TX 79901					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ription				_
	OF		•	utsid	e of Texas. Com	plete Schedule T.	
	EXPENDITURE	X Ch			officeholder living		
		office	eholder ga	ลร เ	utilities for A	Austin rental house	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld	
	expenditure to benefit C/OI	1					
	Date	Payee name					_
	06/26/2024	Texas Gas Service					
	Amount (\$)	Payee address; City; State; Zip Code					_
	\$39.15	P.O. Box 31427					
		El Paso, TX 79901					
	PURPOSE		uintin n				
	OF	(a) Category (see Categories listed at the top of this schedule) (b) Description Overhead/Pointal Evenings		ıtsid	e of Texas. Com	plete Schedule T.	
	EXPENDITURE	Onice Overricad/Nertial Expense			officeholder living		
		office	eholder ga	ลร เ	utilities for A	Austin rental house	
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld	_
	expenditure to benefit C/OI	1					
	Date	Payee name					_
	02/03/2024	Trevino, Tom					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$500.00	8811 Liberty Loop 7 City					
	φ300.00	COLL FINANCE COOP 1 Only					
		Loredo TV 70045					
		Laredo, TX 78045					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descri		,toid	a of Toyon Com	plata Cabadula T	
	EXPENDITURE	Contributions/Bonations Made By			officeholder living	plete Schedule T.	
		_				all Academies	
				_		•	
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld	
	expenditure to benefit C/OI	9			2,1100 110		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T. 1 0 1 1 54		
1	Total pages Schedule F1:		
	Sch: 26/29 Rpt: 36/62	Raymond, Richard E. Pena (The Honorable) 00021186	
4	Date	5 Payee name	
	03/02/2024	Trevino, Tom	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	\$500.00	8811 Liberty Loop 7 City	
	φοσο.σσ	Soli Liberty Loop / Oity	
		Laredo, TX 78045	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee	
		campaign work	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experialture to benefit C/Oi		
	Date	Payee name	
	05/09/2024	Trevino, Tom	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	8811 Liberty Loop 7 City	
	φοσο.σσ	Soli Liberty Loop / Oity	
		1 774 700 45	
		Laredo, TX 78045	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee	
		donation to Earedo Basketbali Academies	
_	Operation ONLY if allowed	One districts (Office healths grown and the control of the control	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/19/2024	Villarreal, Graciela	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,000.00	4008 Aguascalientes	
		Laredo, TX 78046	
	PURPOSE	I	
	OF	, <u> </u>	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		unused leave	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/29 Rpt: 37/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	05/10/2024	Villarreal, Graciela
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	4008 Aguascalientes
		Laredo, TX 78046
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense unused leave
		unuseu leave
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date	Payee name
	05/10/2024	Villarreal, Graciela
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,400.00	4008 Aguascalientes
		Laredo, TX 78046
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense unused leave
		unuscu icave
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	05/01/2024	Payee name Villarreal, Graciela
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	4008 Aguascalientes
		Laredo, TX 78046
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense unused leave
		unuseu leave
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/29 Rpt: 38/62	Raymond, Richard E. Pena (The Honorable) 00021186
4	Date	5 Payee name
	04/01/2024	Villarreal, Graciela
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	4008 Aguascalientes
		Laredo, TX 78046
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		unused leave
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experialitie to beliefft C/Of	1
	Date	Payee name
	06/17/2024	Webb County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	101 W Village Blvd
		Laredo, TX 78041
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		contribution
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/20/2024	Webb County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	101 W Village Blvd
		Laredo, TX 78041
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	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/Political Committ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				ages	/Contract Labor	Travel Out of Dis OTHER (enter a	trict category not listed above)
<u> </u>	T.1 6111=:	<u>-</u>		5011	٠,٠.٠		E1 15	(Ethio: O
1	Total pages Schedule F1:	2		.1		3	Filer ID	(Ethics Commission Filers)
	Sch: 29/29 Rpt: 39/62		Raymond, Richard E. Pena (The Honorab	oie)			00021186	
4	Date	5	Payee name					
	05/07/2024		Women's City Club of Laredo					
6	Amount (\$)	7	Payee address; City; State; Z	ip Cod	de			
	\$500.00		P.O. Box 450084					
			Laredo, TX 78045					
8	PURPOSE	⊢	Category (See Categories listed at the top of this schedule	1	(b)	Description		
ľ	OF		Contributions/Donations Made By	ie)	(,	Check if travel outs	ide of Texas. Com	olete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Committe	ee		Check if Austin, TX		
						donation		
9	Complete ONLY if direct		Candidate/Officeholder name Offic	ce soug	ght		Office he	eld
	expenditure to benefit C/OI	Н						
H	Date		Payee name					
	05/10/2024	ı	Women's City Club of Laredo					
_	Amount (\$)	_	Payee address; City; State; Z	in Cod	<u></u>			
	\$100.00	ı	P.O. Box 450084	.p C00				
	φ100.00		1 .0. 50% 430004					
			1 I. TV 70045					
		_	Laredo, TX 78045					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule	le)	(b)	Description		
	EXPENDITURE		Contributions/Donations Made By			Check if travel outs Check if Austin, TX		
			Candidate/Officeholder/Political Committe	: e		donation	, onicenduel living	capello c
						20110011		
_	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Offic	ce soug	ht		Office he	ald.
	expenditure to benefit C/OI		Office Traine Office	oc soug	,,,,,		Onice ne	nu .

