CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

I	FORM	C/OH
COVER	SHEE	T PG 1

The C/OH Instruction	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00070466	,	 Total pages fil 9 	ed: 7
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		JSE ONLY
OFFICEHOLDER	The Honorable	Diego M.				
NAME					Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	. 07/15/2024	
		Bernal				
					Data Hand daliwana dar	- Data Daatu aduad
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	IY;	ZIP CODE	Date Hand-delivered or	i Dale Poslinarkeu
MAILING	PO Box 12411				Desciet //	Amount
ADDRESS					Receipt #	Amount
Change of Address	San Antonio, TX 78212				Dete Dressed	
					Date Processed	
					Data Imand	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER				IVII		
NAME	Mrs.	Blakely				
	NICKNAME	LAST		SUFFIX		
		Fernandez				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP ⁻	T / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER	300 Convent St., Ste. 270	0				
ADDRESS						
(Residence or Business)	Can Antonia TV 70205					
	San Antonio, TX 78205					
7 CAMPAIGN	AREA CODE PHON		EXTENSION			
TREASURER	(210) 299-3410					
PHONE	(210) 200-0410					
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff	15th day after car	mnaign treasurer
					appointment (offic	
	X July 15	8th day before	election	Exceeded modified	Final Report (Atta	ach C/OH-FR)
		_		reporting limit	-	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	Tł	HROUGH	06/30/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
			General	Special		
				-		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	State Representative Dist	rict 123		State Representa	ative District 123	
	1			1		
		<u> </u>	TO PAGE 2			
		GO	I FAGE Z			
Forms provided by Te	exas Ethics Commission	www.et	thics.state.tx.u	S	Versio	on V4.1.0.d378aba0

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 97

13 C / OH NAME	Bernal, Diego M. (Th	e Honorable)	14 Filer ID 00070466	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t d officeholders are required to report this information	he candidate's or office	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRES	ŝS			
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00		
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	i)	\$ 22,512.61		
EXPENDITURE TOTALS						
	4. TOTAL POLITICAL EXPENDITURES					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 2,953.06		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS	OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT						
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	r of perjury, that the act I information required t	companying report is o be reported by me		
		The Hono	rable Diego M. Bern	al		
			Candidate or Officehol			
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid	, this the	day		
		ertify which, witness my hand and seal of office.				
Signature of offi	cer administering	Printed name of officer administering	Title of office	r administering oath		
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.d378aba		

SUBTOTALS - C	ЮН			C		FORM C/OH SHEET PG 3 3 of 97
18 FILER NAME Bernal, Diego M. (The Hond	rable)			19 Filer ID 00070466	(Ethics Co	ommission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE					SUB	TOTAL AMOUNT
1. X SCHEDULE A1: N	IONETARY POLITICAL	. CONTRIBUTIONS			\$	21,360.00
2. X SCHEDULE A2: N	ION-MONETARY (IN-K	IND) POLITICAL CONTRII	BUTIONS		\$	1,152.61
3. X SCHEDULE B: PI	EDGED CONTRIBUTIO	ONS			\$	0.00
4. X SCHEDULE E: LC	DANS				\$	0.00
5. X SCHEDULE F1: F	POLITICAL EXPENDITU	IRES FROM POLITICAL C	CONTRIBUTION	IS	\$	18,355.56
6. X SCHEDULE F2: U	INPAID INCURRED OB	BLIGATIONS			\$	0.00
7. X SCHEDULE F3: F	PURCHASE OF INVEST	MENTS FROM POLITICA	L CONTRIBUT	IONS	\$	0.00
8. X SCHEDULE F4: E	EXPENDITURES MADE	BY CREDIT CARD			\$	0.00
9. X SCHEDULE G: PO	OLITICAL EXPENDITUR	RES FROM PERSONAL F	UNDS		\$	0.00
10. SCHEDULE H: P/	AYMENT FROM POLITI	ICAL CONTRIBUTIONS TO	O A BUSINESS	OF C/OH	\$	
11. SCHEDULE I: NO	N-POLITICAL EXPEND	ITURES FROM POLITICA	L CONTRIBUTI	ONS	\$	
12. X SCHEDULE K: IN TO FILER	TEREST, CREDITS, GA	NINS, REFUNDS, AND CO	NTRIBUTIONS	RETURNED	\$	2.31

