#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00067895 100 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Luz Elena D. NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Chapa CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE X Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** The Honorable Leticia NAME NICKNAME LAST **SUFFIX** Van de Putte **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 854-6604 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 4 District 4 Court Of Appeals, Justice

**GO TO PAGE 2** 

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 100

13 C / OH NAME	Chapa, Luz Elena D.	(The Honorable)		14 Filer ID 00067895	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted These expenditures may have officeholders are required to	e been made without t	he candidate's or off	iceholder's kı	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
<b>□</b>	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TI	REASURER NAME			
		COMMITTEE CAMPAIGN TI	REASURER ADDRES	SS		
16 CONTRIBUTION	1 TOTAL UNITEM	7FD DOLITICAL CONTRIBU	TIONS/OTUED TUAN			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBU ES OF LOANS, OR CONTRIE			\$	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUA	DANTEES OF LOANS	2)	\$	194,866.71
EXPENDITURE TOTALS	,	ZED POLITICAL EXPENDIT		5)	\$	0.00
	4. TOTAL POLIT	CAL EXPENDITURES			\$	33,160.16
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINT RIOD	AINED AS OF THE LA	AST DAY OF THE	\$	184,248.40
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTST TING PERIOD	ANDING LOANS AS	OF THE LAST DAY	\$	0.00
<b>17</b> AFFIDAVIT		true and o	r affirm, under penalty correct and includes al e 15, Election Code.			
			The Honora	ble Luz Elena D. C	Chapa	
			Signature of	Candidate or Officeh	nolder	
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
		aid		, this the		day
of	, 20, to ce	rtify which, witness my hand	and seal of office.			
Signature of office	eer administering oath	Printed name of officer a	administering oath	Title of office	cer administe	ring oath

### **SUBTOTALS - JC/OH**

### FORM JC/OH **COVER SHEET PG 3**

					3 of 100
	LER NAM	ME uz Elena D. (The Honorable)	<b>19</b> Filer ID 00067895	(Ethic	s Commission Filers)
		E SUBTOTALS SCHEDULE		5	SUBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	187,905.43
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	6,961.28
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	33,160.16
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	· 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	2.29

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	- 1	otal pages Schedule A(J)1 sch: 1/57 Rpt: 4/100	:
2	FILER NAME				3 F	iler ID (Ethics Commission	on Filers)
	Chapa, Luz	Elena D. (The Honorable)			0	0067895	
4 Date 5 Full name of contributor out-of-state PA 03/22/2024 Allen Stein & Durbin		out-of-state PAC (ID#	:)	7 A	mount of Contribution (\$)	\$1,500.00	
		6 Contributor address; City;	State; Zip Code				
		San Antonio, TX 78201					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse	(if any)	
12	! If contributor i	s a child, law firm of parent(s) (i	if any)				
-	Date	Full name of contributor	out-of-state PAC (ID#	: )	ΙA	mount of Contribution (\$)	
	05/16/2024	Almaraz Jr, Rosendo				<b>(·/</b>	\$2,604.48
		Contributor address; City;	State: 7in Code				, ,
		McAllen, TX 78504					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
	Contributor's	employer/law firm		Law firm of contributor's s	spouse	(if any)	
	Almaraz Lav	V					
	If contributor i	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#	:)	A	mount of Contribution (\$)	
	06/07/2024	Alvarez, Omar G					\$1,000.00
	Contributor address; City; State; Zip Code						
		San Antonio, TX 78258					
		Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm & Associates		Law firm of contributor's s	spouse	(if any)	
		s a child, law firm of parent(s) (i	of any)				
	ii continuator i	s a crilia, law litti of paretil(s) (i	ii arry)				
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	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 2/57 Rpt: 5/100		
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 03/14/2024	_ `		7	Amount of Contribution (\$) \$260.73	
		Helotes, TX 78023				
8		Principal Occupation		9 Contributor's Job Title		
	Fourth Court			Justice		
10	Contributor's 6 Fourth Court	employer/law firm t of Appeals		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	06/13/2024 Andrade, Rey  Contributor address; City; State; Zip Code				\$5,000.00	
		Helotes, TX 78023				
		Principal Occupation		Contributor's Job Title		
	Trucking Co			Founder		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Del Rey Exp					
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/14/2024	Andrews, Daniel				\$104.48
	Contributor address; City; State; Zip Code  San Antonio, TX 78248					
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	USAA					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 3/57 Rpt: 6/100
2	FILER NAME	E z Elena D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067895	
4			)	7 Amount of Contribution (\$) \$156.56	
		San Antonio, TX 78248			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	•
	Attorney			Attorney	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12		s a child, law firm of parent(s) (i	f any)		
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/20/2024	Archer, Christian	United State 1 AC (ID#.		\$1,000.00
	00/20/2024	Contributor address; City;	State: 7in Code		
		San Antonio, TX 78212			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Consultant			Consultant	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (i	f any)	<u> </u>	
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/19/2024	Below, Christopher	_		\$260.73
		Contributor address; City;	State; Zip Code		
		San Antonio, TX 78232			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's s	pouse (if any)
		of Christopher Below			
	If contributor i	s a child, law firm of parent(s) (i	f any)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 4/57 Rpt: 7/100			
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895	
4	Date 03/11/2024	5 Full name of contributor out-of-state PAC (ID#:) 7		7 Amount of Contribution (\$) \$2,000	00	
_	0	San Antonio, TX 78217		O O O O O O O O O O O O O O O O O O O		
8		Principal Occupation		9 Contributor's Job Title		
	Homemaker			Homemaker		
10	Homemaker	employer/law firm		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if an	y)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	_
	04/14/2024 Biedenharn, Kathy  Contributor address; City; State; Zip Code  San Antonio, TX 78217			\$500.	00	
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Homemaker			Homemaker		
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	Homemaker					
	If contributor is	s a child, law firm of parent(s) (if an	у)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
	04/08/2024	Bracewell PAC  Contributor address; City; Sta	te; Zip Code		 \$500.	00
	Canadurila uta ula I	San Antonio, TX 78212		Contributorio Joh Titlo		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if an	у)			

	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 5/57 Rpt: 8/100
2	FILER NAME	AME		3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)		00067895
4	Date	5 Full name of contributor  ut-of-state PAC (IE	D#:)	7 Amount of Contribution (\$)
	03/26/2024	Brown, Olga		\$150.00
		6 Contributor address; City; State; Zip Code		
		San Antonio, TX 78209		
8		Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10		employer/law firm	11 Law firm of contributor's s	spouse (if any)
		of Olga Brown		
12	! If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  out-of-state PAC (IE	D#:)	Amount of Contribution (\$)
	05/08/2024	Brown, Olga		\$250.00
		Contributor address; City; State; Zip Code		··· <b> </b>
		San Antonio, TX 78209		
	Contributor's	I Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Law Office of	of Olga Brown		
	If contributor	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  out-of-state PAC (ID	D#: )	Amount of Contribution (\$)
	06/25/2024	Brunkenhoefer, Blake		\$2,500.00
		Contributor address; City; State; Zip Code		··· <mark> </mark>
		Corpus Christi, TX 78401		
	Contributor's	I Principal Occupation	Contributor's Job Title	_ <b>L</b>
	Attorney	·	Attorney	
-		employer/law firm	Law firm of contributor's s	spouse (if any)
	BRUNKENH			
	If contributor i	s a child, law firm of parent(s) (if any)		
_				

MONET	TARY POLITICAL CONTRIBUT	IONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 6/57 Rpt: 9/100	
2 FILER NAME Chapa, Luz	Elena D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067895
4 Date 03/29/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$1,000.00
	San Antonio, TX 78230		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's Langley & B	employer/law firm ranack	11 Law firm of contributor's s	pouse (if any)
	is a child, law firm of parent(s) (if any)		
Date	Full name of contributor  out-of-state PAC (ID	)#· )	Amount of Contribution (\$)
06/30/2024	Campos, Shaunda	····	\$250.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78258	1	
	Principal Occupation	Contributor's Job Title	
Homemakei		Homemaker	
Homemakei	employer/law firm r	Law firm of contributor's s	pouse (if any)
If contributor	is a child, law firm of parent(s) (if any)	•	
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
04/04/2024	Carter, James		\$260.73
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78209		
Contributor's Attorney	Principal Occupation	Contributor's Job Title Attorney	
	employer/law firm	Law firm of contributor's s	nouse (if any)
JW Carter L		Law IIIII of Continution 5.5	pouse (ii ariy)
If contributor	is a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	1 Total pages Schedule A(J)1: Sch: 7/57 Rpt: 10/100		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)			00067895
4	Date 06/06/2024	5 Full name of contributor Casseb, Joseph	out-of-state PAC (ID#	:	7 Amount of Contribution (\$) \$521.15
		6 Contributor address; City;	State; Zip Code		
		San Antonio, TX 78212			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title Attorney	1
10		employer/law firm seb Riklin Choate & Watson		11 Law firm of contributor's s	pouse (if any)
12		s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	04/03/2024	Cavender, Katie Contributor address; City;			\$250.00
		San Antonio, TX 78232			
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Homemaker			Homemaker	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Homemaker				
	If contributor i	s a child, law firm of parent(s) (i	f any)		
F	Date	Full name of contributor	out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	04/03/2024	Chapa , Adriana			\$350.00
	Contributor address; City; State; Zip Code				
		San Antonio, TX 78230			
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Speech Language Pathologist Speech Language Path		hologist		
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Ensign				
	If contributor i	s a child, law firm of parent(s) (i	f any)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 8/57 Rpt: 11/100		
2	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Chapa, Luz	Elena D. (The Honorable)			00067895
4	4 Date 06/30/2024 5 Full name of contributor out-of-state PAC (ID#:) Chapa, Javier 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$5,000.00		
		Los Angeles, CA 90067			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	•
	Producer			Partner	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Mucho Más	Media			
12	If contributor i	s a child, law firm of parent(s) (if	any)	•	
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	03/09/2024	Chapa, Javier			\$2,604.48
		Contributor address; City; S	State; Zip Code		···
		, ,,	, ,		
		Los Angeles, CA 90067			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Producer			Partner	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Mucho Más	, ,			
		s a child, law firm of parent(s) (if	anv)		
			5,7		
H	Date	Full name of contributor	out-of-state PAC (ID#:	1	Amount of Contribution (\$)
	06/24/2024	Chapa, Joe	out or state 1710 (IBII		\$1,000.00
		Contributor address; City; S	State: 7in Code		
		Continuator address, Sky, S	nate, zip oode		
		Linn, TX 78563			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Retired attor	ney		Retired	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Retired				
	If contributor i	s a child, law firm of parent(s) (if	any)	<u> </u>	
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	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 9/57 Rpt: 12/100		
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 03/26/2024			7	Amount of Contribution (\$) \$500.00	
Ļ	O antaile at a de la	Dallas, TX 75202		Occasionate de Lab Title		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	O5/29/2024 Cowen Rodriguez Peacock  Contributor address; City; State; Zip Code				\$5,000.00	
		San Antonio, TX 78201				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	06/06/2024	Crabb, Elizabeth	<u> </u>			\$104.48
	Contributor address; City; State; Zip Code  San Antonio, TX 78232					
_	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 10/57 Rpt: 13/100	
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067895
4	Date 04/10/2024			7 Amount of Contribution (\$) \$250.00
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	
	Career cons	sultant	Consultant	
10	Contributor's of	employer/law firm ting	11 Law firm of contributor's sp	oouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/11/2024 Davidson Trolio Ream & Garza  Contributor address; City; State; Zip Code  San Antonio, TX 78216			\$250.00
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	01/09/2024	Davis Law Firm  Contributor address; City; State; Zip Code  San Antonio, TX 78216		\$2,500.00
	Contributor's I	I Principal Occupation	Contributor's Job Title	<u> </u>
	Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	1	