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 1/22 Rpt: 40/62	Raymond, Richard	E. Pena (The Honorab	le)		00021186		
4	CREDIT CARD ISSUER		ncial institution Bank	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	9,619.0	62
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$314.10	06/30/2024					
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		OnStar		PO Box				
Ļ		() 0 :			MI 48090			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equips Expense		(b) Descri OnStar s	ption safety services fo	r campaign vel	nicles for	six months
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living expense		
9	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	, ,) Credit Card Issue	r Paid		
		\$87.44	05/07/2024	06/10/20	J24			
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Spectrum		2438 Mo	narch Dr Suite A	-500 Suite A		
					TX 78045			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description internet/wi-fi for campaign				
	X Political	Office Overhead/Ren		Internet/wi-fi for campaign				
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$235.08	03/26/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Taco Palenque		7122 Bo	b Bullock Loop #	20		
		raco Falerique						
L		(a) Oatawar		+	TX 78041			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	ption officeholder mee	ting with suppo	rtore	
	X Political	Food/Beverage Expe	nse	1000 101	omcendidei inee	ung with suppo	11013	
	Non-Political	(a) 🗖 (b) = 1, 16, 17, 17, 17, 17, 17, 17, 17, 17, 17, 17	of Toyon Committee C. L. L. E.	<u> </u>	Chertista	office he late a late		
\vdash		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX	office held	ense	
e e	Complete ONLY if direct expenditure to benefit C/OH	Janaiaaio, Jilioenoidei	name Offic	o oougiit		Omeo nelu		
H								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************		,	
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)	
	Sch: 2/22 Rpt: 41/62	Raymond, Richard	E. Pena (The Honorab	le)		00021186			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	9,619.6	62	
6	PAYMENT	(a) Amount Charged \$14.19	(b) Date of Charge 05/02/2024	(c) Date(s) 06/10/20) Credit Card Issuei 124	Paid			
7	PAYEE	(a) Payee name Taco Palenque			address; b Bullock Loop #2 FX 78041	City, 20	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description food for officeholder meeting with supporters					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin. TX.	"X, officeholder living expense			
9	Complete ONLY if direct	Candidate/Officeholder	·	e sought		Office held			
e	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$12.63	(b) Date of Charge 05/11/2024	(c) Date(s) 06/10/20) Credit Card Issuei 124	Paid			
	PAYEE	(a) Payee name Taco Palenque			address; b Bullock Loop #2 FX 78041	City, 20	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description food for officeholder meeting with supporters					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
€	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$17.61	(b) Date of Charge 06/19/2024	(c) Date(s)) Credit Card Issuei	⁻ Paid			
	PAYEE (a) Payee name Taco Palenque			address; b Bullock Loop #2 FX 78041	City, 20	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description (b) Description (c) Descriptio	otion officeholder meeti	ing with suppor	ters		
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought		Office held			
l									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			;	3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 3/22 Rpt: 42/62	Raymond, Richard	E. Pena (The Honorab	le)	l	00021186		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNIT EXPENDITURES CHARGED TO A CARD	s ;	\$	9,619.6	62
6 PAYMENT	(a) Amount Charged \$184.00	(b) Date of Charge 04/04/2024	(c) Date(s) Credit C 06/10/2024	Card Issuer I	Paid		
7 PAYEE	(a) Payee name Extra Space Storag	je	(b) Payee address; 6412 Burnet Rd Austin, TX 78757		City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description storage space fo in Austin	or campaigi	gn and officeholder items		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check	c if Austin, TX, of	fficeholder living exp	oense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged \$184.00	(b) Date of Charge 05/04/2024	(c) Date(s) Credit C 06/10/2024	Card Issuer I	Paid		
PAYEE	PAYEE (a) Payee name (b) Payee address; 6412 Burnet Rd Extra Space Storage Austin, TX 78757				City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description storage space for campaign and officeholder items in Austin				S
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check	c if Austin, TX, of	fficeholder living exp	oense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged \$184.00	(b) Date of Charge 06/04/2024	(c) Date(s) Credit C	Card Issuer I	Paid		
PAYEE	(a) Payee name Extra Space Storag	je	(b) Payee address; 6412 Burnet Rd Austin, TX 78757		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description storage space fo in Austin	or campaigi	n and officeh	older item	S
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	Check e sought	c if Austin, TX, of	fficeholder living exp	oense	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to cor	mplete thi	s form.			
