

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**
COVER SHEET PG 1

| | | | | |
|--|--|---|---|--|
| The JC/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00067895 | 2 Total pages filed: 100 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR The Honorable | FIRST Luz Elena D. | MI | OFFICE USE ONLY |
| | NICKNAME | LAST Chapa | SUFFIX | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE REDACTED PER 254.0313, GOV'T CODE | | | Date Hand-delivered or Date Postmarked |
| | | | | Receipt # Amount |
| | | | | Date Processed |
| | | | | Date Imaged |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR The Honorable | FIRST Leticia | MI | |
| | NICKNAME | LAST Van de Putte | SUFFIX | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOV'T CODE | | | |
| | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | |
| | (210) | 854-6604 | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | |
| 9 PERIOD COVERED | Month Day Year 01/01/2024 | THROUGH | Month Day Year 06/30/2024 | |
| 10 ELECTION | ELECTION DATE Month Day Year 11/05/2024 | | ELECTION TYPE | |
| | | | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff <input type="checkbox"/> Other |
| | | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Special | |
| 11 OFFICE | OFFICE HELD (if any) Court Of Appeals, Justice Place 4 District 4 | | 12 OFFICE SOUGHT (if known) Court Of Appeals, Justice | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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13 C / OH NAME Chapa, Luz Elena D. (The Honorable) **14** Filer ID (Ethics Commission Filers)
00067895

15 NOTICE FROM POLITICAL COMMITTEE(S)
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

| | |
|---|--------------------------------------|
| COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME |
| | COMMITTEE ADDRESS |
| | COMMITTEE CAMPAIGN TREASURER NAME |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS |

| | | | |
|-------------------------------|--|----|------------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 194,866.71 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 33,160.16 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 184,248.40 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