	MONET	ARY POLITICAL CON	TRIBUTIC	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to co	mplete this f	orm.	1	ages Schedule A(J)1 1/57 Rpt: 14/100	:
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID 000678	(Ethics Commission 895	on Filers)
4	Date 03/26/2024	Davis and Santos PC  6 Contributor address; City; State; Zip Code		7 Amount	t of Contribution (\$)	\$1,000.00	
8	Contributor's I	San Antonio, TX 78204  Principal Occupation		9 Contributor's Job Title			
10	0 Contributor's employer/law firm 11 Law firm of contribu		11 Law firm of contributor's sp	oouse (if any	)		
12	! If contributor i	s a child, law firm of parent(s) (if any)					
	Date  O4/29/2024  Full name of contributor out-of-state PAC (ID#:  Davis, Cedillo and Mendoza  Contributor address; City; State; Zip Code				Amount	t of Contribution (\$)	\$2,000.00
	Contributor's I	San Antonio, TX 78212  Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any	)	
	If contributor i	s a child, law firm of parent(s) (if any)					
	Date Full name of contributor out-of-state PAC (ID#:) 03/25/2024 De Leon, Marino  Contributor address; City; State; Zip Code  San Antonio, TX 78230			Amount	t of Contribution (\$)	\$500.00	
		Principal Occupation		Contributor's Job Title	1		
	Retired	employer/law firm s a child, law firm of parent(s) (if any)		Retired  Law firm of contributor's sp	oouse (if any	)	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 12/57 Rpt: 15/100	
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895	
4	Date 03/26/2024	<ul><li>5 Full name of contributor</li><li>De Los Santos, Hugo Xa</li><li>6 Contributor address; City; \$</li></ul>			7	Amount of Contribution (\$) \$250.00	
		San Antonio, TX 78201					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10		employer/law firm de los Santos, Attorney at L	aw & CPA	11 Law firm of contributor's sp	oous	se (if any)	
12		s a child, law firm of parent(s) (if		1			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	03/22/2024	Diaz, Reynaldo Contributor address; City; S	<u> </u>			\$1,000.00	
		San Antonio, TX 78212					
	Contributor's I	Principal Occupation		Contributor's Job Title	•		
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's spouse (if any)			
		az Accident Injury Attorney F					
	If contributor is	s a child, law firm of parent(s) (if	any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	06/21/2024	Dilley, Douglas	_			\$2,500.00	
Contributor address; City; State; Zip Code  San Antonio, TX 78210							
_	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney			Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	Dilley Law F	irm					
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 13/57 Rpt: 16/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 04/03/2024	<ul><li>5 Full name of contributor</li><li>Evans, Sabrina</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$) \$250.00
		San Antonio, TX 78232				
8		Principal Occupation		9 Contributor's Job Title		
L	Sales			Self employed		
10	Self	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12	If contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	04/22/2024	Garansuay, Lauren  Contributor address; City;	State; Zip Code		•	\$104.48
L	Contributor's	San Antonio, TX 78212 Principal Occupation		Contributor's Job Title		
	Homemaker			Homemaker		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Homemaker					
	If contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/19/2024	Gibbs, Michael				\$100.00
		Contributor address; City; San Antonio, TX 78258				
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
		Adkins, LLP				
	If contributor i	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 14/57 Rpt: 17/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date 03/28/2024	5 Full name of contributor Goldstein & Orr 6 Contributor address; City;	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$) \$500.00
		San Antonio , TX 78209	5		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)
12	2 If contributor i	s a child, law firm of parent(s) (	if any)		
	Date 03/26/2024	Full name of contributor Gonzales, Arturo Contributor address; City;	out-of-state PAC (ID#:		Amount of Contribution (\$) \$500.00
		San Antonio, TX 78259			
	Contributor's Attorney	Principal Occupation		Contributor's Job Title Attorney	
		employer/law firm ales PC		Law firm of contributor's s	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (	if any)		
	Date 03/20/2024	Full name of contributor Gonzales, Francis Contributor address; City;	out-of-state PAC (ID#:		Amount of Contribution (\$) \$150.00
		San Antonio, TX 78201			
	Contributor's Attorney	Principal Occupation		Contributor's Job Title Attorney	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Calfas Law	Group s a child, law firm of parent(s) (	if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 15/57 Rpt: 18/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00067895
4	Date 04/01/2024	<ul><li>5 Full name of contributor Gonzales, John</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		_	Amount of Contribution (\$) \$250.00
		San Antonio, TX 78230				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's of John Gonza	employer/law firm les & Assoc.		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	f any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	06/29/2024	Gonzalez, Jr., Arnulfo Contributor address; City;	State; Zip Code			\$3,000.00
		Laredo, TX 78041				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm of Arnulfo Gonzalez Jr		Law firm of contributor's sp	oous	e (if any)
_			Fomily			
	ii contributor i	s a child, law firm of parent(s) (i	ally)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	06/27/2024	Gordon, Ami				\$521.15
		Contributor address; City; San Antonio, TX 78209	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	molpai occupation		Attorney		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
		es & Gordon LLP				
	If contributor i	s a child, law firm of parent(s) (i	f any)	•		

MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A(J)1		
The Instruc	ction Guide explains how to complete thi	is form.	1 Total pages Schedule A(J)1: Sch: 16/57 Rpt: 19/100	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Chapa, Luz E	Elena D. (The Honorable)		00067895	
4 Date 06/27/2024	5 Full name of contributor out-of-state PAC (II Gordon, Ami	D#:)	7 Amount of Contribution (\$) \$521.15	
	6 Contributor address; City; State; Zip Code			
	San Antonio, TX 78209			
8 Contributor's F Attorney	rincipal Occupation	9 Contributor's Job Title Attorney		
10 Contributor's e Golden Steve	mployer/law firm es & Gordon LLP	11 Law firm of contributor's s	pouse (if any)	
12 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor  out-of-state PAC (II	D#: )	Amount of Contribution (\$)	
05/28/2024	Gowan Law Group	\$250.00		
03/20/2024	Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78401			
Contributor's P	rincipal Occupation	Contributor's Job Title		
Contributor's e	mployer/law firm	Law firm of contributor's s	pouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
04/03/2024	Gransee, Kurt		\$500.00	
	Contributor address; City; State; Zip Code			
	San Antonio, TX 78248			
	rincipal Occupation	Contributor's Job Title		
Attorney		Attorney		
Contributor's e Rush & Gran	mployer/law firm	Law firm of contributor's s	pouse (if any)	
	a child, law firm of parent(s) (if any)			
n ooningator is	(a cima, iai iiii ci pa cin(c) (ii ai-y)			

	MONET	ARY POLITICAL CONTRI	BUTIC	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to comple	ete this f	orm.		pages Schedule A(J)1 17/57 Rpt: 20/100	L:
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)				ID (Ethics Commissi 67895	on Filers)
4	Date 04/01/2024	_	e PAC (ID#:_	)	<b>7</b> Amoi	unt of Contribution (\$)	\$1,041.98
_	Cambrilaritarila			O Constribution to lab Title			
8		Principal Occupation		9 Contributor's Job Title			
40	Attorney			Attorney	(:6 -	3	
10	Gravely PC	employer/law firm		11 Law firm of contributor's sp	ouse (it a	.ny)	
12	If contributor i	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-state	e PAC (ID#:	)	Amoi	unt of Contribution (\$)	
	O6/06/2024 Guerra , Michael Matthew  Contributor address; City; State; Zip Code  McAllen , TX 78502				(,)	\$1,041.98	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney	- micipal Occupation		Attorney			
		employer/law firm		Law firm of contributor's sp	ouco (if o	nu)	
		of Michael M. Guerra		Law iiiiii oi continuttoi 3 3p	ouse (ii a	iriy)	
		s a child, law firm of parent(s) (if any)					
	Date	. —	e PAC (ID#:_	)	Amoi	unt of Contribution (\$)	
06/30/2024 Guerra LLP  Contributor address; City; State; Zip Code  San Antonio, TX 78212					\$5,000.00		
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor 3 i	Tillopai Occupation		Contributor 5 005 Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if a	ny)	
	If contributor i	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	v to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 18/57 Rpt: 21/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 03/26/2024	<ul><li>5 Full name of contributor Guerra, Frank (Mr.)</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$) \$5,000.00
		San Antonio, TX 78212				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's 6 Guerra LLP	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/09/2024	Hanor, Charles  Contributor address; City; S	itate; Zip Code			\$1,000.00
		San Antonio, TX 78209				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	The Hanor L	employer/law firm		Law firm of contributor's sp	oous	e (If any)
		s a child, law firm of parent(s) (if	any)			
	ii contributor i	s a crilid, law littli of parefil(s) (if	arry)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/21/2024	Hardberger, Phil (The Ho	onorable)			\$250.00
		Contributor address; City; S San Antonio, TX 78212	itate; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired Chie			Retired Chief Justice		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 19/57 Rpt: 22/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 03/26/2024	<ul><li>5 Full name of contributor Harper, Taylor</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		San Antonio, TX 78258				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's e Taylor Harpe	employer/law firm er PLLC		11 Law firm of contributor's sp	oous	e (if any)
12	If contributor i	s a child, law firm of parent(s) (if	any)	I .		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	06/27/2024	Helmling, Claudia Contributor address; City;	State; Zip Code			\$26.35
		El Paso, TX 79936				
		Principal Occupation		Contributor's Job Title		
	Teacher			Teacher		Ct and
	Socorro ISD	employer/law firm		Law firm of contributor's sp	Jous	e (II any)
		s a child, law firm of parent(s) (if	· anv)			
	ii contributor i	o a orma, law mm or paremilis) (ii	uny)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/26/2024	Hernandez, Ian				\$250.00
		Contributor address; City; Pearland, TX 77584	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Hernandez S	Sunosky LLP				
	If contributor i	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRI	BUTIC	DNS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to comple	ete this f	orm.	ı	Fotal pages Schedule A(J)1: Sch: 20/57 Rpt: 23/100	
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			l	Filer ID (Ethics Commission)	n Filers)
4	Date 06/03/2024	<ul> <li>5 Full name of contributor  out-of-state</li> <li>Hill, Justin</li> <li>6 Contributor address; City; State; Zip Code</li> <li>San Antonio, TX 78216</li> </ul>	e PAC (ID#:_		7	Amount of Contribution (\$)	\$1,000.00
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
Ŭ	Attorney	mopal Occapation		Attorney			
10		employer/law firm		11 Law firm of contributor's sp	ouse	(if any)	
10							
12	ii contributor i	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-state	e PAC (ID#:_		,	Amount of Contribution (\$)	
	05/15/2024	Hilliard, Robert  Contributor address; City; State; Zip Code  Corpus Christi, TX 78401					\$2,500.00
	Contributor's I	I Principal Occupation		Contributor's Job Title			
	Attorney	· · · · · · · · · · · · · · · · · · ·		Attorney			
		employer/law firm		Law firm of contributor's sp	ouse	(if anv)	
	Robert C Hi					(··')	
		s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor  out-of-state	e PAC (ID#:_	)		Amount of Contribution (\$)	
	04/18/2024	Hoelscher Law Group PC  Contributor address; City; State; Zip Code					\$5,000.00
		San Antonio, TX 78232					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse	(if any)	
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 21/57 Rpt: 24/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date 02/15/2024	5 Full name of contributor Hosey, Peter 6 Contributor address; City; Sta	out-of-state PAC (ID#:_ ate; Zip Code	)	7 Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78215			
8	Contributor's I Attorney	Principal Occupation		9 Contributor's Job Title Attorney	
10		employer/law firm		11 Law firm of contributor's sp	nouse (if any)
10	Jackson Walker		iouse (ii aiiy)		
12	If contributor i	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	04/04/2024 Hurd, Cliff  Contributor address; City; State; Zip Code  San Antonio, TX 78209			\$500.00	
	Contributor's I	<u> </u> Principal Occupation		Contributor's Job Title	<u> </u>
	Business Ma			President	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Hurd Enterp	rises LTD			
	If contributor i	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	02/15/2024	Jackson Walker LLP PAC  Contributor address; City; Sta	ate; Zip Code		\$2,500.00
	0	Dallas, TX 75201		Occasionate de la Tina	
	Contributors	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	I .	pages Schedule A(J): 22/57 Rpt: 25/100	1:
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer II	D (Ethics Commission 7895	on Filers)
4	Date 04/03/2024	<ul><li>5 Full name of contributor Jacobson, Michelle</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		<b>7</b> Amou	nt of Contribution (\$)	\$50.00
		San Antonio, TX 78209		_			
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired			
10		employer/law firm		11 Law firm of contributor's sp	oouse (if ar	ny)	
12		s a child, law firm of parent(s) (i	f any)				
	Date  Ob/24/2024  Full name of contributor out-of-state PAC (ID#:			Amou	nt of Contribution (\$)	\$1,041.98	
		San Antonio, TX 78209					
		Principal Occupation		Contributor's Job Title			
	Attorney			Attorney	(:f	2	
	Janicek Law	employer/law firm		Law firm of contributor's sp	ouse (ii ar	iy)	
		s a child, law firm of parent(s) (i	f any)				
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amou	nt of Contribution (\$)	
	03/22/2024 Jefferson Cano  Contributor address; City; State; Zip Code					\$1,000.00	
		San Antonio, TX 78205		T			
	Contributor's I	Principal Occupation		Contributor's Job Title Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if ar	ny)	
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.				Total pages Schedule A(J)1: Sch: 23/57 Rpt: 26/100
2	FILER NAME	ME az Elena D. (The Honorable)		1	Filer ID (Ethics Commission Filers) 00067895	
4			↓	Amount of Contribution (\$) \$5,000.00		
		San Antonio, TX 78230				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ,	Amount of Contribution (\$)
	04/18/2024	Johnson, Alexandra  Contributor address; City;	<u> </u>			\$260.73
	0	San Antonio, TX 78230		I a		
	Teacher	Principal Occupation		Contributor's Job Title Teacher		
_		and a sauthan fina				(if any)
	San Antonio	employer/law firm		Law firm of contributor's sp	Jouse	e (ii ariy)
		s a child, law firm of parent(s) (if	i anu)			
	ii continuator i	s a criliu, iaw iiriri or parerii(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	<u> </u>	Amount of Contribution (\$)
	05/21/2024	Jones, Brad	<del>_</del>			\$1,041.98
		Contributor address; City; San Antonio, TX 78212	State; Zip Code		·	
_	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Barton Bens	on Jones PLLC				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 24/57 Rpt: 27/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date  5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$500.00		
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	·L
	Attorney			Attorney	
10	Contributor's of State Farm I	employer/law firm nsurance		11 Law firm of contributor's sp	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if ar	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/21/2024 Kemmy Law Firm  Contributor address; City; State; Zip Code			\$2,500.00 		
	Contributorio	San Antonio, TX 78212		Contributor's Job Title	
	Contributors	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if ar	y)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	03/12/2024	Langley & Banack, Inc.  Contributor address; City; Sta  San Antonio, TX 78212	te; Zip Code		\$2,000.00 
	Contributor's I	Principal Occupation		Contributor's Job Title	1
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if ar	у)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	)NS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A(J) Sch: 25/57 Rpt: 28/100	
2	FILER NAME Chapa, Luz I	Elena D. (The Honorable)			3	Filer ID (Ethics Commiss 00067895	sion Filers)
4	Date 03/21/2024	Full name of contributor     Langley & Banack, Inc.     Contributor address; City; Sta			7	Amount of Contribution (\$)	\$1,500.00
		San Antonio, TX 78212					
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)	
12	. If contributor is	is a child, law firm of parent(s) (if an	ıy)				
	Date	Full name of contributor	out-of-state PAC (ID#:_		Π	Amount of Contribution (\$)	)
	03/05/2024 Langley & Banack, Inc.  Contributor address; City; State; Zip Code						\$500.00
		San Antonio, TX 78212		·			
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Contributor's e	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	is a child, law firm of parent(s) (if an	ıy)				
	Date	Full name of contributor	out-of-state PAC (ID#:_			Amount of Contribution (\$)	)
	04/08/2024	Law Offices of Fidel Rodrig	guez Jr				\$500.00
		Contributor address; City; Sta San Antonio, TX 78212	ite; Zip Code				
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	If contributor is	is a child, law firm of parent(s) (if an	ıy)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.				otal pages Schedule A(J)1: Sch: 26/57 Rpt: 29/100
2	FILER NAME			I	Filer ID (Ethics Commission Filers)	
	Chapa, Luz	Elena D. (The Honorable)				00067895
4	Date 04/11/2024  5 Full name of contributor out-of-state PAC (ID#:) Law Offices of Mark Murray  6 Contributor address; City; State; Zip Code		7 A	Amount of Contribution (\$) \$1,000.00		
		San Antonio, TX 78216				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse	(if any)
12	! If contributor is	s a child, law firm of parent(s) (i	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Α	Amount of Contribution (\$)
	04/06/2024	Leykum, Luci Contributor address; City;	State; Zip Code			\$260.73
		San Antonio, TX 78209				
		Principal Occupation		Contributor's Job Title		
	Physician			Physician		
		employer/law firm		Law firm of contributor's sp	ouse	(if any)
		th / STVHCS				
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Α	Amount of Contribution (\$)
	03/20/2024	Longoria, Alcide				\$250.00
		Contributor address; City; San Antonio, TX 78230	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	· · ·	
	Investor			Investor		
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse	(if any)
	Self					
	If contributor is	s a child, law firm of parent(s) (if	any)			

MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 27/57 Rpt: 30/100		
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Chapa, Luz I	Elena D. (The Honorable)			00067895
4 Date 03/25/2024			7 Amount of Contribution (\$) \$250.00	
	San Antonio, TX 78209			
8 Contributor's F	I Principal Occupation		9 Contributor's Job Title	1
Real estate			Executive Vice Presider	nt
<b>10</b> Contributor's 6	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
JLL	, ,		·	
12 If contributor is	s a child, law firm of parent(s) (if ar	ny)		
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
04/20/2024 Longoria, Cheryl W.  Contributor address; City; State; Zip Code				\$1,000.00
Contributor's	San Antonio, TX 78209 Principal Occupation		Contributor's Job Title	1
Homemaker			Homemaker	
	employer/law firm		Law firm of contributor's sp	nouse (if any)
Homemaker			Law iiiii or contributor o op	souss (ii ai.y)
	s a child, law firm of parent(s) (if ar	nv)		
ii continuator it	o a orma, law mm or parom(o) (ii ai	.,,		
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
03/26/2024	Lopez , Jo Chris	out of state 1 AC (ID#		\$250.00
Contributor address; City; State; Zip Code  San Antonio, TX 78212				
Contributor's F	Principal Occupation		Contributor's Job Title	•
Attorney			Attorney	
	employer/law firm		Law firm of contributor's sp	pouse (if any)
Langley & Ba	anack			
If contributor is	s a child, law firm of parent(s) (if ar	ny)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.				Total pages Schedule A(J)1: Sch: 28/57 Rpt: 31/100
2	FILER NAME Chapa, Luz	E z Elena D. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067895	
4	Date 03/26/2024	5 Full name of contributor Lopez, Orlando	,		7	Amount of Contribution (\$) \$1,000.00
		San Antonio, TX 78212				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's ( Lopez, Scott	employer/law firm LLP		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	03/26/2024	Loredo, Gilbert Contributor address; City; S	<u> </u>			\$500.00
		San Antonio, TX 78228		I		
		Principal Occupation tal Relations		Contributor's Job Title Vice President for Gove	rnr	mental Polations
		employer/law firm		Law firm of contributor's sp		
	UT Health S			Law IIIII of Contributor 3 Sp	Jous	se (ii aiiy)
		s a child, law firm of parent(s) (if a	anv)			
	ii dontinator ii	o a orma, law mm or parom(o) (ii c	y)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)
	03/28/2024	Loree and Lipscomb Atto	rneys At Law			\$1,000.00
		Contributor address; City; S  San Antonio, TX 78258	tate; Zip Code		•	
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)	<u> </u>		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 29/57 Rpt: 32/100	=		
2	FILER NAME Chapa, Luz	NAME , Luz Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895	
4	Date 06/26/2024			7	Amount of Contribution (\$) \$104.4	8	
		San Antonio, TX 78218					
8	Contributor's I Retired	Principal Occupation		9 Contributor's Job Title Retired			
10		employer/law firm		11 Law firm of contributor's sp	oous	e (if any)	_
12		s a child, law firm of parent(s) (i	f any)	1			_
	Date Full name of contributor out-of-state PAC (ID#:)  06/29/2024 Maddox, Adriana  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.0	10		
		Laredo, TX 78040					
		Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
	Contributor's of Benavides N	employer/law firm		Law firm of contributor's sp Benavides Maddox PC	oous	e (if any)	
		s a child, law firm of parent(s) (i	f any)	benaviues Maudux PC			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	=
	06/05/2024	Maloney, Janice  Contributor address; City;	<u> </u>			\$2,500.0	10
		San Antonio, TX 78229					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	oous	e (if any)	
		of Janice Maloney					
	If contributor i	s a child, law firm of parent(s) (i	fany)				

	MONET	ARY POLITICAL CONTR	RIBUTIC	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to comp	lete this f	orm.	1	ges Schedule A(J)1 /57 Rpt: 33/100	:
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID 0006789	(Ethics Commission	on Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 06/11/2024 Maloney, Tim 6 Contributor address; City; State; Zip Code		7 Amount o	of Contribution (\$)	\$2,500.00		
		San Antonio, TX 78205					
8	Contributor's I Attorney	Principal Occupation		9 Contributor's Job Title Attorney			
10		employer/law firm		11 Law firm of contributor's sp	oouse (if any)		
	Law Offices	of Maloney & Campolo, LLP					
12	If contributor i	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-sta	ate PAC (ID#:_		Amount o	of Contribution (\$)	
	04/19/2024 Maloney Jr., Pat  Contributor address; City; State; Zip Code  San Antonio, TX 78205					\$1,000.00	
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney	· p···		Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)		
	Law Offices	of Pat Maloney					
	If contributor i	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-sta	ate PAC (ID#:_	)	Amount o	of Contribution (\$)	
	03/26/2024	Marck, Eugene					\$100.00
		Contributor address; City; State; Zip Coo San Antonio , TX 78209	de				
	Contributor's I	rincipal Occupation		Contributor's Job Title	1		
	Retired			Retired			
		employer/law firm		Law firm of contributor's sp	ouse (if any)		
	Retired						
	If contributor i	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 31/57 Rpt: 34/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date  5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$1,041.98		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	
Ü		ministration/ Healthcare		COO	
10		employer/law firm		11 Law firm of contributor's sp	couse (if any)
10	UT Health S			TE Law IIIII of Contributor 3 Sp	oouse (ii ariy)
12	If contributor i	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	04/02/2024 Martin & Drought  Contributor address; City; State; Zip Code			\$500.00	
	Contributorio	San Antonio, TX 78205 Principal Occupation		Contributor's Job Title	<u> </u>
	Continuator S i	Principal Occupation		Continuator's 300 Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount of Contribution (\$)
	06/24/2024	Martinez-Flores, Martha Contributor address; City; Sta San Antonio, TX 78212	ate; Zip Code		\$150.00
	Contributor's I	Principal Occupation		Contributor's Job Title	•
	Creative Dire	ector		Director	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	MM Creative	LLC			
	If contributor i	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL CONTR	IBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to compl	lete this form.	1 Total pages Schedule A(J)1: Sch: 32/57 Rpt: 35/100
2	FILER NAME	AME		3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)		00067895
4	1 Date 06/24/2024 5 Full name of contributor out-of-state PAC (ID#:			7 Amount of Contribution (\$) \$52.40
		San Antono, TX 78215		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10		employer/law firm	11 Law firm of contributor's	spouse (if any)
	Jim Adler ar	d Associates		
12	If contributor i	s a child, law firm of parent(s) (if any)		
-	Date	Full name of contributor out-of-sta	te PAC (ID#:)	Amount of Contribution (\$)
	03/25/2024	Mazuca, James		\$250.00
		Contributor address; City; State; Zip Code	e	···
		β, ε, μ		
		San Antonio, TX 78212		
	Contributor's	I Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
		employer/law firm	Law firm of contributor's	spouse (if any)
		azuca, Attorney at Law		
	If contributor i	s a child, law firm of parent(s) (if any)	L	
-	Date	Full name of contributor Out-of-sta	te PAC (ID#: )	Amount of Contribution (\$)
	03/09/2024	McNiece, Erin		\$260.73
		Contributor address; City; State; Zip Code	e	···
		San Antonio, TX 78201		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	Cavaretta, K	atona & Leighner, PLLC		
	If contributor i	s a child, law firm of parent(s) (if any)	•	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 33/57 Rpt: 36/100
2	FILER NAME	ME		3 Filer ID (Ethics Commission Filers)	
	Chapa, Luz	Elena D. (The Honorable)			00067895
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	01/16/2024	Mercilliott, April			\$1,041.98
		6 Contributor address; City;	State; Zip Code		
		Houston, TX 77056			
8		Principal Occupation		9 Contributor's Job Title	
	Financial Ad			Financial Administrator	
10		employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Wright Close				
12	! If contributor i	s a child, law firm of parent(s) (	if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/13/2024	Miller, Kevin	<b>–</b>		\$500.00
		Contributor address; City;	State; Zip Code		
		,	μ		
		San Antonio, TX 78230			
	Contributor's	I Principal Occupation		Contributor's Job Title	_ <b>L</b>
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
		fices of Miller & Bicklein			
	If contributor i	s a child, law firm of parent(s) (	if any)	1	
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/13/2024	Mireles, Margaret	<b>—</b>		\$100.00
		Contributor address; City;	State; Zip Code		
		, ,,	. ,		
		San Antonio, TX 78201			
	Contributor's	I Principal Occupation		Contributor's Job Title	<u> </u>
	Retired Tea			Retired Teacher	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Retired	, ,			
-	If contributor i	s a child, law firm of parent(s) (	if any)		
		(-)	,,		
_					