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 4/22 Rpt: 43/62	Raymond, Richard	E. Pena (The Honorab	ole)			Paid City, State, Zip Cte. 1020 fficeholder living expense Office held		
4	CREDIT CARD ISSUER		ncial institution revious	E	XPEND	F UNITEMIZED TURES D TO A CREDIT	\$	9,619.6	62
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid		
		\$300.00	04/07/2024	06/	/10/2024	1			
7	PAYEE	(a) Payee name		(b) I	Payee ac	ldress;	City,	State,	Zip Code
		Naleo		141	15 N. Lo	op West Fwy, S	Ste. 1020		
						X 77008			
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this cobodula)	1 ` ′	Descripti	on			
	EXPENDITURE	Contributions/Donatio		dor	nation				
	X Political	Political Candidate/Officeholder/Political Committee							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	, officeholder living expense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sou	ght		Office held		
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid		
		\$41.68	01/05/2024	03/	/05/2024	1			
	PAYEE	(a) Payee name	<u> </u>	(b) F	Payee ac	ldress;	City,	State,	Zip Code
		Stripes - Del Mar		250	01 E. De	el Mar Blvd			
				Lar	edo, TX	78041			
	PURPOSE OF	(a) Category			Descripti				
	EXPENDITURE	(See Categories listed at the top		gasoline for campaign vehicle					
	X Political	Transportation Equipr Expense	Hent And Related						
	Non-Political	(*) —	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sou	ght		Office held		
e	xpenditure to benefit C/OH		T # > = = = = = = = = = = = = = = = = = =	1					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	` '	Date(s) C /10/2024	redit Card Issuer	Paid		
		\$46.85	04/02/2024	00/	10/202	•			
H	PAYEE	(a) Payee name	l	(b) I	Payee ac	ldress;	City,	State,	Zip Code
				250	01 E. De	el Mar Blvd			
		Stripes - Del Mar							
				Lar	edo, TX	78041			
	PURPOSE OF	(a) Category		(b) I	Descripti	on			
	EXPENDITURE	(See Categories listed at the top Transportation Equipr	*	gas	soline fo	r campaign veh	nicle		
	X Political	Expense	HEHLAHU NEIGLEU						
	Non-Political		of Texas. Complete Schedule T.	•		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sou	ght	_	Office held		
е	xpenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(*	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 5/22 Rpt: 44/62	Raymond, Richard	E. Pena (The Honorab	le)		00021186		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	9,619.6	62
6	PAYMENT	(a) Amount Charged \$20.07	(b) Date of Charge 03/30/2024	(c) Date(s) 06/10/20) Credit Card Issue 124	r Paid		
7	PAYEE	(a) Payee name AT&T - Laredo			n Bernardo Ave.	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	TX 78041 otion n for officeholder	Pad		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought					Office held			
	PAYMENT	(a) Amount Charged \$1,500.00	(b) Date of Charge 02/26/2024	(c) Date(s) 03/05/20) Credit Card Issue 124	r Paid		
	PAYEE	(a) Payee name Christian Manuel C	ampaign	(b) Payee address; 1310 Calvin St Beaumont, TX 77707		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde		(b) Description	ption			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$148.10	(b) Date of Charge 01/05/2024	(c) Date(s) 03/05/20) Credit Card Issue 124	r Paid		
	PAYEE	(a) Payee name AT&T - Laredo			address; n Bernardo Ave. TX 78041	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descripofficeholowireless	der mobile teleph			
$ldsymbol{ldsymbol{ldsymbol{eta}}}$	Non-Political	` 1	of Texas. Complete Schedule T.	0.00116.64	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commiss	sion Filers)		
	Sch: 6/22 Rpt: 45/62	Raymond, Richard	E. Pena (The Honorab	le)	00021186			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 9,619.6	52		
6	PAYMENT	(a) Amount Charged \$148.10	(b) Date of Charge 02/05/2024	(c) Date(s) Credit Card Issuer 03/05/2024	r Paid			
7	PAYEE	(a) Payee name AT&T - Laredo		(b) Payee address; 5704 San Bernardo Ave.	City, State,	Zip Code		
Ļ		(a) Oataman		Laredo, TX 78041				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description officeholder mobile teleph wireless	none and computer			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	C, officeholder living expense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
Ľ	expenditure to benefit C/OH		.					