17 AFFIDAVIT

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

The Honorable Luz Elena D. Chapa

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

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| | | | |
|---|--|--------------------------------|----------------------------|
| 18 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 19 Filer ID 00067895 | (Ethics Commission Filers) |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ | 187,905.43 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | 6,961.28 |
| 3. | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ | |
| 4. | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) | \$ | |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 33,160.16 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ | |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ | |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | |
| 12. | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | 2.29 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/57 Rpt: 4/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Stein & Durbin | 7 Amount of Contribution (\$) \$1,500.00 |
| 6 Contributor address; City; State; Zip Code San Antonio, TX 78201 | | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almaraz Jr, Rosendo | Amount of Contribution (\$) \$2,604.48 |
| Contributor address; City; State; Zip Code McAllen, TX 78504 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Almaraz Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Omar G | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code San Antonio, TX 78258 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm OG Alvarez & Associates | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Patricia | 7 Amount of Contribution (\$) \$260.73 |
| | 6 Contributor address; City; State; Zip Code Helotes, TX 78023 | |
| 8 Contributor's Principal Occupation Fourth Court of Appeals | | 9 Contributor's Job Title Justice |
| 10 Contributor's employer/law firm Fourth Court of Appeals | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Rey | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Helotes, TX 78023 | |
| Contributor's Principal Occupation Trucking Company | | Contributor's Job Title Founder |
| Contributor's employer/law firm Del Rey Express | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Daniel | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78248 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm USAA | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/57 Rpt: 6/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Daniel | 7 Amount of Contribution (\$) \$156.56 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78248 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm USAA | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Christian | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Consultant | | Contributor's Job Title Consultant |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Below, Christopher | Amount of Contribution (\$) \$260.73 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78232 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Offices of Christopher Below | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Biedenharn, Kathy | 7 Amount of Contribution (\$) \$2,000.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78217 | |
| 8 Contributor's Principal Occupation Homemaker | | 9 Contributor's Job Title Homemaker |
| 10 Contributor's employer/law firm Homemaker | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biedenharn, Kathy | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78217 | |
| Contributor's Principal Occupation Homemaker | | Contributor's Job Title Homemaker |
| Contributor's employer/law firm Homemaker | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell PAC | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/57 Rpt: 8/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Olga | 7 Amount of Contribution (\$) \$150.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Law Office of Olga Brown | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Olga | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Office of Olga Brown | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brunkenhoefer, Blake | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm BRUNKENHOEFER PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Clinton | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Langley & Banack | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campos, Shaunda | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78258 | |
| Contributor's Principal Occupation Homemaker | | Contributor's Job Title Homemaker |
| Contributor's employer/law firm Homemaker | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, James | Amount of Contribution (\$) \$260.73 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm JW Carter Law, PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 7/57 Rpt: 10/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casseb, Joseph | 7 Amount of Contribution (\$) \$521.15 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Goode Casseb Riklin Choate & Watson | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavender, Katie | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78232 | |
| Contributor's Principal Occupation Homemaker | | Contributor's Job Title Homemaker |
| Contributor's employer/law firm Homemaker | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa , Adriana | Amount of Contribution (\$) \$350.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| Contributor's Principal Occupation Speech Language Pathologist | | Contributor's Job Title Speech Language Pathologist |
| Contributor's employer/law firm Ensign | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 8/57 Rpt: 11/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Javier <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90067 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Contributor's Principal Occupation Producer | | 9 Contributor's Job Title Partner |
| 10 Contributor's employer/law firm Mucho Más Media | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Javier <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90067 | Amount of Contribution (\$) \$2,604.48 |
| Contributor's Principal Occupation Producer | | Contributor's Job Title Partner |
| Contributor's employer/law firm Mucho Más Media | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Joe <hr/> Contributor address; City; State; Zip Code Linn, TX 78563 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Retired attorney | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark Hill <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75202 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowen Rodriguez Peacock <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crabb, Elizabeth <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232 | Amount of Contribution (\$) \$104.48 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 10/57 Rpt: 13/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Jill | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| 8 Contributor's Principal Occupation Career consultant | | 9 Contributor's Job Title Consultant |
| 10 Contributor's employer/law firm JLC Consulting | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson Trolio Ream & Garza | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78216 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis Law Firm | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78216 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 11/57 Rpt: 14/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis and Santos PC | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78204 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Cedillo and Mendoza | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Marino | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|---|
| The Instruction Guide explains how 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Los Santos, Hugo Xavier | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78201 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Hugo Xavier de los Santos, Attorney at Law & CPA | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reynaldo | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Reynaldo Diaz Accident Injury Attorney PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dilley, Douglas | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78210 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Dilley Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Sabrina | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78232 | |
| 8 Contributor's Principal Occupation Sales | | 9 Contributor's Job Title Self employed |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garansuay, Lauren | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Homemaker | | Contributor's Job Title Homemaker |
| Contributor's employer/law firm Homemaker | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Michael | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78258 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm McDonald & Adkins, LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein & Orr | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio , TX 78205 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Arturo | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78259 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Arturo Gonzales PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Francis | Amount of Contribution (\$) \$150.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78201 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Calfas Law Group | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how 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) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, John | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm John Gonzales & Assoc. | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Jr., Arnulfo | Amount of Contribution (\$) \$3,000.00 |