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 34/57 Rpt: 37/100	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)		00067895
4	Date 06/28/2024	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribution (\$) \$104.48
		San Antonio, TX 78209		
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	
	Art consulta	nt	Consultant	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
	AnArte Galle	ery		
12	2 If contributor i	s a child, law firm of parent(s) (if any)	ı	
	Date	Full name of contributor	)	Amount of Contribution (\$)
	03/19/2024	Moorman, Laura		\$1,000.00
		Contributor address; City; State; Zip Code		
		San Antonio, TX 78209		
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Accountant		Accountant	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Self-employe	ed		
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/25/2024	Morehouse, Diana T.		\$150.00
		Contributor address; City; State; Zip Code		
		San Antonio, TX 78209		
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Retired		Retired	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Retired			
	If contributor i	s a child, law firm of parent(s) (if any)	•	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 35/57 Rpt: 38/100	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Cnapa, Luz	Elena D. (The Honorable)		00067895
4	Date 04/03/2024	5 Full name of contributor out-of-state PAC (ID#: Morrill, Jessica		7 Amount of Contribution (\$) \$250.00
		6 Contributor address; City; State; Zip Code		
		San Antonio, TX 78218		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Homemaker	•	Homemaker	
10	) Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
	Homemaker	-		
12	2 If contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	)	Amount of Contribution (\$)
	06/18/2024	Naman, Howell, Smith & Lee		\$500.00
		Contributor address; City; State; Zip Code		··· <mark>·</mark>
		Waco, TX 76701		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  uut-of-state PAC (ID#:	: )	Amount of Contribution (\$)
	03/20/2024	Nava, Alex		\$500.00
		Contributor address; City; State; Zip Code		<u> </u>
		Continuation addresses, Only, States, Elip Soute		
		San Antonio, TX 78230		
_	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney	Timopa Cosapaion	Attorney	
_		employer/law firm	Law firm of contributor's s	nouse (if any)
		lander PLLC	Law iiiii or contributor o c	pouse (ii aii))
H		is a child, law firm of parent(s) (if any)		
	ii continuator i	s a clind, law initi of parent(s) (if any)		
_				

	MONET	ARY POLITICAL CONTRIB	BUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete	1 Total pages Schedule A(J)1: Sch: 36/57 Rpt: 39/100	
2	FILER NAME	ILER NAME		3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)		00067895
4	Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7 Amount of Contribution (\$)
	03/26/2024	Negem, Chris  6 Contributor address; City; State; Zip Code		\$300.00
		San Antonio, TX 78216		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10		employer/law firm	11 Law firm of contributor's	spouse (if any)
L	Negem Law			
12	t it contributor i	s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
	03/26/2024	Newton, Tommy		\$250.00
		Contributor address; City; State; Zip Code		
		San Antonio, TX 78213		
	Contributor's	Principal Occupation	Contributor's Job Title	•
	Attorney		Attorney	
		employer/law firm	Law firm of contributor's	spouse (if any)
	Allen Stein &	& Dubin		
	If contributor i	s a child, law firm of parent(s) (if any)		
H	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
	03/18/2024	Orsinger, Richard		\$250.00
		Contributor address; City; State; Zip Code		·····
		San Antonio, TX 78205		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
		employer/law firm	Law firm of contributor's	spouse (if any)
		of Richard Orsinger		
	if contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 37/57 Rpt: 40/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 06/30/2024			7	Amount of Contribution (\$) \$1,000.00	
		Los Angeles, CA 90067				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Film Product	tion		Vice Chairman, Worldw	ide	Production
10	Contributor's 6 Legendary F	employer/law firm Pictures		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	06/30/2024	Parent, Mary  Contributor address; City;	State; Zip Code			\$1,562.81
		Los Angeles, CA 90067				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Film Product	tion		Vice Chairman, Worldw	ide	Production
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Legendary F					
	If contributor is	s a child, law firm of parent(s) (i	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	03/26/2024	Peisen, Jessica	_			\$104.48
		Contributor address; City; San Antonio, TX 78212	State; Zip Code			
_	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Guerra LLP					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 38/57 Rpt: 41/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00067895
4	Date 03/22/2024			_	Amount of Contribution (\$) \$521.15	
		San Antonio, TX 78218				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's of Poling Law,	employer/law firm PLLC		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (if	f any)	<u>l</u>		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	03/26/2024	Prichard Young LLP		,		\$1,000.00
		Contributor address; City; San Antonio, TX 78216	State; Zip Code			
Г	Contributor's I	rincipal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor i	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/05/2024	Prichard, David				\$1,000.00
		Contributor address; City; San Antonio, TX 78218	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Prichard & Y	oung LLP				
	If contributor i	s a child, law firm of parent(s) (if	f any)			

	MONET	ARY POLITICAL (	CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 39/57 Rpt: 42/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date 06/11/2024	5 Full name of contributor out-of-state PAC (ID#:) 7		7 Amount of Contribution (\$) \$2,500.00	
_	Cantuilautaula	San Antonio, TX 78213		O Contributorio Joh Titlo	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if	any)	L	
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	04/15/2024 Ray, Jeff  Contributor address; City; State; Zip Code  San Antonio, TX 78212				\$1,041.98
	Contributor's I	I Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Ray Pena M	cChristian			
	If contributor i	s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	04/01/2024	Reuter, Rachel  Contributor address; City; S  San Antonio, TX 78205	tate; Zip Code		\$521.15
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's sp	oouse (if any)
	Reuter Law				
	If contributor i	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 40/57 Rpt: 43/100	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)		00067895
4	Date	5 Full name of contributor  ut-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)
	06/30/2024	06/30/2024 Richter, Corinna		\$521.15
		6 Contributor address; City; State; Zip Code  San Antonio, TX 78212		
Ļ	Contributorio	San Antonio, TX 78212	O Contributorio Joh Titlo	
8		Principal Occupation  nd Chief Administrative Officer	9 Contributor's Job Title President and Chief Ac	Iministrativa Officer
_				
10		employer/law firm	11 Law firm of contributor's s	pouse (if any)
_	Holt Cat			
12	If contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  ut-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	04/04/2024	Roberts, Barry		\$1,000.00
		Contributor address; City; State; Zip Code		
		San Antonio, TX 78209		
	Contributor's	I Principal Occupation	Contributor's Job Title	_ <b>L</b>
	Oil and Gas		Co-Trustee and Opera	tions Manager
-	Contributor's	employer/law firm	Law firm of contributor's s	
	Coates Ene	• •		. , , , , , , , , , , , , , , , , , , ,
-		is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	03/24/2024	Rodriguez, Clarissa		\$156.56
		Contributor address; City; State; Zip Code		
		San Antonio, TX 78212		
	Contributor's	Principal Occupation	Contributor's Job Title	1
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	Denton Nav	arro Rodriguez Bernal Santee & Zech PC		
	If contributor i	is a child, law firm of parent(s) (if any)		
Н				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 41/57 Rpt: 44/100	
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067895
4	Date 05/16/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID# Rodriguez, Sonia</li> <li>Contributor address; City; State; Zip Code</li> <li>San Antonio, TX 78229</li> </ul>	:)	7 Amount of Contribution (\$) \$500.00
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
Ū	Attorney	. mopal Cosapation	Attorney	
10		employer/law firm	11 Law firm of contributor's sp	nouse (if any)
		riguez Peacock	Haynes Immigration La	
12		s a child, law firm of parent(s) (if any)	- Tay too mining and the	.,,
	Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	04/03/2024	Rosenthal Pauerstein Sandoloski Agather LLP Contributor address; City; State; Zip Code  San Antonio, TX 78212	\$1,000.00	
	Contributor's F	l Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	1	
	Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	04/02/2024	Rubsamen, Cynthia (Ms.)  Contributor address; City; State; Zip Code  San Antonio, TX 78209		\$250.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Homemaker		Homemaker	
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
	Homemaker			
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instruction Guide explains how to complete this form.					al pages Schedule A(J)1 h: 42/57 Rpt: 45/100	:
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			1	er ID (Ethics Commission 067895	on Filers)
4	Date 03/21/2024				ount of Contribution (\$)	\$1,041.98	
		San Antonio, TX 78230					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10		employer/law firm nas Injury Lawyers		11 Law firm of contributor's sp	oouse (if	any)	
12		s a child, law firm of parent(s) (if	f anv)				
	- ii contributor i	s a crima, law iiriir or parcrit(s) (ii	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Am	ount of Contribution (\$)	
	06/17/2024	San Antonio Firefighters  Contributor address; City;					\$5,000.00
		San Antonio, TX 78201					
	Contributor's I	Principal Occupation		Contributor's Job Title	•		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if	any)	
	If contributor is	s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Am	ount of Contribution (\$)	
	06/08/2024	Saucedo, Noe					\$521.15
		Contributor address; City;  Boerne, TX 78006					
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (if	any)	
	Hoblit Darlin	g Ralls Hernandez & Hudlov	V				
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL (	CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 43/57 Rpt: 46/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date 04/02/2024	<ul><li>5 Full name of contributor Schroeder, Lance</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$) \$500.00
_	Contributorio	San Antonio, TX 78258		Contributorio lob Titlo	
0	Investor	Principal Occupation		9 Contributor's Job Title Retired	
10		employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	04/03/2024 Schroeder, Lance  Contributor address; City; State; Zip Code			\$1,000.00	
	O - materille : de mile I	San Antonio, TX 78258		Occasionate de Tele	
	Investor	Principal Occupation		Contributor's Job Title Retired	
		employer/law firm		Law firm of contributor's sp	nouse (if any)
	Retired	втрюуетам шт		Law IIIII of Continuator 3 St	ouse (ii aiiy)
	If contributor i	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	04/03/2024	Schuereman Law Firm  Contributor address; City; S  San Antonio, TX 78212	tate; Zip Code		\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u>I</u>
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 44/57 Rpt: 47/100
2	FILER NAME	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 04/14/2024	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$) \$250.00	
		San Antonio, TX 78212				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Real Estate	Development		Group Vice President		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if	· anv)			
		o a crima, law inini or parcria(s) (ii	ary			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	06/30/2024	Searls, Tiffany  Contributor address; City;	State; Zip Code			\$1,000.00
	Contributor's I	San Antonio, TX 78216 Principal Occupation		Contributor's Job Title		
	Business ow			Owner		
		employer/law firm		Law firm of contributor's sp	าดบร	se (if any)
	Bygones					
		s a child, law firm of parent(s) (if	any)			
		, , , , , ,				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	06/30/2024	Shaw, Anna				\$1,041.98
		Contributor address; City;	State; Zip Code			
		San Antonio, TX 78212		_		
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Carabin Sha	employer/law firm		Law firm of contributor's sp	oous	se (IT any)
		s a child, law firm of parent(s) (if	anv)			
	ii contributor i	o a orma, law iiiii or parerido) (ii	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 45/57 Rpt: 48/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00067895
4	Date 06/25/2024	5 Full name of contributor out-of-state PAC (ID#:) 7		_	Amount of Contribution (\$) \$2,500.00	
		San Antonio, TX 78215				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Carabin Sha	employer/law firm w		11 Law firm of contributor's sp	oous	e (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	06/27/2024	Sico, Hoelscher & Harris Contributor address; City; 9				\$5,000.00
		Corpus Chrisit, TX 7840	1			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	06/24/2024	Slay-Barber, Doris  Contributor address; City; 9	State; Zip Code			\$150.00
		Adkins, TX 78101				
		Principal Occupation		Contributor's Job Title		
	Trustee Cha			Trustee Chairman		
		employer/law firm	n's Foundation Inc	Law firm of contributor's sp	oous	e (if any)
		ess and Professional Wome s a child, law firm of parent(s) (if				

MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A(J)1		
The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 46/57 Rpt: 49/100		
2 FILER NAME Chana, Luz	Elena D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067895		
4 Date 03/26/2024	03/26/2024 Smith, James  6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$250.00		
	San Antonio, TX 78209				
8 Contributor's I	Principal Occupation	9 Contributor's Job Title			
Attorney		Attorney			
<b>10</b> Contributor's of Dykema	employer/law firm	11 Law firm of contributor's sp	pouse (if any)		
	s a child, law firm of parent(s) (if any)				
Data	Trill some of contributor		American of Combile time (ft)		
Date	Full name of contributor out-of-state PAC (ID#	‡:)	Amount of Contribution (\$)		
04/03/2024	Smith, Tinsley  Contributor address; City; State; Zip Code		\$260.37		
	San Antonio, TX 78209				
Contributor's I	I Principal Occupation	Contributor's Job Title			
Executive		Director of Community	Investment		
Contributor's	employer/law firm	Law firm of contributor's s	oouse (if any)		
Zachry Grou	ıp				
If contributor i	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor  out-of-state PAC (ID#	<i>‡</i> :)	Amount of Contribution (\$)		
04/02/2024	Smothers, Patricia		\$500.00		
	Contributor address; City; State; Zip Code		•		
Contributorio	San Antonio, TX 78209	Contributor's Job Title			
Retired	Principal Occupation	Retired			
Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)		
Retired					
If contributor i	s a child, law firm of parent(s) (if any)	•			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	tal pages Schedule A(J)1 h: 47/57 Rpt: 50/100	:
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			1	er ID (Ethics Commissi 067895	on Filers)
4	Date 06/28/2024	5 Full name of contributor Snell, David 6 Contributor address; City;	out-of-state PAC (ID#:			nount of Contribution (\$)	\$521.15
		San Antonio, TX 78209					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Attorney						
10	Contributor's e	employer/law firm I & Krause		11 Law firm of contributor's sp	oouse (i	fany)	
12		s a child, law firm of parent(s) (if	f any)				
	. Il Collination	s a crima, law inini or parent(s) (ii	i aliy)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Am	nount of Contribution (\$)	
	04/03/2024	Snyder, Edward  Contributor address; City;	State; Zip Code				\$1,000.00
	Contributor's I	San Antonio, TX 78205 Principal Occupation		Contributor's Job Title			
	Attorney	molpai Occupation		Attorney			
_		employer/law firm		Law firm of contributor's sp	nouse (i	f anv)	
		Snyder Attorney at Law PLLC		Law min or continuator of op-	, 0000	arry	
		s a child, law firm of parent(s) (if					
	ii contributor i	o a crima, law inini or parcrit(s) (ii	, any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	An	nount of Contribution (\$)	
	05/20/2024	Solis, John	_				\$2,500.00
		Contributor address; City;	State; Zip Code				
		Laredo, TX 78045					
		Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (i	fany)	
	Law Office o	f John R. Solis					
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	es Schedule A(J)1: 57 Rpt: 51/100
2	FILER NAME	Flore D. (The Henerable)				(Ethics Commission Filers)
Ļ		Elena D. (The Honorable)			0006789	
4	Date 03/26/2024	<ul><li>5 Full name of contributor Soules, Luther</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		. Amount o	of Contribution (\$) \$500.00
		San Antonio, TX 78217				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	•	
	Attorney					
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oouse (if any)	
12		s a child, law firm of parent(s) (i	f any)			
12	ii contributor i	s a cilliu, iaw iiiiii oi pareiii(s) (i	ally)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount o	f Contribution (\$)
	03/18/2024	Stone, Catherine	_			\$250.00
		Contributor address; City;	State; Zip Code			
		Helotes, TX 78203				
		Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm		Law firm of contributor's sp	oouse (if any)	
	Langley & B					
	If contributor is	s a child, law firm of parent(s) (i	rany)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount o	of Contribution (\$)
	06/24/2024	Stowers, Nicole	_			\$521.15
		Contributor address; City;	State; Zip Code			
		San Antonio, TX 78232				
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	HR Director			HR Director		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	
	Execupay					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 49/57 Rpt: 52/100
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)			00067895
4	Date 04/22/2024	<ul><li>Full name of contributor Taylor, Christyn</li><li>Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$1,041.98
		San Antonio, TX 78257			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Medical adv	ocate		Founder	
10	Contributor's Rebecca's V	employer/law firm Vish		11 Law firm of contributor's s	pouse (if any)
12	2 If contributor i	s a child, law firm of parent(s) (	if any)		
	Date	Full name of contributor	D out of ctate DAC (ID#)	`	Amount of Contribution (\$)
	05/24/2024	Teeter, John	out-of-state PAC (ID#:		\$250.00
	03/24/2024	Contributor address; City;	State: 7in Code		
		Contributor address, City,	State, Zip Code		
		0 A . I			
		San Antonio, TX 78209		_	
		Principal Occupation		Contributor's Job Title	
	Law Profess			Law Professor	
		employer/law firm		Law firm of contributor's s	pouse (if any)
		niversity School of Law			
	If contributor i	s a child, law firm of parent(s) (	if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	05/22/2024	Teeter, John	_		\$104.48
		Contributor address; City;	State; Zip Code		"
		San Antonio, TX 78209			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Law Profess	or		Law Professor	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	St. Mary's U	niversity School of Law			
	If contributor i	s a child, law firm of parent(s) (	if any)		
L					

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 50/57 Rpt: 53/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date 03/23/2024	5 Full name of contributor The Herrera Law Firm 6 Contributor address; City; Sta	out-of-state PAC (ID#:_ tte; Zip Code	)	7 Amount of Contribution (\$) \$2,500.00
_	Cantuilaritaula	San Antonio, TX 78207		O Combributorio Joh Titlo	
8	Contributors	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if ar	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	06/29/2024	The Herrera Law Firm  Contributor address; City; Sta  San Antonio, TX 78207			\$2,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Continuator 3 i	molpai Occupation		Contributor 5 COD Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if ar	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	06/28/2024	The Rios Law Firm			\$2,000.00
		Contributor address; City; Sta	ate; Zip Code		
	Contributor's I	Principal Occupation		Contributor's Job Title	1
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if ar	ny)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 51/57 Rpt: 54/100
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date 04/03/2024	<ul><li>5 Full name of contributor Thomas J Henry Law</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$2,500.00
Q	Contributor's I	San Antonio, TX 78249 Principal Occupation		9 Contributor's Job Title	
0	Continuators	- ппстрат Оссираноп		Contributor's 300 Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	04/03/2024	Tinsman & Sciano  Contributor address; City; S  San Antonio, TX 78216	tate; Zip Code		\$5,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	If contributor i	s a child, law firm of parent(s) (if	any)	L	
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	06/24/2024	Townsend, Joyce  Contributor address; City; S  San Antonio, TX 78248	tate; Zip Code		\$52.40
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>
	Retired			Retired	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Retired				
	If contributor i	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 52/57 Rpt: 55/100
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)			00067895
4	Date 03/14/2024	<ul><li>5 Full name of contributor</li><li>Treat, David</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$) \$500.00
		San Antonio, TX 78217			
8		Principal Occupation		9 Contributor's Job Title	
	Attorney			Partner	
10		employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Davis Law F				
12	If contributor i	s a child, law firm of parent(s) (i	f any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/22/2024	Valdez & Trevino	<b>–</b>		\$1,000.00
		Contributor address; City;	State; Zip Code		·· <b> </b>
		San Antonio, TX 78230			
	Contributor's	I Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	lf a a maturilla , star u		£ a.a. A		
	ii contributor i	s a child, law firm of parent(s) (i	rany)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/20/2024	Valdez, Deborah	_		\$78.44
		Contributor address; City;	State; Zip Code		··· <b> </b>
		San Antonio, TX 78232			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Executive D	irector		Executive Director	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	San Antonio	Youth Literacy			
	If contributor i	s a child, law firm of parent(s) (i	f any)	<u> </u>	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 53/57 Rpt: 56/100
2	FILER NAME	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 03/25/2024	Full name of contributor     Valdez, Robert     Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		San Antonio, TX 78248				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	•	
	Attorney Attorney					
10	Contributor's of Valdez & Tre	employer/law firm evino		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	06/29/2024	Vela, David R.  Contributor address; City;	<u> </u>			\$100.00
		Fair Oaks, TX 78015				
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor i	s a child, law firm of parent(s) (if	any)			
-	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)
	04/16/2024	Vela, Patricia				\$104.48
		Contributor address; City; San Antonio, TX 78230	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
		opment and Outreach Officer	-	Chief Development and	ΙΟι	ıtreach Officer
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Autism Serv	ice Center of San Antonio				
	If contributor i	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete thi	s form.	1 Total pages Schedule A(J)1: Sch: 54/57 Rpt: 57/100
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)		00067895
4	Date 06/29/2024	Full name of contributor		7 Amount of Contribution (\$) \$100.00
		Fair Oaks, TX 78015		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Retired		Retired	
10		employer/law firm	11 Law firm of contributor's s	spouse (if any)
	Retired			
12	If contributor i	s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor  out-of-state PAC (IE	D#:)	Amount of Contribution (\$)
	03/24/2024	Vera, Margaret		\$250.00
		Contributor address; City; State; Zip Code		··· <mark> </mark>
		San Antonio, TX 78212		
	Contributor's	I Principal Occupation	Contributor's Job Title	<u> </u>
	Attorney		Attorney	
	-	employer/law firm	Law firm of contributor's s	spouse (if any)
		of Margaret M. Vera		
	If contributor i	s a child, law firm of parent(s) (if any)		
		, , , , ,		
F	Date	Full name of contributor  ut-of-state PAC (IE	D#· )	Amount of Contribution (\$)
	04/01/2024	Walsdorf, Linda		\$260.73
		Contributor address; City: State; Zip Code		···
		San Antonio, TX 78248		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Executive		Executive	
		employer/law firm	Law firm of contributor's s	spouse (if any)
	Mission Pha	rmacal Company		
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 55/57 Rpt: 58/100
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)			00067895
4	Date	5 Full name of contributor	out-of-state PAC (ID#:		7 Amount of Contribution (\$)
	03/21/2024	Watson, Douglas			\$25.00
		6 Contributor address; City; San Antonio, TX 78232			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
0	Retired	FIIII Сіраї Оссираціон		Retired	
10		employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Retired				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
12	! If contributor i	s a child, law firm of parent(s) (	if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/05/2024	Watts, Guy			\$5,000.00
		Contributor address; City;	State; Zip Code		<u>"</u>
		Austin, TX 78704			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Watts Law F	Firm LLP			
	If contributor i	s a child, law firm of parent(s) (	if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/05/2024	Watts, Mikal			\$5,000.00
		Contributor address; City;	State; Zip Code		
		San Anotnio, TX 78257			
	Contributor's	Principal Occupation		Contributor's Job Title	•
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Watts Law F				
	If contributor i	s a child, law firm of parent(s) (	if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	so	CHEDULE A(J)1	L
	The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages S Sch: 56/57		
2	FILER NAME				3 Filer ID (Etl	hics Commission Filers	)
	Chapa, Luz	Elena D. (The Honorable)			00067895		
4	Date	5 Full name of contributor	out-of-state PAC (ID#:		7 Amount of Co	ontribution (\$)	
	04/03/2024	Weidman, Joanna	anna			\$250	0.00
		6 Contributor address; City;	State; Zip Code				
		San Antonio, TX 78248					
8	Contributor's	Principal Occupation		9 Contributor's Job Title	-		
	Marketing			Executive			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)		
	Nustar Ener	gy					
12	! If contributor i	s a child, law firm of parent(s) (i	f any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Co	entribution (\$)	
	06/05/2024	White, Jerry	_			\$5,000	0.00
		Contributor address; City;	State; Zip Code				
		Austin, TX 78704					
	Contributor's	Principal Occupation		Contributor's Job Title	_ L		
	Attorney			Attorney			
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)	-	
	Watts Law F	Firm					
	If contributor i	s a child, law firm of parent(s) (i	f any)				
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Co	 ontribution (\$)	
	03/18/2024	Woods, Bryan				\$1,000	0.00
		Contributor address; City;	State; Zip Code				
		San Antonio, TX 78209					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)		
	Law Offices	of Bryan Woods					
	If contributor i	s a child, law firm of parent(s) (i	f any)	•			