	PAYMENT	(a) Amount Charged \$148.41	(b) Date of Charge 04/05/2024	(c) Date(s) Credit Card Issuel 06/10/2024	r Paid			
	PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
		AT&T - Laredo		5704 San Bernardo Ave.				
L				Laredo, TX 78041				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description officeholder mobile telephone and computer wireless				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX.	officeholder living expense			
H	Complete ONLY if direct	Candidate/Officeholder		e sought	Office held			
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$80.00	(b) Date of Charge 01/14/2024	(c) Date(s) Credit Card Issuer 03/05/2024	r Paid			
PAYEE		(a) Payee name		(b) Payee address; PO Box 537104 Atlanta, GA 30353	City, State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	•	(b) Description officeholder internet in Au	stin			
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expense			
€	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commis	sion Filers)	
	Sch: 7/22 Rpt: 46/62	Raymond, Richard	E. Pena (The Honorab	le)	00021186			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	9,619.6	62	
6	PAYMENT	(a) Amount Charged \$80.00	(b) Date of Charge 03/12/2024	(c) Date(s) Credit Card Issuer 05/22/2024	r Paid			
7	PAYEE	(a) Payee name AT&T		(b) Payee address; PO Box 537104 Atlanta, GA 30353	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description officeholder internet in Aus	stin			
	Non-Political		of Texas. Complete Schedule T.	X Check if Austin, TX,		ense		
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held				
	PAYMENT	(a) Amount Charged \$80.42	(b) Date of Charge 05/12/2024	(c) Date(s) Credit Card Issuer 06/10/2024	r Paid			
	PAYEE	(a) Payee name		(b) Payee address; PO Box 537104	City,	State,	Zip Code	
L				Atlanta, GA 30353				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description officeholder internet in Austin				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expe	ense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$80.00	(b) Date of Charge 06/12/2024	(c) Date(s) Credit Card Issuer	r Paid			
	PAYEE	(a) Payee name		(b) Payee address; PO Box 537104 Atlanta, GA 30353	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	XPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description officeholder internet in Aus				
lacksquare	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	X Check if Austin, TX,		ense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	s form.	(9-	.,	,	
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 8/22 Rpt: 47/62	Raymond, Richard	E. Pena (The Honorab	le)		00021186			
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	9,619.6	62	
6 PAYMENT	(a) Amount Charged \$57.62	(b) Date of Charge 02/01/2024	(c) Date(s) C 03/05/2024	redit Card Issuer I	r Paid			
7 PAYEE	(a) Payee name Chevron #0107135		(b) Payee ad 3324 North	land Dr	City,	State,	Zip Code	
			Austin, TX					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description gasoline fo	oline for campaign vehicle				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	Paid City, State, Zip Cod Cle City, State, Zip Cod City City, State, Zip Cod City City City City City City City City		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$62.01	(b) Date of Charge 05/05/2024	(c) Date(s) C 06/10/2024	redit Card Issuer I	r Paid			
PAYEE	(a) Payee name Chevron #0107135		(b) Payee ad 3324 North	land Dr	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		Austin, TX (b) Description gasoline fo		nicle			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
PAYMENT	(a) Amount Charged \$3,550.63	(b) Date of Charge 01/23/2024	(c) Date(s) C 03/05/2024	redit Card Issuer I	r Paid			
PAYEE	(a) Payee name Allstate Insurance C	Company	(b) Payee address; P.O. Box 660598 Dallas, TX 75266		City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipn Expense		(b) Description insurance f	on or campaign ve	ehicles for six ı	months		
Non-Political	<u> </u>	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
I								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commissio	n Filers)		
Sch: 9/22 Rpt: 48/62	Raymond, Richard	E. Pena (The Honorab	le)	00021186			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 9,619.62			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$148.10	03/07/2024	05/22/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
	AT&T - Laredo		5704 San Bernardo Ave.				
	(-) 0-1		Laredo, TX 78041				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	one and computer			
X Political	Office Overhead/Rent	,	officeholder mobile teleph wireless	топе апа сотпратег			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$198.29	(b) Date of Charge 05/06/2024	(c) Date(s) Credit Card Issue 06/10/2024	er Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
	AT&T - Laredo		5704 San Bernardo Ave.				
DUDDOSE OF	(a) Cotagon;		Laredo, TX 78041 (b) Description				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		officeholder mobile telephone and computer				
X Political	Office Overhead/Rent	tal Expense	wireless				
Non-Political	- · · · -	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$180.57	06/05/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City, State,	Zip Code		
	AT&T - Laredo		5704 San Bernardo Ave.				