| | Contributor address; City; State; Zip Code Laredo, TX 78041 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Offices of Arnulfo Gonzalez Jr | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ami | Amount of Contribution (\$) \$521.15 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Golden Steves & Gordon LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 16/57 Rpt: 19/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ami | 7 Amount of Contribution (\$) \$521.15 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Golden Steves & Gordon LLP | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gowan Law Group | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gransee, Kurt | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78248 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Rush & Gransee, L.C. | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 17/57 Rpt: 20/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gravelly, Mark | 7 Amount of Contribution (\$) \$1,041.98 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Gravelly PC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra , Michael Matthew | Amount of Contribution (\$) \$1,041.98 |
| | Contributor address; City; State; Zip Code McAllen , TX 78502 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Offices of Michael M. Guerra | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra LLP | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Frank (Mr.) | 7 Amount of Contribution (\$) \$5,000.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Guerra LLP | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanor, Charles | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm The Hanor Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardberger, Phil (The Honorable) | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Retired Chief Justice | | Contributor's Job Title Retired Chief Justice |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Taylor | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78258 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Taylor Harper PLLC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helming, Claudia | Amount of Contribution (\$) \$26.35 |
| | Contributor address; City; State; Zip Code El Paso, TX 79936 | |
| Contributor's Principal Occupation Teacher | | Contributor's Job Title Teacher |
| Contributor's employer/law firm Socorro ISD | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Ian | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Pearland, TX 77584 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Hernandez Sunosky LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 20/57 Rpt: 23/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Justin <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Hill Law Firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Robert <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Robert C Hilliard, LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoelscher Law Group PC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Hosey, Peter | 7 Amount of Contribution (\$) \$2,500.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78215 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Jackson Walker | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurd, Cliff | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Business Manager | | Contributor's Job Title President |
| Contributor's employer/law firm Hurd Enterprises LTD | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson Walker LLP PAC | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75201 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 22/57 Rpt: 25/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Michelle | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janicek, Beth | Amount of Contribution (\$) \$1,041.98 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Janicek Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefferson Cano | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78205 | |
| Contributor's Principal Occupation | | Contributor's Job Title Attorney |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 23/57 Rpt: 26/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe A Gamez Law Firm 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Alexandra Contributor address; City; State; Zip Code San Antonio, TX 78230 | Amount of Contribution (\$) \$260.73 |
| Contributor's Principal Occupation Teacher | | Contributor's Job Title Teacher |
| Contributor's employer/law firm San Antonio Academy | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Brad Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$1,041.98 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Barton Benson Jones PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 05/20/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Sarah <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78217 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm State Farm Insurance | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemmy Law Firm <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langley & Banack, Inc. <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$2,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 25/57 Rpt: 28/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langley & Banack, Inc. | 7 Amount of Contribution (\$) \$1,500.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langley & Banack, Inc. | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Fidel Rodriguez Jr | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 26/57 Rpt: 29/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Mark Murray | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78216 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leykum, Luci | Amount of Contribution (\$) \$260.73 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Physician | | Contributor's Job Title Physician |
| Contributor's employer/law firm Harbor Health / STVHCS | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longoria, Alcide | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| Contributor's Principal Occupation Investor | | Contributor's Job Title Investor |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 27/57 Rpt: 30/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longoria, Alcide M. | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| 8 Contributor's Principal Occupation Real estate | | 9 Contributor's Job Title Executive Vice President |
| 10 Contributor's employer/law firm JLL | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longoria, Cheryl W. | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Homemaker | | Contributor's Job Title Homemaker |
| Contributor's employer/law firm Homemaker | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez , Jo Chris | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Langley & Banack | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 28/57 Rpt: 31/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Orlando | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Lopez, Scott LLP | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loredo, Gilbert | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78228 | |
| Contributor's Principal Occupation Governmental Relations | | Contributor's Job Title Vice President for Governmental Relations |
| Contributor's employer/law firm UT Health San Antonio | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loree and Lipscomb Attorneys At Law | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78258 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 29/57 Rpt: 32/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupe, John | 7 Amount of Contribution (\$) \$104.48 |
| 6 Contributor address; City; State; Zip Code San Antonio, TX 78218 | | |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddox, Adriana | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Laredo, TX 78040 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Benavides Maddox PC | | Law firm of contributor's spouse (if any) Benavides Maddox PC |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Janice | Amount of Contribution (\$) \$2,500.00 |
| Contributor address; City; State; Zip Code San Antonio, TX 78229 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Offices of Janice Maloney | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 30/57 Rpt: 33/100 |
| 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Tim <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78205 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Law Offices of Maloney & Campolo, LLP | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney Jr., Pat <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Offices of Pat Maloney | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marck, Eugene <hr/> Contributor address; City; State; Zip Code San Antonio , TX 78209 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 05/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Andrea 6 Contributor address; City; State; Zip Code San Antonio, TX 78261 | 7 Amount of Contribution (\$) \$1,041.98 |
| 8 Contributor's Principal Occupation Financial Administration/ Healthcare | | 9 Contributor's Job Title COO |
| 10 Contributor's employer/law firm UT Health San Antonio | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin & Drought Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez-Flores, Martha Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$150.00 |
| Contributor's Principal Occupation Creative Director | | Contributor's Job Title Director |
| Contributor's employer/law firm MM Creative LLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 32/57 Rpt: 35/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Jr, Thomas | 7 Amount of Contribution (\$) \$52.40 |
| | 6 Contributor address; City; State; Zip Code San Antono, TX 78215 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Jim Adler and Associates | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazuca, James | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm James V. Mazuca, Attorney at Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNiece, Erin | Amount of Contribution (\$) \$260.73 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78201 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Cavaretta, Katona & Leighner, PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 33/57 Rpt: 36/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 01/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercillott, April | 7 Amount of Contribution (\$) \$1,041.98 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77056 | |
| 8 Contributor's Principal Occupation Financial Administration | | 9 Contributor's Job Title Financial Administrator |