	MONET	ARY POLITICAL CONTR	RIBUTIO	NS	SCHEDULE A(J)1	ı
	The Instru	ction Guide explains how to comp	olete this fo	orm.	1 Total pages Schedule A(J)1: Sch: 57/57 Rpt: 60/100	
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895	
	Date 04/01/2024	<ul> <li>Full name of contributor  out-of-st</li> <li>Wyatt, Joan</li> <li>Contributor address; City; State; Zip Cod</li> </ul>	tate PAC (ID#:_	)	7 Amount of Contribution (\$) \$104	.48
		San Antonio, TX 78209				
8	Contributor's F Curator	Principal Occupation		9 Contributor's Job Title Curator		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	spouse (if any)	
12		s a child, law firm of parent(s) (if any)				
_	Date	Full name of contributor  out-of-st	tate PAC (ID#:_	)	Amount of Contribution (\$)	
	03/26/2024	Zachry, Karen Lee			\$500	.00
		Contributor address; City; State; Zip Coo San Antonio, TX 78212	de			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Business/ Sa	ales		Owner		
		employer/law firm		Law firm of contributor's sp	spouse (if any)	
	Tiny Finch					
	If contributor is	s a child, law firm of parent(s) (if any)				

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

			_	A 2
SCF	4FC	บเม	F	AZ

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 61/100	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Elena D. (The Honorable)		00067895
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$	
<b>5</b> Date	6 Full name of contributor  out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution
04/03/2024	Berg, Ryan		contribution (\$) description \$2,132.36   Fundraiser host
	7 Contributor address; City; State; Zip Code		I J2,132.301 Fundraiser nost
			!
	San Antonio, TX 78209		Check if travel outside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	N-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Owner		President	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Lee Michae	Is Fine Jewelry		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of ! In-kind contribution
04/03/2024	Feik, J.J.		contribution (\$) description
	Contributor address; City; State; Zip Code		\$2,132.36   Fundraiser host
			į į
	San Antonio, TX 78209		Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	N-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Entreprene	ır	Owner	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Feik Enterp	rises		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution
03/26/2024	Serna, Baltazar		contribution (\$) description
	Contributor address; City; State; Zip Code		\$1,348.28   Fundraiser host
			!
	San Antonio, TX 78205		Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	N-JUDICIAL) (See instructions)
0	grin single accounting (FOR HIDIOIAL)	0	(EQD NIDIOIAL) (Cas instructions)
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Attorney	and a sellent from (FOR TURISMA)	Attorney	(6 ) (500 1000)
	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Serna & Se			
It contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
I			

NON-MONETARY (IN-KIND) POLITICA CONTRIBUTIONS	L	SCHEDULE A2					
The Instruction Guide explains how to complete this	1 Total pages Schedule A2: Sch: 2/2 Rpt: 62/100						
2 FILER NAME	FILER NAME Chapa, Luz Elena D. (The Honorable)						
Cnapa, Luz Elena D. (The Honorable)	00067895						
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	\$						
5 Date 03/26/2024 6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description \$1,348.28 Fundraiser host					
San Antonio, TX 78205		Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON						
12 Contributor's principal occupation (FOR JUDICIAL) Attorney	13 Contributor's job title Attorney	(FOR JUDICIAL) (See instructions)					
14 Contributor's employer/law firm (FOR JUDICIAL) Serna & Serna	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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	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: 1/37 Rpt: 63/100	Chapa, Luz Elena D. (The Honorable) 00067895	
4	Date	5 Payee name	
	01/16/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$41.98	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE		_
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Processing Fee	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	experience to benefit Gree		_
	Date	Payee name	
	03/09/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$104.48	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		processing fee	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
⊨	Date	Power name	=
	03/09/2024	Payee name  Anedot. Inc.	
			_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.73	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	LXI LINDITORL	Check if Austin, TX, officeholder living expense	
		processing fee	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
$\vdash$			_

### 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	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: 2/37 Rpt: 64/100	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	03/14/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.73	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		1 Toccssing Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/14/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		1 Toccssing Tee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/14/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.48	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	ZA ZABITORZ	Check if Austin, TX, officeholder living expense
		Processing Fee
	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

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 co	-	te this form.	OTHER (enter	a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 3/37 Rpt: 65/100	Chapa, Luz Elena D. (The Honorable)			00067895	i
4 Date	5 Payee name		•		
03/18/2024	Anedot, Inc.				
6 Amount (\$) \$10.30	<b>7</b> Payee address; City; State; Zip Co 1340 Poydras Street	ode			
	Suite 1770				
	New Orleans, LA 70112				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
OF EXPENDITURE	Accounting/Banking		Check if travel outs		
			Check if Austin, TX Processing Fee		ng expense
			1 Toccssing 1 cc		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght		Office	held
experiorare to benefit C/O					
Date	Payee name				
03/19/2024	Anedot, Inc.				
Amount (\$)	Payee address; City; State; Zip Co	de			
\$4.30	1340 Poydras Street				
	Suite 1770				
	New Orleans, LA 70112				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
OF EXPENDITURE	Accounting/Banking		<b>=</b>		implete Schedule T.
			Check if Austin, TX Processing Fee		ng expense
			1 Toocsomig T cc		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	l ght		Office	held
Data					
Date 03/20/2024	Payee name Anedot, Inc.				
	·	-1-			
Amount (\$) \$6.30	Payee address; City; State; Zip Co 1340 Poydras Street	ode			
Φ0.30					
	Suite 1770				
	New Orleans, LA 70112				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) 	Description  Check if travel outs	ide of Texas Co	emplete Schedule T.
EXPENDITURE	Accounting/Banking	1	Check if Austin, TX		•
			Processing Fee		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght		Office	held
expenditure to benefit C/O	H				

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

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

Card Payment		The Instruction Guide explains how to complete this form.
ages Schedule F1:	2	FILER NAME
4/07 5		Observation Florida (The Harman Ha)

1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Etnics Commission Filers)
	Sch: 4/37 Rpt: 66/100	Chapa, Luz Elena D. (The Honorable)	00067895
4	Date	5 Payee name	
	03/20/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$20.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE		Check if Austin, TX, officeholder living expense  Processing Fee
			Frocessing Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
9	expenditure to benefit C/OI		d Office field
-	Date	D	
	03/21/2024	Payee name Anedot, Inc.	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.98	1340 Poydras Street	
	Ψ41.30	Suite 1770	
	DUDDOOF	New Orleans, LA 70112	N =
	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking	Check if Austin, TX, officeholder living expense
			Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	03/22/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.15	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Processing Fee
			i roccoding i co
-	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/OI	•	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/37 Rpt: 67/100 Chapa, Luz Elena D. (The Honorable) 00067895 4 Date Payee name 03/22/2024 Anedot, Inc. 6 Amount (\$) Payee address; State; Zip Code \$40.30 1340 Poydras Street **Suite 1770** New Orleans, LA 70112 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense **Processing Fee** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/22/2024 Anedot, Inc. Amount (\$) Payee address; City; State; Zip Code \$40.30 1340 Poydras Street **Suite 1770** New Orleans, LA 70112 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Processing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/23/2024 Anedot, Inc. Amount (\$) Payee address; City: State; Zip Code \$100.30 1340 Poydras Street Suite 1770 New Orleans, LA 70112 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Processing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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: 6/37 Rpt: 68/100	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	03/24/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.56	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Processing Fee
_	Complete ONLY if direct	Condidate/Office helder no rec
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H
_	Data	
	Date	Payee name
	03/25/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		1 Toccssing Tee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/26/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.48	1340 Poydras Street
	Ψ4.40	
		Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing Fee
	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

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Awards/Memorial: Legal Services  The Instruction G			ages.	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed	above)
-	Total pages Cabadula F1:	2			•				2	Filor ID	(Ethics Commis	cion Eiloro\
	Total pages Schedule F1: Sch: 7/37 Rpt: 69/100	2		Elena D. (The	Honorable)				3	Filer ID 00067895	(Ethics Commis	ssion Filers)
4	Date 03/26/2024	5	Payee name Anedot, Inc									
6	Amount (\$) \$10.30	7	Payee addres 1340 Poydr Suite 1770 New Orlean	•	State	e; Zip Co	de					
8	PURPOSE OF EXPENDITURE	(a)	Category (Se Accounting/	ee Categories listed at Banking	the top of this sch	hedule)	(b)	<b>=</b>	ı, TX,	de of Texas. Com officeholder living	•	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	(	Office sou	ght			Office he	eld	
	Date		Payee name									
	03/26/2024		Anedot, Inc.									
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de					
	\$10.30		1340 Poydr	as Street								
			Suite 1770									
			New Orlean	s, LA 70112								
-	PURPOSE	(a)	Category (c.	ee Categories listed at	the ten of this eak	hadula)	(b)	Description				
	OF	(-,	Accounting/		tne top of this scr	nedule)	(~)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		, 1000 arrang,	Darming .				Check if Austin	ı, TX,	officeholder living	j expense	
								Processing F	ee			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	(	Office sou	ght			Office he	eld	
	Date		Payee name									
	03/26/2024		Anedot, Inc	·								
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$20.30		1340 Poydr									
			Suite 1770									
				s, LA 70112								
	PURPOSE	(2)				ı	(h)	Dogorintian				
	OF	(a)	Accounting/	ee Categories listed at	the top of this sch	hedule)	(n)	Description  Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Accounting	Banking				Check if Austin	ı, TX,	officeholder living	expense	
								Processing F	ee			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	(	Office sou	ght			Office he	eld	

#### 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 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: 8/37 Rpt: 70/100	Chapa, Luz Elena D. (The Honorable) 00067895	
4	Date	5 Payee name	
	04/01/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$41.98	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-
	OF	Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Processing Fee	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiorarie to berieff C/O		
	Date	Payee name	
	04/01/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.73	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Processing Fee	
L	Computate ONII V if disport	Condidate/Officeholder name Office country	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
⊨			_
	Date	Payee name	
	04/01/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.15	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	2/11/2/10/12	Check if Austin, TX, officeholder living expense	
		Processing Fee	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
$\vdash$			_