SCHEDULE A1

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/97	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	go M. (The Honorable)		00070466	r noroj
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
02/09/2024	Campos, Lorena			\$500.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78702			
	upation / Job title (See Instructions)	9 Employer (See Instructions)		
Government	t Affairs	Campos Consulting Gro	up	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
01/16/2024	Comeaux, Robert L.			\$10.00
	Contributor address; City; State; Zip Code	,		
	San Antonio, TX 78232-4948			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/14/2024	Comeaux, Robert L.			\$10.00
	Contributor address; City; State; Zip Code			
	San Antonio, TX 78232-4948			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/13/2024	Comeaux, Robert L.			\$10.00
	Contributor address; City; State; Zip Code			
	San Antonio, TX 78232-4948			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/15/2024	Comeaux, Robert L.			\$10.00
	Contributor address; City; State; Zip Code			
	San Antonio, TX 78232-4948			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		

SCHEDULE A1

L							
	The Instru	ction Guide explains how to comple	ete this fc	orm.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/97	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Bernal, Dieg	jo M. (The Honorable)				00070466	
4	Date	5 Full name of contributor out-of-state	te PAC (ID#:)	7	Amount of Contribution (\$)	
	05/13/2024	Comeaux, Robert L.					\$10.00
		6 Contributor address; City; State; Zip Code					
		1					
	ļ	1					
		San Antonio, TX 78232-4948					
8		ipation / Job title (See Instructions)	,	9 Employer (See Instructions)		
	Retired			Retired			
	Date	Full name of contributor 🗌 out-of-state	te PAC (ID#:)		Amount of Contribution (\$)	
	06/13/2024	Comeaux, Robert L.					\$10.00
	1	Contributor address; City; State; Zip Code					
	ļ	1					
	ļ	1					
		San Antonio, TX 78232-4948					
		ipation / Job title (See Instructions)		Employer (See Instructions)		
	Retired			Retired			
	Date	Full name of contributor X out-of-state	.e PAC (ID#: <u>C</u>)		Amount of Contribution (\$)	
	02/09/2024	Greenberg Traurig P.A. Political Action	n Committe	е			\$750.00
	1	Contributor address; City; State; Zip Code	<u>,</u>				
	ļ	1					
	ļ	1					
		Albany, NY 12207	r				
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions)		
					_		
	Date	Full name of contributor out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	02/09/2024	HCA Texas Good Government Fund					\$500.00
	ļ	Contributor address; City; State; Zip Code	;				
	ļ	1					
	ļ						
	Di sinal assu	Dallas, TX 75240	<u> </u>		Ĺ		
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions)		
					_		
	Date	Full name of contributor out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	02/09/2024	Hausenfluck, Amber					\$200.00
		Contributor address; City; State; Zip Code	,				
		1					
	ļ	Austin TV 70704					
	Deineineleen	Austin, TX 78704			Ļ		
		ipation / Job title (See Instructions)		Employer (See Instructions)		
	Consultant			TX Public Affairs LLC			