| 10 Contributor's employer/law firm Wright Close & Barger | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kevin | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm The Law Offices of Miller & Bicklein | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mireles, Margaret | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78201 | |
| Contributor's Principal Occupation Retired Teacher | | Contributor's Job Title Retired Teacher |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 34/57 Rpt: 37/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Ana | 7 Amount of Contribution (\$) \$104.48 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| 8 Contributor's Principal Occupation Art consultant | | 9 Contributor's Job Title Consultant |
| 10 Contributor's employer/law firm AnArte Gallery | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moorman, Laura | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Accountant | | Contributor's Job Title Accountant |
| Contributor's employer/law firm Self-employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morehouse, Diana T. | Amount of Contribution (\$) \$150.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 35/57 Rpt: 38/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrill, Jessica <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78218 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Homemaker | | 9 Contributor's Job Title Homemaker |
| 10 Contributor's employer/law firm Homemaker | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naman, Howell, Smith & Lee <hr/> Contributor address; City; State; Zip Code Waco, TX 76701 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nava, Alex <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm A Nava & Glander PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 36/57 Rpt: 39/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Negem, Chris | 7 Amount of Contribution (\$) \$300.00 |
| 6 Contributor address; City; State; Zip Code San Antonio, TX 78216 | | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Negem Law Firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Tommy | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code San Antonio, TX 78213 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Allen Stein & Dubin | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orsinger, Richard | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code San Antonio, TX 78205 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Offices of Richard Orsinger | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parent, Mary | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Los Angeles, CA 90067 | |
| 8 Contributor's Principal Occupation Film Production | | 9 Contributor's Job Title Vice Chairman, Worldwide Production |
| 10 Contributor's employer/law firm Legendary Pictures | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parent, Mary | Amount of Contribution (\$) \$1,562.81 |
| | Contributor address; City; State; Zip Code Los Angeles, CA 90067 | |
| Contributor's Principal Occupation Film Production | | Contributor's Job Title Vice Chairman, Worldwide Production |
| Contributor's employer/law firm Legendary Pictures | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peisen, Jessica | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Guerra LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 38/57 Rpt: 41/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poling, Mark | 7 Amount of Contribution (\$) \$521.15 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78218 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Poling Law, PLLC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prichard Young LLP | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78216 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prichard, David | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78218 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Prichard & Young LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Pulman, Cappuccio & Pullen, LLP 6 Contributor address; City; State; Zip Code San Antonio, TX 78213 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Jeff Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$1,041.98 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Ray Pena McChristian | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reuter, Rachel Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$521.15 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Reuter Law Group, PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 40/57 Rpt: 43/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Corinna | 7 Amount of Contribution (\$) \$521.15 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| 8 Contributor's Principal Occupation President and Chief Administrative Officer | | 9 Contributor's Job Title President and Chief Administrative Officer |
| 10 Contributor's employer/law firm Holt Cat | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Barry | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Oil and Gas Production | | Contributor's Job Title Co-Trustee and Operations Manager |
| Contributor's employer/law firm Coates Energy | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Clarissa | Amount of Contribution (\$) \$156.56 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Denton Navarro Rodriguez Bernal Santee & Zech PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 41/57 Rpt: 44/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 05/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Sonia 6 Contributor address; City; State; Zip Code San Antonio, TX 78229 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Cowen Rodriguez Peacock | | 11 Law firm of contributor's spouse (if any) Haynes Immigration Law, P.C. |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal Pauerstein Sandoloski Agather LLP Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubsamen, Cynthia (Ms.) Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Homemaker | | Contributor's Job Title Homemaker |
| Contributor's employer/law firm Homemaker | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 42/57 Rpt: 45/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, George | 7 Amount of Contribution (\$) \$1,041.98 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm George Salinas Injury Lawyers | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio Firefighters Association | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78201 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saucedo, Noe | Amount of Contribution (\$) \$521.15 |
| | Contributor address; City; State; Zip Code Boerne, TX 78006 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Hoblit Darling Ralls Hernandez & Hudlow | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeder, Lance | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78258 | |
| 8 Contributor's Principal Occupation Investor | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeder, Lance | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78258 | |
| Contributor's Principal Occupation Investor | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuereman Law Firm | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 44/57 Rpt: 47/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Benjamin 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Real Estate Development | | 9 Contributor's Job Title Group Vice President |
| 10 Contributor's employer/law firm HEB | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Searls, Tiffany Contributor address; City; State; Zip Code San Antonio, TX 78216 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Business owner | | Contributor's Job Title Owner |
| Contributor's employer/law firm Bygones | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Anna Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$1,041.98 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Carabin Shaw | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 45/57 Rpt: 48/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, James Michael 6 Contributor address; City; State; Zip Code San Antonio, TX 78215 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Carabin Shaw | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sico, Hoelscher & Harris Contributor address; City; State; Zip Code Corpus Chrisit, TX 78401 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slay-Barber, Doris Contributor address; City; State; Zip Code Adkins, TX 78101 | Amount of Contribution (\$) \$150.00 |
| Contributor's Principal Occupation Trustee Chairman | | Contributor's Job Title Trustee Chairman |
| Contributor's employer/law firm Texas Business and Professional Women's Foundation, Inc | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 46/57 Rpt: 49/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, James 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Dykema | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Tinsley Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) \$260.37 |
| Contributor's Principal Occupation Executive | | Contributor's Job Title Director of Community Investment |
| Contributor's employer/law firm Zachry Group | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smothers, Patricia Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 47/57 Rpt: 50/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snell, David | 7 Amount of Contribution (\$) \$521.15 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Bayne, Snell & Krause | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Edward | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78205 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Edward C. Snyder Attorney at Law PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, John | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Laredo, TX 78045 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Office of John R. Solis | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 48/57 Rpt: 51/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soules, Luther | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78217 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Soules & Wallace | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Catherine | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Helotes, TX 78203 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Partner |
| Contributor's employer/law firm Langley & Banack | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stowers, Nicole | Amount of Contribution (\$) \$521.15 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78232 | |