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission	n Filers)	
	Sch: 9/37 Rpt: 71/100	Chapa, Luz	z Elena D. (The Honorab	ole)				00067895			
4	Date	5 Payee name									
	04/01/2024	Anedot, Inc	<b>).</b>								
6	Amount (\$)	7 Payee addre	ess; City; S	tate; Zip Co	ode						
	\$4.48	1340 Poyd	ras Street								
		Suite 1770									
		New Orlea	ns, LA 70112								
8	PURPOSE	(a) Category (S	See Categories listed at the top of thi	s schedule)	(b)	Description					
	OF EXPENDITURE	Accounting	/Banking			=		ide of Texas. Com			
						Processing F		, officeholder living	expense		
						Frocessing F	CC				
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ught			Office he	eld		
L	experientare to benefit 6/61	· ·									
	Date	Payee name	<b>!</b>								
	04/02/2024	Anedot, Inc	<b>).</b>								
	Amount (\$)	Payee addre	ess; City; S	tate; Zip Co	ode						
	\$20.30	1340 Poyd	ras Street								
		Suite 1770									
		New Orlea	ns, LA 70112								
	PURPOSE	(a) Category (S	See Categories listed at the top of thi	s schedule)	(b)	Description					
	OF EXPENDITURE	Accounting	/Banking					ide of Texas. Com			
						Processing F		, officeholder living	expense		
						Frocessing F	CC				
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	l ught			Office he	eld		
⊨											
	Date	Payee name									
	04/03/2024	Anedot, Inc									
	Amount (\$)	Payee addre	*	tate; Zip Co	ode						
	\$10.30	1340 Poyd	ras Street								
		Suite 1770									
		New Orlea	ns, LA 70112								
	PURPOSE OF	· ·	See Categories listed at the top of thi	s schedule)	(b)	Description	_			_	
	EXPENDITURE	Accounting	/Banking					ide of Texas. Com , officeholder living			
						Processing F		, omcenoider living	expense		
						1 Toccssing 1	CC				
$\vdash$	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	<u>l</u> ught			Office he	eld		
	expenditure to benefit C/O										
$\vdash$											
<u>_</u>										1070 1 0	

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

nent 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: Sch: 10/37 Rpt:	2 FILER NAME Chapa, Luz Elena D. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00067895
4	Date 04/03/2024	5 Payee name Anedot, Inc.
6	Amount (\$) \$6.56	7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Processing Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 04/03/2024	Payee name Anedot, Inc.
	Amount (\$) \$10.30	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing Fee
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH		
	Date 04/03/2024	Payee name Anedot, Inc.
	Amount (\$) \$10.73	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Processing Fee
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH		

### 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1: Sch: 11/37 Rpt:	2 FILER NAME Chapa, Luz Elena D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067895
4	Date 04/03/2024	5 Payee name Anedot, Inc.	<b>1</b>
	Amount (\$) \$10.30	7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Processing Fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 04/04/2024	Payee name Anedot, Inc.	
	Amount (\$) \$10.73	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 04/04/2024	Payee name Anedot, Inc.	
	Amount (\$) \$21.15	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Processing Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

### 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	04/06/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.73	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		Flocessing Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/14/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.30	1340 Poydras Street
	φ10.30	Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	04/14/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Processing Fee
	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

#### 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 13/37 Rpt:	Chapa, Luz Elena D. (The Honorable)  00067895	
4	Date	5 Payee name	
	04/14/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$20.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Processing Fee	
		Frocessing Fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
١	expenditure to benefit C/Ol		
	Date	Payee name	
	04/15/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.98	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Processing Fee	
		1 Toccssing Fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	·		_
	Date	Payee name	
	04/16/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.48	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Processing Fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_

#### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	)	
	Sch: 14/37 Rpt:	Chapa, Luz Elena D. (The Honorable)		
4	Date	5 Payee name		
	04/18/2024	Anedot, Inc.		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$10.73	1340 Poydras Street		
		Suite 1770		
		New Orleans, LA 70112		
8	PURPOSE			
0	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Processing Fee		
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held		
L	CAPETIGITUTE TO DETICITE C/OF	11		
	Date	Payee name		
	04/19/2024	Anedot, Inc.		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$40.30	1340 Poydras Street		
		Suite 1770		
		New Orleans, LA 70112		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Processing Fee		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
	- parametric 20 2000000 0701			
	Date	Payee name		
L	04/20/2024	Anedot, Inc.		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$40.30	1340 Poydras Street		
		Suite 1770		
		New Orleans, LA 70112		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_	
	OF EXPENDITURE	Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.		
	LAFLINDITORE	Check if Austin, TX, officeholder living expense		
		Processing Fee		
	Complete ONLY if allower	Condidate/Officeholder name Office south		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising 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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 15/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	04/22/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.48	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Processing Fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/22/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.98	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Processing Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	'	
	Date	Payee name
	06/15/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Processing fee
	Complete ONLY if direct	Condidate/Officeholder name Office equality Office hald
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense Event Expense Loan Repayment/Reimbu

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

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: 16/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	05/16/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$104.48	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		1 Toccssing Tee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/16/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		1 Todassing T co
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/20/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		Frocessing ree
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### 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/Political Committee Le			Gift/Awards/Memorials Expense Legal Services	Salaries/\	Wages	/Contract Labor		OTHER (enter a	a category not listed above)
			The Instruction Guide exp	plains how to co	omple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 17/37 Rpt:	Chapa, Luz	Elena D. (The Honora	able)				00067895	
4	Date	5 Payee name							
	05/21/2024	Anedot, Inc.							
6	Amount (\$)	7 Payee addres	s; City;	State; Zip Co	ode				
	\$20.30	1340 Poydra	as Street						
		Suite 1770							
		New Orleans	s, LA 70112						
8	PURPOSE	(a) Category (Se	e Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting/	Banking						pplete Schedule T.
						Processing F		officeholder living	g expense
						1 Toccssing 1	CC		
9	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	<u>l</u> ught			Office he	eld
	expenditure to benefit C/O				<b>J</b>				
	Date	Payee name							
	05/21/2024	Anedot, Inc.							
	Amount (\$)	Payee addres	s; City;	State; Zip Co	ode				
	\$41.98	1340 Poydra	as Street						
		Suite 1770							
		New Orleans	s, LA 70112						
	PURPOSE		e Categories listed at the top of	this schodule)	(b)	Description			
	OF	Accounting/		tilis scriedule)	( )		outsi	de of Texas. Com	pplete Schedule T.
	EXPENDITURE	, 1000aniang,	- ca			Check if Austin,	, TX,	officeholder living	g expense
						Processing F	ee		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offic	eholder name	Office sou	ught			Office h	eld
	experientare to perient eyer								
	Date	Payee name							
	05/22/2024	Anedot, Inc.							
	Amount (\$)	Payee addres	s; City;	State; Zip Co	ode				
	\$41.98	1340 Poydra	as Street						
		Suite 1770							
		New Orlean	s, LA 70112						
	PURPOSE	(a) Category (Se	e Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting/l	Banking			<u></u>			pplete Schedule T.
								officeholder living	g expense
						Processing F	ee		
_	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	laht			Office he	eld
	expenditure to benefit C/O			3.1100 300				000 11	<del></del>
	rms provided by Texas F	thios Commissis	an anana at	hice state ty i	10				Version V// 1 0 d278aha(

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

	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: 18/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895	
4	Date	5 Payee name	_
	05/22/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$4.48	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Processing Fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	1	
	Date	Payee name	=
	06/03/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$40.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Processing Fee	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
⊨	Data	Davies same	=
	Date 06/05/2024	Payee name Anedot, Inc.	
	Amount (\$) \$100.30	Payee address; City; State; Zip Code 1340 Poydras Street	
	Ψ100.30	Suite 1770	
		New Orleans, LA 70112	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/(Banking)  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Processing Fee	
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/Ol	<b>1</b>	

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

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	al 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: 19/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	06/06/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$41.98	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		1 Toccssing Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	H
	Date	Payee name
	06/06/2024	Anedot, Inc.
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$21.15	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Processing Fee
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	06/08/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.15	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
l	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Processing Fee
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

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	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: 20/37 Rpt:	2 FILER NAME Chapa, Luz Elena D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067895
Ļ	<del>-</del>	
4	Date	5 Payee name
	06/06/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.48	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		1 Toccssing rec
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
_	Date	Payee name
	06/13/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.30	1340 Poydras Street
	Ψ200.30	Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	06/19/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.73	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Processing Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorale to belieff C/OI	•

### 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 Comm

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	ll 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: 21/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	06/20/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense  Processing Fee
		Flocessing Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/20/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.44	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/24/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.40	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Processing Fee
$\vdash$	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 -

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: 22/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	06/24/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		1 Toccssing 1 cc
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/24/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.15	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing Fee
		1 Toolsesmig T oo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
L	06/24/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.98	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		Flocessing Fee
_	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 -Event Expense Fees

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	06/24/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	06/24/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.40	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Processing Fee
		i recessing rec
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/25/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Advertising Expense Accounting/Banking

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor				Travel in District  Travel Out of District  OTHER (enter a category not listed above)			
	Credit Gard Layment		The Instruction Guide	explains how to	comple	ete this form.				
1	Total pages Schedule F1: Sch: 24/37 Rpt:	l	E z Elena D. (The Hor	norable)			3	Filer ID 00067895	(Ethics Commission Filers)	
4	Date 06/26/2024	5 Payee name Anedot, Inc					<u> </u>			
6	Amount (\$)	<b>7</b> Payee addre		State; Zip	Codo					_
•	Amount (\$) \$4.48	1340 Poyd Suite 1770	ras Street	State, Zip	Code					
8	PURPOSE OF EXPENDITURE	(a) Category (s Accounting	See Categories listed at the to I/Banking	op of this schedule)	(b)		ı, TX,	ide of Texas. Con , officeholder livin	nplete Schedule T. g expense	
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office s	ought			Office h	eld	
	Date	Payee name	)							
	06/27/2024	Anedot, Inc	<b>&gt;</b> .							
	Amount (\$)	Payee addre	ess; City;	State; Zip	Code					
	\$1.35	1340 Poyd	ras Street							
		Suite 1770								
		New Orlea	ns, LA 70112							
	PURPOSE	(a) Category (s	See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Accounting				<b>-</b>	ı, TX,	ide of Texas. Con , officeholder livin	nplete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office s	ought			Office h	eld	
	Date	Payee name	<u> </u>							
	06/27/2024	Anedot, Inc								
	Amount (\$) \$21.15	Payee addre 1340 Poyd Suite 1770 New Orlea	ras Street	State; Zip	Code					
	PURPOSE	(a) Category (S	See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Accounting	/Banking			<b></b>	ı, TX,	ide of Texas. Con , officeholder livin	nplete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office s	ought			Office h	eld	

#### SCHEDULE F1

Solicitation/Fundraising Expense

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

Transportation Equipment & Related Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 25/37 Rpt: Chapa, Luz Elena D. (The Honorable) 00067895 4 Date Payee name 06/27/2024 Anedot, Inc. 6 Amount (\$) Payee address; State; Zip Code \$21.15 1340 Poydras Street **Suite 1770** New Orleans, LA 70112 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense **Processing Fee** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/28/2024 Anedot, Inc. Amount (\$) Payee address; City; State; Zip Code \$21.15 1340 Poydras Street **Suite 1770** New Orleans, LA 70112 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Processing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/29/2024 Anedot, Inc. Amount (\$) Payee address; City: State; Zip Code \$4.48 1340 Poydras Street Suite 1770 New Orleans, LA 70112 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Processing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Conditate/Office/bolder/Political

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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 26/37 Rpt:	Chapa, Luz Elena D. (The Honorable)
4 Date	5 Payee name
06/29/2024	Anedot, Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$80.30	1340 Poydras Street
	Suite 1770
	New Orleans, LA 70112
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Processing Fee
	Frocessing ree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
06/29/2024	Anedot, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$40.30	1340 Poydras Street
	Suite 1770
	New Orleans, LA 70112
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Processing Fee
	1 Toccssing Tee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/30/2024	Anedot, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$200.30	1340 Poydras Street
Ψ200.00	Suite 1770
DUDDOSE	New Orleans, LA 70112
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	п