SCHEDULE A1

					_		
	The Instru	ction Guide explains how to comple	ete this form.		1	Total pages Schedule A1: Sch: 3/5 Rpt: 6/97	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
-		o M. (The Honorable)				00070466	
4	Date	5 Full name of contributor out-of-state	e PAC (ID#:)	7	Amount of Contribution (\$)	
	03/04/2024	HillCo PAC					\$1,000.00
		6 Contributor address; City; State; Zip Code					
Ļ		Austin, TX 78701-2458					
8	Principal occu	pation / Job title (See Instructions)	9 Empioy	ver (See Instructions))		
	Date	Full name of contributor X out-of-state	e PAC (ID#: <u>C00027342</u>)		Amount of Contribution (\$)	—
	01/23/2024	IBEW PAC Voluntary Fund					\$4,000.00
		Contributor address; City; State; Zip Code					
		1					
		Washington, DC 20001					
	Principal occu	pation / Job title (See Instructions)	Employ	ا ver (See Instructions))		
	Date	Full name of contributor X out-of-state	e PAC (ID#: <u>C00225342</u>)		Amount of Contribution (\$)	
	03/29/2024	McGuire Woods Federal PAC					\$500.00
	I	Contributor address; City; State; Zip Code					
		1					
		Richmond, VA 23219					
	Drincinal occu	pation / Job title (See Instructions)	Employ	ver (See Instructions)	<u> </u>		
	Ρπιτοιραί στου	אווטווז זיסט ווופ (ספי ווזמיטכוטוזא)	Епроу)		
	Date	Full name of contributor X out-of-state	e PAC (ID#: <u>C00225342</u>)		Amount of Contribution (\$)	
	03/29/2024	McGuireWoods Federal PAC					\$500.00
	I	Contributor address; City; State; Zip Code					
		1					
		Richmond, VA 23219					
┝	Principal occu	pation / Job title (See Instructions)	Employ	/er (See Instructions))		
		,			,		
╞	Date	Full name of contributor out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	02/09/2024	Moak Casey PAC					\$500.00
	I	Contributor address; City; State; Zip Code					
		1					
		Austin, TX 78746					
	Principal occu	pation / Job title (See Instructions)	Employ	/er (See Instructions))		
		`		•	,		
┢			I				

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/97	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	o M. (The Honorable)		00070466	on,
4 Date	5 Full name of contributor X out-of-state PAC (ID#:	C00366559)	7 Amount of Contribution (\$)	
02/09/2024	NRG Energy Political Action Committee			\$2,000.00
	6 Contributor address; City; State; Zip Code			
	Princeton, NJ 08540			
8 Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	.)	
			, 	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/09/2024	Political Action Committee of The Independent I			\$250.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78768			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
03/29/2024	Texas American Federation of Teachers - COPE	E Fund		\$250.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78741			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/09/2024	Texas Land Title Association PAC			\$500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78703			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/09/2024	Texas Lobby Partners LLP	/	, and an e contribution (+)	\$1,000.00
02/00/2021	Contributor address; City; State; Zip Code			+_,000100
	Communication address, City, State, Zip Code			
	Austini, TX 78701			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
)	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/5 Rpt: 8/97 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Bernal, Diego M. (The Honorable) 00070466 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 02/09/2024 **Texas Trial Lawyers Association PAC** \$2,500.00 6 Contributor address; City; State; Zip Code Austin, TX 78701 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/09/2024 \$6,000.00 USAA Employee Political Action Committee Contributor address; City; State; Zip Code San Antonio, TX 78288 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/09/2024 VATAT-PAC Fund \$350.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Sc Sch: 1/1 Rpt:	
2 FILER NAME			3 Filer ID (Ethic	cs Commission Filers)
	go M. (The Honorable)		00070466	,
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	0.00
5 Date			8 Amount of contribution (\$)	9 In-kind contribution
02/05/2024				description Fundraiser Email
	7 Contributor address; City; State; Zip Code		\$000100	Advertising
				1
				1
	Austin, TX 78701			outside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See i	nstructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
				,
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Data			A second of	In-kind contribution
Date 02/05/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	description
02/05/2024	MoakCasey			Event Space, Food, and
	Contributor address; City; State; Zip Code			Beverages for Fundraiser
	Austin, TX 78701			1
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	•	outside of Texas. Complete Schedule T. nstructions)
Fincipal Occi				had deterior a
Contributorio	principal occupation (FOR JUDICIAL)	Contributor's job title		(See instructions)
Contributors	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

PLEDGED CONTRIBUTIONS SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/97 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Bernal, Diego M. (The Honorable) 00070466 4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00 In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