| Contributor's Principal Occupation HR Director | | Contributor's Job Title HR Director |
| Contributor's employer/law firm Execupay | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 49/57 Rpt: 52/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Christyn <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78257 | 7 Amount of Contribution (\$) \$1,041.98 |
| 8 Contributor's Principal Occupation Medical advocate | | 9 Contributor's Job Title Founder |
| 10 Contributor's employer/law firm Rebecca's Wish | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teeter, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Law Professor | | Contributor's Job Title Law Professor |
| Contributor's employer/law firm St. Mary's University School of Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teeter, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) \$104.48 |
| Contributor's Principal Occupation Law Professor | | Contributor's Job Title Law Professor |
| Contributor's employer/law firm St. Mary's University School of Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) The Herrera Law Firm <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78207 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Herrera Law Firm <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78207 | Amount of Contribution (\$) \$2,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Rios Law Firm <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259 | Amount of Contribution (\$) \$2,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas J Henry Law <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78249 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tinsman & Sciano <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Joyce <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248 | Amount of Contribution (\$) \$52.40 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 52/57 Rpt: 55/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treat, David | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78217 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Partner |
| 10 Contributor's employer/law firm Davis Law Firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez & Trevino | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Deborah | Amount of Contribution (\$) \$78.44 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78232 | |
| Contributor's Principal Occupation Executive Director | | Contributor's Job Title Executive Director |
| Contributor's employer/law firm San Antonio Youth Literacy | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 53/57 Rpt: 56/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Robert <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78248 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Valdez & Trevino | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, David R. <hr/> Contributor address; City; State; Zip Code Fair Oaks, TX 78015 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, Patricia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230 | Amount of Contribution (\$) \$104.48 |
| Contributor's Principal Occupation Chief Development and Outreach Officer | | Contributor's Job Title Chief Development and Outreach Officer |
| Contributor's employer/law firm Autism Service Center of San Antonio | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 54/57 Rpt: 57/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, Roseanna | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Fair Oaks, TX 78015 | |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vera, Margaret | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Offices of Margaret M. Vera | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 04/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsdorf, Linda | Amount of Contribution (\$) \$260.73 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78248 | |
| Contributor's Principal Occupation Executive | | Contributor's Job Title Executive |
| Contributor's employer/law firm Mission Pharmacal Company | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 55/57 Rpt: 58/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Douglas <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Guy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Watts Law Firm LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Mikal <hr/> Contributor address; City; State; Zip Code San Anotnio, TX 78257 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Watts Law Firm PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 56/57 Rpt: 59/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weidman, Joanna | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78248 | |
| 8 Contributor's Principal Occupation Marketing | | 9 Contributor's Job Title Executive |
| 10 Contributor's employer/law firm Nustar Energy | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Jerry | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78704 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Watts Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Bryan | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Offices of Bryan Woods | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 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 |
| 4 Date 04/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Joan <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | 7 Amount of Contribution (\$) \$104.48 |
| 8 Contributor's Principal Occupation Curator | | 9 Contributor's Job Title Curator |
| 10 Contributor's employer/law firm Fair Winds | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zachry, Karen Lee <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Business/ Sales | | Contributor's Job Title Owner |
| Contributor's employer/law firm Tiny Finch | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/2 Rpt: 61/100 | |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 04/03/2024 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Ryan | 8 Amount of contribution (\$) \$2,132.36 | 9 In-kind contribution description Fundraiser host |
| | 7 Contributor address; City; State; Zip Code San Antonio, TX 78209 | | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) Owner | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) President | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) Lee Michaels Fine Jewelry | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feik, J.J. | Amount of contribution (\$) \$2,132.36 | In-kind contribution description Fundraiser host |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) Entrepreneur | | Contributor's job title (FOR JUDICIAL) (See instructions) Owner | |
| Contributor's employer/law firm (FOR JUDICIAL) Feik Enterprises | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Serna, Baltazar | Amount of contribution (\$) \$1,348.28 | In-kind contribution description Fundraiser host |
| | Contributor address; City; State; Zip Code San Antonio, TX 78205 | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) Attorney | | Contributor's job title (FOR JUDICIAL) (See instructions) Attorney | |
| Contributor's employer/law firm (FOR JUDICIAL) Serna & Serna | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|--|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 2/2 Rpt: 62/100 | |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 03/26/2024 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Serna, Cesar | 8 Amount of contribution (\$) \$1,348.28 | 9 In-kind contribution description Fundraiser host |
| | 7 Contributor address; City; State; Zip Code San Antonio, TX 78205 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) Attorney | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) Attorney | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) Serna & Serna | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/37 Rpt: 63/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 01/16/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 |
| Date 03/09/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$104.48 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/09/2024 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 2/37 Rpt: 64/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| 4 Date 03/14/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$10.73 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 03/14/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$20.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 03/14/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$4.48 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 3/37 Rpt: 65/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| 4 Date 03/18/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$10.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 03/19/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$4.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 03/20/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$6.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 4/37 Rpt: 66/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/20/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$20.30 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/21/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/22/2024 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 5/37 Rpt: 67/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/22/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$40.30 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/22/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$40.30 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/23/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$100.30 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 6/37 Rpt: 68/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/24/2024 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 |
| Date 03/25/2024 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/26/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$4.48 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 7/37 Rpt: 69/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| 4 Date 03/26/2024 | 5 Payee name Anedot, Inc. |
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|-------------------------------------|---|
| 6 Amount (\$) \$10.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|---------------------------------|---|--|