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services Salaries/Wages/Contract Labor					OTHER (enter a category not listed above)					
				The Instruction Gu	iide explains how	to com	ıple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 27/37 Rpt:		Chapa, Luz	Elena D. (The F	Honorable)					00067895		
4	Date	5	Payee name									
	06/30/2024		Anedot, Inc.									
6	Amount (\$)	7	Payee addres	ss; City;	State; Zij	o Cod	ie					
	\$40.30		1340 Poydra	as Street								
			Suite 1770									
			New Orlean	s, LA 70112								
8	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule	) (	(b)	Description				
	OF EXPENDITURE		Accounting/		,			Check if travel	outsi	de of Texas. Co	mplete Schedule T.	
	LAFENDITORE							_		officeholder livir	ng expense	
								Processing F	ee			
							_					
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Office	soug	ht			Office h	ield	
_		_					_					
	Date		Payee name									
	06/30/2024		Anedot, Inc.									
	Amount (\$)		Payee addres		State; Zij	o Cod	е					
	\$62.81		1340 Poydra	as Street								
			Suite 1770									
			New Orlean	s, LA 70112								
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	) (	b)	Description				
	OF EXPENDITURE		Accounting/	Banking				<b>=</b>			mplete Schedule T.	
								_		officeholder livir	ng expense	
								Processing F	ее			
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	reholder name	Office	e soug	ht			Office h	neld	
	expenditure to benefit C/O		Janara ato, Omi	ocholder hame	Ollioc	Jourg				Omoo i	ioid	
_	Date		Dayso nome				_					
	06/30/2024		Payee name Anedot, Inc.									
		H			Otata: 75	- 01						
	Amount (\$)		Payee addres		State; Zij	o Coa	е					
	\$10.30		1340 Poydra	as Sireei								
			Suite 1770									
			New Orlean	s, LA 70112								
	PURPOSE OF	(a)		e Categories listed at th	ne top of this schedule)	) (	(b)	Description				
	EXPENDITURE		Accounting/	Banking				ш		de of Texas. Co officeholder livir	mplete Schedule T.	
								Processing F		onicendider livii	ig experise	
									- •			
	Complete ONLY if direct	Ц (	 Candidate/Offic	ceholder name	Office	soug	ht			Office h	neld	
	expenditure to benefit C/OI				2	9	-					
l												

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	rs)
	Sch: 28/37 Rpt:	Chapa, Luz Elena D. (The Honorable)  00067895	-,
4	Date	5 Payee name	
	06/30/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$40.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE		
°	OF		
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Processing Fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	DH .	
	Date	Payee name	
L	06/30/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.15	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Processing Fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	/T	
	Date	Payee name	
	06/30/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.98	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Processing Fee	
	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 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

	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: 29/37 Rpt:	Chapa, Luz Elena D. (The Honorable)	00067895
4	Date	5 Payee name	•
	03/22/2024	CSG, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	212 W. Laurel	
		San Antonio, TX 78212	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		el outside of Texas. Complete Schedule T.
	EXPENDITURE	l	in, TX, officeholder living expense
		Miscellaneo	us overhead expense
Ļ	0 1: 0:::::::::::::::::::::::::::::::::		0% 1.11
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	·		
	Date	Payee name	
	03/22/2024	CSG, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,270.00	212 W. Laurel	
		San Antonio, TX 78212	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Marketing c	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	04/03/2024	CSG, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,851.85	212 W. Laurel	
		San Antonio, TX 78212	
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		el outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Aust	in, TX, officeholder living expense
		Marketing c	ollateral
L	0 1: 0:::::::::::::::::::::::::::::::::		0.00
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L			

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract La  The Instruction Guide explains how to complete this fo	, , ,
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/37 Rpt:	Chapa, Luz Elena D. (The Honorable)	00067895
4	Date	5 Payee name	
	06/30/2024	Chapa, Javier	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,604.48	1880 Century Parke East	
		Los Angeles, CA 90067	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript	
	EXPENDITURE	The initial control in	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
		l — l —	of excess contribution
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experialiture to beliefit C/O	'	
	Date	Payee name	
	04/03/2024	Fedex Office	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$106.09	4416 Broadway	
		San Antonio, TX 78209	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript	
	EXPENDITURE	Tilliang Expense	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
		Host bo	
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	04/21/2024	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$54.40	1502 Austin Hwy	
		San Antonio, TX 78218	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript	
	EXPENDITURE	Office Supplies	if travel outside of Texas. Complete Schedule T.
		Stamps	if Austin, TX, officeholder living expense
		Stamps	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
$\vdash$			
I			

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 31/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	06/24/2024	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$13.60	1502 Austin Hwy
		San Antonio, TX 78218
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office supplies Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Stamps
		Stamps
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ĭ	expenditure to benefit C/O	
	Date	Payee name
	03/22/2024	MailChimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$260.00	675 Ponce de Leon Ave NE, Ste. 5000
	Ψ200.00	0101 01100 de 200117.We 142, ote. 0000
		Atlanta, GA 30308
	PURPOSE	
	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	Check if Austin, TX, officeholder living expense
		Subscription
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialiture to beliefit C/O	'
	Date	Payee name
	02/23/2024	Marks Moore Photography
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	816 Camaron St.
		San Antonio, TX 78212
	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  Media package
		Wedia package
	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
Credit Card Payment

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

	Credit Card Payment	The	Instruction Guide	explains how to co	mple	ete this form.			
1	Total pages Schedule F1:	FILER NAME				3	3	Filer ID	(Ethics Commission Filers)
	Sch: 32/37 Rpt:	Chapa, Luz Elei	na D. (The Hon	orable)				00067895	
4	Date	Payee name				<u> </u>			
	04/05/2024	Marks Moore Ph	notography						
6	Amount (\$)	Payee address;	City;	State; Zip Co	ode				
	\$2,641.88	816 Camaron S	t.						
		San Antonio, TX	〈 78212						
8	PURPOSE	Category (See Cate	egories listed at the tor	of this schedule)	(b)	Description			
	OF EXPENDITURE	Salaries/Wages				Check if travel out			
	LAPENDITORE					Check if Austin, T			expense
						Photography a	nc	i media	
_	Opening ONE V if direct	)     -   -   -   -   -   -   -	Ida	0#:				Off: I	1-1
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeho	ider name	Office sou	ignt			Office he	eia
	Date	Payee name							
	03/26/2024	Monarch Trophy	/						
	Amount (\$)	Payee address;	City;	State; Zip Co	ode				
	\$25.98	16227 San Ped	ro Ave						
		San Antonio, TX	K 78232						
	PURPOSE	Category (See Cate	egories listed at the top	o of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Supplies				Check if travel out			
						Check if Austin, T. Name badges	Λ,	onicenoider living	expense
						rame baages			
_	Complete ONLY if direct	Candidate/Officeho	lder name	Office sou	l laht			Office he	eld
	expenditure to benefit C/O				9				
	Date	Payee name							
	01/20/2024	Northwest Demo	ocrats						
		Payee address;		State; Zip Co	ndo				
	Amount (\$) \$100.00	PO Box 681911	City;	State, Zip Ct	ue				
	Φ100.00	FO BOX 001911							
		Con Antonio TV	/ <b>7</b> 0000						
		San Antonio, TX							
	PURPOSE OF	Category (See Cate			(b)	Description	toio	lo of Toyoo Com	oloto Cobodulo T
	EXPENDITURE	Contributions/Do				Check if travel out			
		Carialdate/Office	criolacim onlica			Event Sponsor		-	
						-			
	Complete ONLY if direct	Candidate/Officeho	lder name	Office sou	ı <u> </u>			Office he	eld
	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 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

	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: 33/37 Rpt:	Chapa, Luz Elena D. (The Honorable)	00067895
4	Date	5 Payee name	-
	03/24/2024	Office Max	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$157.95	255 E Basse Rd #1510	
		San Antonio, TX 78209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		el outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Aus	tin, TX, officeholder living expense
l		Office supp	lies
Ļ			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
┕	'		
	Date	Payee name	
L	03/25/2024	Office Max	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.32	255 E Basse Rd #1510	
l			
l		San Antonio, TX 78209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE		el outside of Texas. Complete Schedule T.
l		Rubber ban	tin, TX, officeholder living expense
l			
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
H	Date	Payee name	
	04/02/2024	Office Max	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
	\$31.07	255 E Basse Rd #1510	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
l		San Antonio, TX 78209	
_	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule)  Office supplies  (b) Description  Check if trave	el outside of Texas. Complete Schedule T.
	EXPENDITURE	Office supplies	tin, TX, officeholder living expense
l		Name badg	es
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiulture to beliefft C/OI	11	

### 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

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

Candidate/Officeholder/Politic Credit Card Payment	al 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: 34/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4 Date	5 Payee name
03/12/2024	Rubsamen, Anne
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	154 Cave Lane
	San Antonio, TX 78209
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
	Campaign support
O Complete Chillians	Outstide to 10ffine health and a second of the second of t
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/22/2024	Rubsamen, Anne
Amount (\$)	Payee address; City; State; Zip Code
\$27.20	154 Cave Lane
	San Antonio, TX 78209
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Supplies Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Reimbursement
	Treimbarsement
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
Date	T _
Date	Payee name
04/03/2024	Rubsamen, Anne
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	154 Cave Lane
	San Antonio, TX 78209
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.
	Campaign Support
	Campaign support
Complete CNII V if direct	Condidate Office holder name Office accepts
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
,	

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising 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 Salaries/Wages/Contract Labor

	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: 35/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	05/06/2024	Rubsamen, Anne
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	154 Cave Lane
l		San Antonio, TX 78209
8	PURPOSE	
ľ	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign support
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
l	06/04/2024	Rubsamen, Anne
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	154 Cave Lane
l		
l		San Antonio, TX 78209
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Salaries/Wages/Contract Labor
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Campaign support
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕	<u>'</u>	
	Date	Payee name
	02/29/2024	San Antonio Bar Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	126 E Nueva St
		San Antonio, TX 78204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mailing list
		ivialility list
L	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-

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	-	Salaries/\ le explains how to co		cte this form.	OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME			3	Filer ID	(Ethics Commission Filers)
	Sch: 36/37 Rpt:	Chapa, Luz Elena D. (The Ho	onorable)			00067895	
4	Date	Payee name					
	03/02/2024	San Antonio Women's Hall of	f Fame				
6	Amount (\$)	7 Payee address; City;	State; Zip Co	ode			
	\$1,000.00	P.O. 461104					
		San Antonio, TX 78246					
8	PURPOSE	(a) Category (See Categories listed at the	top of this schedule)	(b)	Description		
	OF EXPENDITURE	Event Expense			Check if travel outs		
					Check if Austin, TX		expense
					Program spons	ursnip	
9	Complete ONLY if direct	Candidate/Officeholder name	Office cou	abt		Office he	old.
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
	Date	Payee name					
	05/06/2024	Spiros Consulting					
	Amount (\$)	Payee address; City;	State; Zip Co	ode			
	\$3,300.00	1710 Connecticut Ave NW FI	2				
		Washington, DC 20009					
	PURPOSE OF	(a) Category (See Categories listed at the	top of this schedule)	(b)	Description		
	EXPENDITURE	Consulting Expense			Check if travel outs Check if Austin, TX		
					Research service		ехрепзе
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held						eld
	expenditure to benefit C/OI						
	Date	Payee name					
	03/13/2024	United States Postal Service					
	Amount (\$) Payee address; City; State; Zip Code						
	\$272.00	1107 Austin Hwy					
		San Antonio, TX 78209					
	PURPOSE OF	(a) Category (See Categories listed at the	top of this schedule)	(b)	Description		
	EXPENDITURE	Fees			Check if travel outs		
					Check if Austin, TX Stamps	., oπicenoider living	expense
					Ciampo		
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	<u>L</u> ıght		Office he	eld
	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

	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: 37/37 Rpt:	Chapa, Luz Elena D. (The Honorable) 00067895					
4	Date	5 Payee name					
	03/22/2024	United States Postal Service					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$170.00	1107 Austin Hwy					
		San Antonio, TX 78209					
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 PO Box Rental					
		TO BOX Northal					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
-	expenditure to benefit C/OH						
	Date	Payee name					
	04/25/2024	United Way of San Antonio and Bexar County					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$300.00	700 S Alamo St					
	7000.00						
		San Antonio, TX 78205					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Event sponsorship					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O	1					
	Date	Payee name					
	02/01/2024	YWCA					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$250.00	503 Castroville Rd.					
		San Antonio, TX 78237					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
	EXI ENDITORE	Check if Austin, TX, officeholder living expense					
		Event sponsorship					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						

## 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: 100/100 2 FILER NAME Filer ID (Ethics Commission Filers) Chapa, Luz Elena D. (The Honorable) 00067895 8 Amount (\$) Date 5 Name of person from whom amount is received 02/20/2024 **Broadway Bank** \$1.24 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78209 Purpose for which amount is received Check if political contribution returned to filer Interest Payment Amount (\$) Date Name of person from whom amount is received 01/19/2024 **Broadway Bank** \$1.05 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78209 Purpose for which amount is received Check if political contribution returned to filer Interest Payment