			Laredo, TX 78041				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	,	officeholder mobile teleph	none and computer			
X Political	Office Overhead/Rent	tal Expense	wireless	•			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
·							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Insti	ruction Guide explains how	to complete this form.	(* ** *********************************		,	
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 10/22 Rpt: 49/62	Raymond, Richard	E. Pena (The Honorabl	e)	00021186			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	9,619.6	62	
6	PAYMENT	(a) Amount Charged \$80.42	(b) Date of Charge 02/13/2024	(c) Date(s) Credit Card Issue 03/05/2024	r Paid			
7	PAYEE	(a) Payee name		(b) Payee address; PO Box 537104 Atlanta, GA 30353	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description officeholder internet in Au (c) Check if travel outside of Texas. Complete Schedule T.			stin			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expe	ense		
9 e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$80.00	(b) Date of Charge 03/12/2024	(c) Date(s) Credit Card Issue	r Paid			
	PAYEE	(a) Payee name AT&T		(b) Payee address; PO Box 537104 Atlanta, GA 30353	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description officeholder internet in Au	stin			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expe	ense		
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$29.72	(b) Date of Charge 01/14/2024	(c) Date(s) Credit Card Issue 01/22/2024	r Paid			
	PAYEE	(a) Payee name Chevron #0107135		(b) Payee address; 3324 Northland Dr Austin, TX 78731	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipn Expense	ment And Related	(b) Description gasoline for campaign vel				
	Non-Political	1	of Texas. Complete Schedule T.		Office hold	ense		
е	Complete ONLY if direct xpenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name Office sought Office held penditure to benefit C/OH						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)				
Sch: 11/22 Rpt: 50/62	Raymond, Richard	E. Pena (The Honoral	ole)	00021186						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	9,619.6	52				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
	\$67.66	03/03/2024	05/22/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Chevron #0107135		3324 Northland Dr							
			Austin, TX 78731							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description							
X Political	Transportation Equipment And Related Expense (a) Debak if transportation of Taylor Campleto School La Taylor Campleto Sch			nicle						
Non-Political	(c) Great adversariate or restar.			officeholder living exp	ense					
9 Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name Office sought			Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$46.61	(b) Date of Charge 03/17/2024	(c) Date(s) Credit Card Issue 05/22/2024	r Paid						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Chevron #0107135		3324 Northland Dr							
			Austin, TX 78731							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
X Political	Transportation Equipr Expense		gasoline for campaign vehicle							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought	Office held						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
	\$324.50	03/16/2024	05/22/2024							
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code				
	Discount Tire - Aus	tin	8219 Research Blvd.							
			Austin, TX 78753							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top	,	campaign vehicle repair							
X Political	Transportation Equipment And Related Expense									
Non-Political	Check if Austin, TX,	officeholder living exp	ense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought	Office held						
	·									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Printing Expense
Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)		
	Sch: 12/22 Rpt: 51/62	Raymond, Richard	E. Pena (The Honorab	le)		00021186				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	9,619.6	62		
6	PAYMENT	(a) Amount Charged \$494.48	(b) Date of Charge 04/24/2024	(c) Date(s) 06/10/20) Credit Card Issuei 24	r Paid				
7	PAYEE	(a) Payee name Doubletree Austin		(b) Payee 303 W. 1	5th St.	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	XPENDITURE (See Categories listed at the top of this schedule) Travel Out of District Indiging for staff Indi								
				officeholder living exp	ense					
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office				e sought		Office held				
	PAYMENT	(a) Amount Charged \$595.95	(b) Date of Charge 01/28/2024	(c) Date(s) 03/05/20) Credit Card Issuei 24	r Paid				
	PAYEE	(a) Payee name Southwest Airlines		(b) Payee P.O. Box Dallas, T	36647 - 1CR Da	City, allas	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descri		ceholder to Ha	rlingen, 1	· exas		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$85.43	(b) Date of Charge 01/07/2024	(c) Date(s) 01/22/20) Credit Card Issuei 24	r Paid				
	PAYEE	(a) Payee name Spectrum			address; narch Dr Suite A- TX 78045	City, -500 Suite A	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	JRPOSE OF (a) Category (PENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description internet/wi-fi for camp				l				
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
ı										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:		<u> </u>	·	3 Filer ID (Ethic	s Commiss	sion Filers)			
	Sch: 13/22 Rpt: 52/62		E. Pena (The Honorab	le)	00021186		,			
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	9,619.6	62			
6	PAYMENT	(a) Amount Charged \$87.44	(b) Date of Charge 04/07/2024	(c) Date(s) Credit Card Issuer Paid 06/10/2024						