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

| | |
|--------------------|----------------------------|
| Date 03/26/2024 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|------------------------|--|---|

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

| | |
|--------------------|----------------------------|
| Date 03/26/2024 | Payee name Anedot, Inc. |
|--------------------|----------------------------|

| | |
|----------------------------|--|
| Amount (\$) \$20.30 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|------------------------|--|---|

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

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 8/37 Rpt: 70/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/01/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 |
| Date 04/01/2024 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/01/2024 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 9/37 Rpt: 71/100 | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/01/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$4.48 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 |
| Date 04/02/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$20.30 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 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 |
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| 4 Date 04/03/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$6.56 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/03/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$10.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|--------------------|----------------------------|
| Date 04/03/2024 | Payee name Anedot, Inc. |
|--------------------|----------------------------|

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| Amount (\$) \$10.73 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 11/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| | |
|-----------------------------|-------------------------------------|
| 4 Date 04/03/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$10.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/04/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$10.73 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|--------------------|----------------------------|
| 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 |
|------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

| | |
|------------------------|--|
| Amount (\$) \$10.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/14/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$10.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 13/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/14/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$20.30 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/15/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/16/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$4.48 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 14/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| 4 Date 04/18/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$10.73 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|---------------------------------|---|--|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/19/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|--------------------|----------------------------|
| Date 04/20/2024 | Payee name Anedot, Inc. |
|--------------------|----------------------------|

| | |
|------------------------|--|
| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
|------------------------|--|