LOANS			SCHEDUL	ЕE
The Instruction Guide explains how to complete this form.			ges Schedule E: L Rpt: 11/97	
2 FILER NAME Bernal, Diego M. (The Honorable)		r ID 0704((Ethics Commission F 66	ilers)
⁴ TOTAL OF UNITEMIZED LOANS			\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:)	9 Loan Amount (\$)	
6 Is lender a 8 Lender address; City; State; Zip Code financial institution?			10 Interest Rate	
			11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)	5)			
14 Description of Collateral 15 Check if personal funds we None	ere depo	sited	into political account (See Instructions)	
Information Information			19 Amount Guarantee	ed (\$)
not applicable 18 Guarantor address; City; State; Zip Code				
20 Principal occupation 21 Employer (See Instructions	;)			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Loan Rep Fees Office Ov Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	aymei erhead pense xpens Vages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME		:	3	Filer ID (Ethics Commission Filers)			
	Sch: 1/85 Rpt: 12/97		Bernal, Diego M. (The Honorable)				00070466			
4	Date 06/14/2024	5	Payee name 7-Eleven							
6	Amount (\$) \$49.94	7	Payee address; City; State; Zip Co 6443 San Pedro Avenue San Antonio, TX 78216	ode						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel In District	(b)			le of Texas. Complete Schedule T. officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ıght			Office held			
	Date		Payee name							
	05/28/2024		7-Eleven							
	Amount (\$) \$52.39		Payee address; City; State; Zip Co 6443 San Pedro Avenue	ode						
	DUDDOOF		San Antonio, TX 78216	(1-)						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel In District	(0)			le of Texas. Complete Schedule T. officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ight			Office held			
	Date		Payee name							
	05/20/2024		7-Eleven							
	Amount (\$) \$56.65		Payee address; City; State; Zip Co 6443 San Pedro Avenue	ode						
			San Antonio, TX 78216							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel In District	(b)			le of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ight			Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Innittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission Filers)	
-	Sch: 2/85 Rpt: 13/97		Bernal, Diego M. (The Honor	able)				00070466	
4	Date	5	Payee name						
	05/13/2024		7-Eleven						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le			
	\$58.48		6443 San Pedro Avenue						
			San Antonio, TX 78216						
8	PURPOSE	(a)				(b) Deceription			
0	OF	(a)	Category (See Categories listed at the Travel In District	top of this sche	edule)	b) Description	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Travel III District					, officeholder living expense	
						Gas			
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office held	
	Date		Payee name						
	05/06/2024		7-Eleven						
				Ctoto	Zin Cor				
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le			
	\$60.82		6443 San Pedro Avenue						
			San Antonio, TX 78216						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Travel In District	top of this sche	edule)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Dffice soug	ht		Office held	
	Date		Payee name						
	04/19/2024		7-Eleven						
-	Amount (\$)	-	Payee address; City;	State [.]	Zip Coo	le			
	\$64.35		6443 San Pedro Avenue	otato,	,p 000				
	404.00								
			San Antonio, TX 78216						
	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule)	b) Description			
	OF EXPENDITURE		Travel In District			Check if travel	outsi	ide of Texas. Complete Schedule T.	
	EAFENDITORE					Check if Austin	і, TX	, officeholder living expense	
						Gas			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explair	Office C Polling I Printing Salaries	overhea Expens Expens XWages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	5	· · ·		•		3	Filer ID (Ethics Commission Filers)				
1	Sch: 3/85 Rpt: 14/97		Bernal, Diego M. (The Honorable)					00070466				
4	Date	5	Payee name									
	04/05/2024		7-Eleven									
6	Amount (\$) \$55.03	7	Payee address;City;State; Zip Code6443 San Pedro Avenue									
			San Antonio, TX 78216									
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Travel In District	chedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ought			Office held				
	Date		Payee name									
	04/03/2024		7-Eleven									
	Amount (\$)		Payee address; City; Sta	te; Zip C	Code							
	\$62.35		6443 San Pedro Avenue San Antonio, TX 78216									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Travel In District	chedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	bught			Office held				
	Date		Payee name									
	03/25/2024		7-Eleven									
	Amount (\$) \$56.16		Payee address; City; Sta 6443 San Pedro Avenue	te; Zip C	Code							