7	PAYEE	(a) Payee name Spectrum		(b) Payee address; City, State, Zi 2438 Monarch Dr Suite A-500 Suite A Laredo, TX 78045			Zip Code			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description internet/wi-fi for campaign	ı					
					officeholder living expe	ense				
9 Complete ONLY if direct Candidate/Officeholder name Office sought			e sought	Office held						
e	expenditure to benefit C/OH			_						
	PAYMENT	(a) Amount Charged \$87.44	(b) Date of Charge 06/07/2024	(c) Date(s) Credit Card Issue	r Paid					
	PAYEE	(a) Payee name Spectrum		(b) Payee address; 2438 Monarch Dr Suite A Laredo, TX 78045	City, -500 Suite A	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description internet/wi-fi for campaign	l					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense				
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
	PAYMENT	(a) Amount Charged \$248.00	(b) Date of Charge 05/30/2024	(c) Date(s) Credit Card Issue	r Paid					
	PAYEE (a) Payee name Laredo Heat Soccer Club		er Club	(b) Payee address; 7220 A Bob Bullock Loop. Laredo, TX 78041	City, , Suite 4A	State,	Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		•	(b) Description tickets for officeholder and supporters to soccer game			jame			
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	ense				
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Office	e sought	Office held					
l										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)			
	Sch: 14/22 Rpt: 53/62	Raymond, Richard	E. Pena (The Honorabl	e)		00021186					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$ 9,619.62		52			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	er Paid					
		\$44.37	01/27/2024	03/05/20	24						
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
		Taco Palenque			Bullock Loop #	20					
Ļ	DUDDOOT 05	(a) Cataman		Laredo, 7							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion officeholder mee	ting with suppo	rtore				
	X Political	Food/Beverage Expe	nse	1000 101 0	micenolder mee	ung with suppo	ricis				
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, office			ense						
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	xpenditure to benefit C/OH		1	T							
	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 05/04/2024	(c) Date(s) 06/10/20	Credit Card Issue 24	er Paid					
	PAYEE	YEE (a) Payee name (b) Payee address;		City,	State,	Zip Code					
		Laredo Chamber of	f Commerce	5702 McI	Pherson Rd Suit	te 8B					
				Laredo, 1	X 78041						
	PURPOSE OF	(a) Category		(b) Descrip	tion						
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		donation							
	X Political	Candidate/Officeholde									
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense				
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid					
		\$233.91	03/09/2024	05/22/20	24						
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
		Holiday Inn Express	s - Houston	9300 S M	lain St						
				Houston,	TX 77025						
	PURPOSE OF	(a) Category		(b) Descrip							
	EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	lodging fo	or officeholder						
	X Political										
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Aus				Check if Austin, TX	, officeholder living exp	ense				
Complete ONLY if direct Candidate/Officeholder name Office sought					Office held						
е	xpenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)			
	Sch: 15/22 Rpt: 54/62	Raymond, Richard	E. Pena (The Honorabl	e)	00021186					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	9,619.6	62			
6	PAYMENT	(a) Amount Charged \$220.33	(b) Date of Charge 01/17/2024	(c) Date(s) Credit Card Issuel 03/05/2024	r Paid					
7	PAYEE	(a) Payee name Direct TV		(b) Payee address; P.O. Box 5014	City,	State,	Zip Code			
Ļ		(-) O-t		Carol Stream, IL 60197						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description officeholder cable in Austi	n					
	Non-Political	(c) Check if travel outside	vel outside of Texas. Complete Schedule T. X Check if Austin, TX,			, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
е	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$220.33	(b) Date of Charge 02/17/2024	(c) Date(s) Credit Card Issuel 03/05/2024	r Paid					
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
		Direct TV		P.O. Box 5014						
				Carol Stream, IL 60197						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description officeholder cable in Austi	n					
	Non-Political	() [
┡		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense				
е	Complete ONLY if direct expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$220.33	(b) Date of Charge 06/17/2024	(c) Date(s) Credit Card Issuel	r Paid					
	PAYEE	(a) Payee name Direct TV		(b) Payee address; P.O. Box 5014 Carol Stream, IL 60197	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		,	(b) Description officeholder cable in Austi	n					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. X Check if Austin				X Check if Austin, TX,	officeholder living exp	ense				
е	Complete ONLY if direct expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commiss	sion Filers)				
Sch: 16/22 Rpt: 55/62	Raymond, Richard	E. Pena (The Honorab	le)	0002118	6					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITI EXPENDITURES CHARGED TO A CARD	; \$	9,619.6	62				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	ard Issuer Paid						
	\$85.43	02/07/2024	03/05/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Spectrum			Suite A-500 Suite	Α					
	Laredo, TX 78045			5						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
X Political		e Overhead/Rental Expense								
Non-Political	n-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, office		f Austin, TX, officeholder livi	ng expense						