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

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 15/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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|-----------------------------|-------------------------------------|
| 4 Date 04/22/2024 | 5 Payee name Anedot, Inc. |
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|--------------------------------|---|
| 6 Amount (\$) \$4.48 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|---------------------------------|---|--|

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

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|--------------------|----------------------------|
| Date 04/22/2024 | Payee name Anedot, Inc. |
|--------------------|----------------------------|

| | |
|------------------------|--|
| Amount (\$) \$41.98 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
|------------------------|--|

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

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

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|--------------------|----------------------------|
| Date 06/15/2024 | Payee name Anedot, Inc. |
|--------------------|----------------------------|

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|-------------------------|--|
| Amount (\$) \$100.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee |
|------------------------|---|--|

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

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 16/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| 4 Date 05/16/2024 | 5 Payee name Anedot, Inc. |
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|----------------------------------|---|
| 6 Amount (\$) \$104.48 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|---------------------------------|---|--|

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

| | |
|--------------------|----------------------------|
| Date 05/16/2024 | Payee name Anedot, Inc. |
|--------------------|----------------------------|

| | |
|------------------------|--|
| Amount (\$) \$20.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| | | |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|------------------------|--|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 05/20/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$100.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 17/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 05/21/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$20.30 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/21/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/22/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 18/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| 4 Date 05/22/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$4.48 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/03/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/05/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$100.30 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|------------------------|--|---|

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 19/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/06/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/06/2024 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/08/2024 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 20/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/06/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$4.48 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/13/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$200.30 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/19/2024 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: 21/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/20/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$40.30 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/20/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$3.44 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/24/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$2.40 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 22/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/24/2024 | 5 Payee name Anedot, Inc. | |
| 6 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/24/2024 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/24/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 23/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| 4 Date 06/24/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$6.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/24/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$2.40 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/25/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$100.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 24/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/26/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$4.48 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/27/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$1.35 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/27/2024 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 25/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/27/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$21.15 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 |
| Date 06/28/2024 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/29/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$4.48 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 26/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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| 4 Date 06/29/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$80.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 06/29/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|------------------------|---|--|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/30/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$200.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|------------------------|---|--|

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

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 27/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
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|-----------------------------|-------------------------------------|
| 4 Date 06/30/2024 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$40.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|---------------------------------|---|--|

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

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| Date 06/30/2024 | Payee name Anedot, Inc. |
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| | |
|------------------------|--|
| Amount (\$) \$62.81 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
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| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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| Date 06/30/2024 | Payee name Anedot, Inc. |
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| Amount (\$) \$10.30 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
|------------------------|---|--|