			San Antonio, TX 78216									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Travel In District	chedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	bught			Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Loar Fees Offic Food/Beverage Expense Pollin Gift/Awards/Memorials Expense Print	in Repayi ce Overh ling Expe nting Expe aries/Wag	nent/Reimbursement ead/Rental Expense nse ense ges/Contract Labor	d/Rental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District /Contract Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 4/85 Rpt: 15/97		Bernal, Diego M. (The Honorable)				00070466				
4	Date 03/11/2024	5	Payee name 7-Eleven								
6		7		n Code							
6	Amount (\$) \$55.13	'	Payee address; City; State; Zip 6443 San Pedro Avenue San Antonio, TX 78216	p Cou	2						
_											
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel In District) (1			de of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	nt		Office held				
	Date		Payee name								
	02/26/2024		7-Eleven								
	Amount (\$)		Payee address; City; State; Zip	p Code	9						
	\$52.98		6443 San Pedro Avenue San Antonio, TX 78216								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel In District) (1			de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	nt		Office held				
	Date		Payee name								
	02/16/2024		7-Eleven								
	Amount (\$) \$58.37		Payee address; City; State; Zip 6443 San Pedro Avenue	p Code	2						
			San Antonio, TX 78216	<u> </u>							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel In District) (1			de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	nt		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-		Office Over Polling Exp Printing Exp Salaries/Wa	head/Re ense oense ages/Co	eimbursement ental Expense ntract 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 expla	ins n	10W to con	piete		_			
1	Total pages Schedule F1: Sch: 5/85 Rpt: 16/97		FILER NAME Bernal, Diego M. (The Honorable)						Filer ID (Ethics Commission Filers) 00070466		
4	Date	5	Payee name				I				
	02/12/2024		7-Eleven								
6	Amount (\$) \$52.89		Payee address; City; St 6443 San Pedro Avenue San Antonio, TX 78216	ate;	Zip Coc	le					
8	PURPOSE	(a)	Category (See Categories listed at the top of this	coho		b) De	escription				
	OF EXPENDITURE		Travel In District	sche	(uule)		Check if travel o		de of Texas. Complete Schedule T. officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht			Office held		
	Date		Payee name								
	02/05/2024		7-Eleven								
	Amount (\$)		Payee address; City; St	ate;	Zip Coc	le					
	\$51.27		6443 San Pedro Avenue San Antonio, TX 78216								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Travel In District	sche	edule)		4		de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht			Office held		
	Date		Payee name								
	01/29/2024		7-Eleven								
	Amount (\$) \$57.43		Payee address; City; St 6443 San Pedro Avenue	ate;	Zip Coc	le					
			San Antonio, TX 78216								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Travel In District	sche	edule)		4		de of Texas. Complete Schedule T. officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 6/85 Rpt: 17/97	Bernal, Diego M. (The Honorable)	00070466							
4	Date 04/15/2024	5 Payee name April's Chinese Restaurant								
6	Amount (\$) \$20.73	 Payee address; City; State; Zip Code 2030 S. Alamo Street San Antonio, TX 78204 								
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	02/27/2024	April's Chinese Restaurant								
	Amount (\$) \$18.62	Payee address; City; State; Zip Code 2030 S. Alamo Street								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/06/2024	Beacon Hill Market & Deli								
	Amount (\$) \$51.94	Payee address; City; State; Zip Code 1717 Blanco Road								
		San Antonio, TX 78212								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									
1	Total pages Schedule F1:									
-	Sch: 7/85 Rpt: 18/97	Bernal, Diego M. (The Honorable)	,							
4	Date 01/29/2024	5 Payee name Beacon Hill Market & Deli								
6	Amount (\$) \$74.38	 7 Payee address; City; State; Zip Code 1717 Blanco Road San Antonio, TX 78212 								
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H								
	Date	Payee name								
	02/01/2024	Best Buy								
	Amount (\$) \$46.44	Payee address; City; State; Zip Code 125 NW Loop 410 Suite 201 San Antonio, TX 78216								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Adapter for Projector								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H								
	Date	Payee name	=							
	05/28/2024	Billy Bob's Hamburgers								
	Amount (\$) \$34.37	Payee address; City; State; Zip Code 1314 US-90								
		Castroville, TX 78009								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting 								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H								