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office he	ld					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$87.44	(b) Date of Charge 03/07/2024	(c) Date(s) Credit Ca 05/22/2024	ard Issuer Paid						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Spectrum			Suite A-500 Suite	Α					
	() 0 :		Laredo, TX 78045	5						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description internet/wi-fi for ca	ampaign						
X Political		tai Experies								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if	f Austin, TX, officeholder livi	ng expense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office he	ld					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$90.21	(b) Date of Charge 01/26/2024	(c) Date(s) Credit Ca 03/05/2024	ard Issuer Paid						
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code				
	Tago Dalangua		7122 Bob Bullock	Loop #20						
	Taco Palenque									
			Laredo, TX 78041	L						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	lar maating with a	ınnartara					
<u> </u>	_ Food/Beverage Expense			ler meeting with su	ipporters					
X Political			<u> </u>							
				f Austin, TX, officeholder livi						
Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name Office sought Office held									
experiulture to beliefit C/OH	Rependiture to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	ion Filers)			
Sch: 17/22 Rpt: 56/62	Raymond, Richard	E. Pena (The Honorab	le)		00021186					
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$ 9,619.62		2			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid					
	\$16.44	04/26/2024	06/10/202	24						
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
	Taco Palenque			Bullock Loop #2	20					
8 PURPOSE OF	(a) Category		Laredo, TX (b) Descript							
8 PURPOSE OF EXPENDITURE	(See Categories listed at the top	to category ee Categories listed at the top of this schedule) ood/Beverage Expense (b) Description food for officeholder meeting			ing with suppo	orters				
Non-Political	(c) Check if travel outside	de of Texas. Complete Schedule T. Check if Austin, TX			officeholder living ex	nense				
9 Complete ONLY if direct				Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
	\$82.25	05/30/2024								
PAYEE (a) Payee name (b) Payee address;			ddress;	City,	State,	Zip Code				
	Taco Palenque			Bullock Loop #2	20					
			Laredo, T							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description food for officeholder meeting with supporters							
X Political	T dod/Beverage Exper	nisc								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held					
PAYMENT	(a) Amount Charged \$184.00	(b) Date of Charge 01/04/2024	(c) Date(s) (03/05/202	Credit Card Issue 24	r Paid					
PAYEE	(a) Payee name	ı	(b) Payee a	ddress;	City,	State,	Zip Code			
	Extra Space Storag	10	6412 Burn	net Rd						
	Extra Space Storag	,,	l							
	(a) Catamani		Austin, TX							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript	ace for campai	nn and officeh	older item	c			
X Political	Office Overhead/Rental Expense			sace for campai	gir and onicen	older item	3			
				officeholder living ex	nense					
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Oneok ii Austili, TX,	Office held	репос				
expenditure to benefit C/OH										
	l									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)		
	Sch: 18/22 Rpt: 57/62	Raymond, Richard	E. Pena (The Honorab	le)		00021186				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$	9,619.6	32		
6	PAYMENT	(a) Amount Charged \$184.00	(b) Date of Charge 02/04/2024	(c) Date(s) 03/04/20	Credit Card Issue 24	er Paid				
7	PAYEE	(a) Payee name Extra Space Storag	ge	(b) Payee 6412 Bur Austin, T	net Rd	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	POSE OF ENDITURE Political (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description storage space for campaign in Austin			ign and officeholder items					
L	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	pense			
9 Complete ONLY if direct candidate/Officeholder name office sought expenditure to benefit C/OH					Office held					
	PAYMENT	(a) Amount Charged \$184.00	(b) Date of Charge 03/04/2024	(c) Date(s) 05/22/20	Credit Card Issue 24	r Paid				
	PAYEE	(a) Payee name Extra Space Storaç	je	(b) Payee 6412 Bur Austin, T	net Rd	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descrip		ign and officeh	older item	IS		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	pense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$220.33	(b) Date of Charge 03/17/2024	(c) Date(s) 05/22/20	Credit Card Issue 24	r Paid				
	PAYEE	(a) Payee name Direct TV		(b) Payee P.O. Box Carol Str		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	al Expense			nonco			
\vdash	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	X Check if Austin, TX	Office held	pense			
е	xpenditure to benefit C/OH	ourididate/Officeriolider	That To Think	o oougiit		Office field				
ı										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

		The Inst	ruction Guide explains how	to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 19/22 Rpt: 58/62	Raymond, Richard	E. Pena (The Honorab	le)	00021186			
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED		0.010.1	20	
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDIT CARD	. \$	9,619.6	52	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$220.33	04/17/2024	06/10/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Direct TV		P.O. Box 5014				
				Carol Stream, IL 60197				
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this colored (Is)	(b) Description				
	EXPENDITURE X Political	Office Overhead/Rental Expense			in			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX	K, officeholder living expense			
9	Complete ONLY if direct Candidate/Officeholder name Office sought			Office held				
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 06/10/2024	r Paid			
		\$220.33	05/17/2024	06/10/2024				