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

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 28/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/30/2024 | 5 Payee name Anedot, Inc. | |
| 6 Amount (\$) \$40.30 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/30/2024 | 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 | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/30/2024 | Payee name Anedot, Inc. | |
| Amount (\$) \$41.98 | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 29/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/22/2024 | 5 Payee name CSG, Inc. | |
| 6 Amount (\$) \$300.00 | 7 Payee address; City; State; Zip Code 212 W. Laurel San Antonio, TX 78212 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Miscellaneous overhead expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/22/2024 | Payee name CSG, Inc. | |
| Amount (\$) \$4,270.00 | Payee address; City; State; Zip Code 212 W. Laurel San Antonio, TX 78212 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing collateral |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/03/2024 | Payee name CSG, Inc. | |
| Amount (\$) \$2,851.85 | Payee address; City; State; Zip Code 212 W. Laurel San Antonio, TX 78212 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing collateral |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 30/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/30/2024 | 5 Payee name Chapa, Javier | |
| 6 Amount (\$) \$2,604.48 | 7 Payee address; City; State; Zip Code 1880 Century Parke East Los Angeles, CA 90067 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Return of excess contribution |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/03/2024 | Payee name Fedex Office | |
| Amount (\$) \$106.09 | Payee address; City; State; Zip Code 4416 Broadway San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Host board |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/21/2024 | Payee name HEB | |
| Amount (\$) \$54.40 | Payee address; City; State; Zip Code 1502 Austin Hwy San Antonio, TX 78218 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 31/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 06/24/2024 | 5 Payee name HEB | |
| 6 Amount (\$) \$13.60 | 7 Payee address; City; State; Zip Code 1502 Austin Hwy San Antonio, TX 78218 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/22/2024 | Payee name MailChimp | |
| Amount (\$) \$260.00 | Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE, Ste. 5000 Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/23/2024 | Payee name Marks Moore Photography | |
| Amount (\$) \$3,000.00 | Payee address; City; State; Zip Code 816 Camaron St. San Antonio, TX 78212 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media package |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 32/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 04/05/2024 | 5 Payee name Marks Moore Photography | |
| 6 Amount (\$) \$2,641.88 | 7 Payee address; City; State; Zip Code 816 Camaron St. San Antonio, TX 78212 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography and media |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/26/2024 | Payee name Monarch Trophy | |
| Amount (\$) \$25.98 | Payee address; City; State; Zip Code 16227 San Pedro Ave San Antonio, TX 78232 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name badges |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/20/2024 | Payee name Northwest Democrats | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code PO Box 681911 San Antonio, TX 78268 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 33/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/24/2024 | 5 Payee name Office Max | |
| 6 Amount (\$) \$157.95 | 7 Payee address; City; State; Zip Code 255 E Basse Rd #1510 San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/25/2024 | Payee name Office Max | |
| Amount (\$) \$4.32 | Payee address; City; State; Zip Code 255 E Basse Rd #1510 San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rubber bands |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/02/2024 | Payee name Office Max | |
| Amount (\$) \$31.07 | Payee address; City; State; Zip Code 255 E Basse Rd #1510 San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name badges |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 34/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/12/2024 | 5 Payee name Rubsamen, Anne | |
| 6 Amount (\$) \$2,000.00 | 7 Payee address; City; State; Zip Code 154 Cave Lane San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign support |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/22/2024 | Payee name Rubsamen, Anne | |
| Amount (\$) \$27.20 | Payee address; City; State; Zip Code 154 Cave Lane San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/03/2024 | Payee name Rubsamen, Anne | |
| Amount (\$) \$2,000.00 | Payee address; City; State; Zip Code 154 Cave Lane San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign support |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 35/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 05/06/2024 | 5 Payee name Rubsamen, Anne | |
| 6 Amount (\$) \$2,000.00 | 7 Payee address; City; State; Zip Code 154 Cave Lane San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign support |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/04/2024 | Payee name Rubsamen, Anne | |
| Amount (\$) \$2,000.00 | Payee address; City; State; Zip Code 154 Cave Lane San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign support |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/29/2024 | Payee name San Antonio Bar Association | |
| Amount (\$) \$750.00 | Payee address; City; State; Zip Code 126 E Nueva St San Antonio, TX 78204 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailing list |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 36/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/02/2024 | 5 Payee name San Antonio Women's Hall of Fame | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code P.O. 461104 San Antonio, TX 78246 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Program sponsorship |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/06/2024 | Payee name Spiros Consulting | |
| Amount (\$) \$3,300.00 | Payee address; City; State; Zip Code 1710 Connecticut Ave NW FI 2 Washington, DC 20009 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/13/2024 | Payee name United States Postal Service | |
| Amount (\$) \$272.00 | Payee address; City; State; Zip Code 1107 Austin Hwy San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 37/37 Rpt: | 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 03/22/2024 | 5 Payee name United States Postal Service | |
| 6 Amount (\$) \$170.00 | 7 Payee address; City; State; Zip Code 1107 Austin Hwy San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box Rental |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/25/2024 | Payee name United Way of San Antonio and Bexar County | |
| Amount (\$) \$300.00 | Payee address; City; State; Zip Code 700 S Alamo St San Antonio, TX 78205 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name YWCA | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code 503 Castroville Rd. San Antonio, TX 78237 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/1 Rpt: 100/100 |
| 2 FILER NAME Chapa, Luz Elena D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00067895 |
| 4 Date 02/20/2024 | 5 Name of person from whom amount is received Broadway Bank | 8 Amount (\$) \$1.24 |
| | 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78209 | |
| | 7 Purpose for which amount is received Interest Payment <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 01/19/2024 | Name of person from whom amount is received Broadway Bank | Amount (\$) \$1.05 |
| | Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78209 | |
| | Purpose for which amount is received Interest Payment <input type="checkbox"/> Check if political contribution returned to filer | |