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
		Direct TV		P.O. Box 5014				
				Carol Stream, IL 60197				
	PURPOSE OF	(a) Category	-f.4b-i	(b) Description				
	EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		officeholder cable in Austin				
	X Political		•					
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. X Check if Austin, TX, officeholder living expense				
l	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
е	expenditure to benefit C/OH			1				
l	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 03/05/2024	r Paid			
		\$69.65	02/15/2024	03/03/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Stripes - Del Mar		2501 E. Del Mar Blvd				
				Laredo, TX 78041				
Г	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE (See Categories listed at the top of this schedule) Transportation Equipment And Related			gasoline for campaign ve	hicle			
	X Political Expense Expense							
District Dis				Check if Austin, TX	, officeholder living expe	ense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	s Commiss	sion Filers)				
Sch: 20/22 Rpt: 59/62	Raymond, Richard	E. Pena (The Honorab	le)	00021186						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	9,619.6	32				
6 PAYMENT	(a) Amount Charged \$70.81	(b) Date of Charge 04/25/2024	(c) Date(s) Credit Card Issue 06/10/2024	er Paid						
7 PAYEE	(a) Payee name Stripes - Del Mar		(b) Payee address; 2501 E. Del Mar Blvd Laredo, TX 78041	City,	State,	Zip Code				
8 PURPOSE OF EXPENDITURE X Political	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense			(b) Description gasoline for campaign vehicle						
Non-Political				(, officeholder living expe	ense					
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sou			e sought	Office held						
PAYMENT	(a) Amount Charged \$20.07	(b) Date of Charge 02/28/2024	(c) Date(s) Credit Card Issue 03/05/2024	er Paid						
PAYEE	(a) Payee name AT&T - Laredo		(b) Payee address; 5704 San Bernardo Ave. Laredo, TX 78041	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description data plan for officeholder	iPad						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	(, officeholder living expe	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held						
PAYMENT	(a) Amount Charged \$20.07	(b) Date of Charge 04/29/2024	(c) Date(s) Credit Card Issue 06/10/2024	er Paid						
PAYEE	(a) Payee name AT&T - Laredo		(b) Payee address; 5704 San Bernardo Ave. Laredo, TX 78041	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description data plan for officeholder iPad						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				C, officeholder living expe	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense 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

Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 21/22 Rpt: 60/62 Raymond, Richard E. Pena (The Honorable) 00021186 **CREDIT CARD** Name of financial institution TOTAL OF UNITEMIZED 9,619.62 **EXPENDITURES ISSUER** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$40.14 05/29/2024 PAYEE (a) Payee name (b) Payee address; Citv. State. Zip Code 5704 San Bernardo Ave. AT&T - Laredo Laredo, TX 78041 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) data plan for officeholder iPad Office Overhead/Rental Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 06/10/2024 \$79.58 04/12/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code PO Box 537104 AT&T Atlanta, GA 30353 PURPOSE OF (a) Category (b) Description (See Categories listed at the top of this schedule) **EXPENDITURE** officeholder internet in Austin Office Overhead/Rental Expense x Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH (b) Date of Charge PAYMENT (a) Amount Charged (c) Date(s) Credit Card Issuer Paid 06/10/2024 \$500.00 03/26/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 1720 N Mays St Alan Simms Campaign Round Rock, TX 78664 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) contribution Contributions/Donations Made By X Political Candidate/Officeholder/Political Committee Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held

expenditure to benefit C/OH

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica		ices Sal ruction Guide explains how		THER (enter a category not listed above)		
1 Total pages Schedule F4:		· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics Commission Filers)		
Sch: 22/22 Rpt: 61/62		E. Pena (The Honorab	le)	00021186		
4 CREDIT CARD ISSUER	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 9,619.62		
6 PAYMENT	(a) Amount Charged \$74.68	(b) Date of Charge 03/13/2024	(c) Date(s) Credit Card Issuer 05/22/2024	r Paid		
Taco Palenque Lare			(b) Payee address; City, State, Zip Cod 7122 Bob Bullock Loop #20 Laredo, TX 78041			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description food for officeholder meeting with supporters			
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$31.39	(b) Date of Charge 03/05/2024	(c) Date(s) Credit Card Issuel 05/22/2024	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	AT&T-MoPac		5770 N. MoPac Expwy, Ste 100			
PURPOSE OF	(a) Category		Austin, TX 78731 (b) Description			
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		accessories for officehold	er iPad and phone		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 62/62 2 FILER NAME Filer ID (Ethics Commission Filers) Raymond, Richard E. Pena (The Honorable) 00021186 5 Name of person from whom amount is received 8 Amount (\$) 06/30/2024 \$300.00 Raymond, Richard (The Honorable) 6 Address of person from whom amount is received; City; State; Zip Code Laredo, TX 78045 Purpose for which amount is received Check if political contribution returned to filer deposit to political fund for inadvertent or incidental use of campaign vehicle