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/85 Rpt: 19/97	Bernal, Diego M. (The Honorable) 00070466
4 Date 05/22/2024	5 Payee name Blanco Caf
6 Amount (\$) \$18.72	7 Payee address; City; State; Zip Code 1720 Blanco Road San Antonio, TX 78212
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/26/2024	Bright Coffee
Amount (\$) \$30.20	Payee address; City; State; Zip Code 1705 Blanco Road
	San Antonio, TX 78212
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/25/2024	CAVA
Amount (\$) \$44.39	Payee address; City; State; Zip Code 999 E. Basse Road Suite 125 San Antonio, TX 78209
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Trai Food/Beverage Expense Polling Expense Trai By - Gift/Awards/Memorials Expense Printing Expense Trai						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 9/85 Rpt: 20/97		Bernal, Diego M. (The Honorable)					00070466		
4	Date 05/24/2024	5	Payee name CAVA							
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode					
	\$39.68		999 E. Basse Road							
			Suite 125							
			San Antonio, TX 78209							
	DUDDOCE				(h)	D				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(u)	Description	outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Food/Beverage Expense					officeholder living expense		
					Food and Be	ver	age for Meeting			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office held		
	Date		Payee name							
	04/08/2024		CAVA							
	Amount (\$)		Payee address; City; State	e; Zip Co	ode					
	\$39.68		999 E. Basse Road							
			Suite 125							
			San Antonio, TX 78209							
	51155005				<i>a</i> >					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this so	hedule)	(0)	Description	outoi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Food/Beverage Expense					officeholder living expense		
								rage for Meeting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held		
	Data									
	Date		Payee name							
	02/06/2024		Caroline							
	Amount (\$)			e; Zip Co	bde					
	\$137.75		621 Congress Avenue							
			Austin, TX 78701							
	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Schedule T.		
	EXPENDITORE							officeholder living expense		
						⊢ood and Be	ver	age for Meeting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held		
	on ponditor of bonome 0/01									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, _ I Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	rhead/Rent ense pense ages/Contr			Travel in District Travel Out of Distric	pment & Related Expense	
1	Total pages Schedule F1:	2	· · · · ·		·		3	Filer ID (F	Ethics Commission Filers)	
-	Sch: 10/85 Rpt: 21/97	2	Bernal, Diego M. (The Honorable)				J	00070466		
4	Date	5	Payee name							
	02/15/2024		Celebrate Excellence							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$3,066.19		2130 Jackson Keller Road							
			San Antonio, TX 78213							
8	PURPOSE	(a)			(b) Des	cription				
ľ	OF	(4)	Category (See Categories listed at the top of this sche Event Expense	edule)	_		outsi	de of Texas. Complet	te Schedule T.	
	EXPENDITURE					Check if Austin,	TX,	officeholder living ex	pense	
					Fies	sta Medals	5			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held		
	Date		Payee name							
	05/08/2024		Central Market							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$51.73		4821 Broadway	•						
			San Antonio, TX 78209							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		Check if travel c		de of Texas. Complet		
	-					acks for Di		officeholder living ex ct Office	pense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	ght	nt Office held					
-	Date		Payee name							
	06/17/2024		Chevron							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$4.63		7150 San Pedro Avenue							
	+									
			San Antonio, TX 78216							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Des	•				
	EXPENDITURE		Travel In District					de of Texas. Complet		
							тX,	officeholder living ex	pense	
					Gas	5				
	Operation Objective in	Ļ		D.ff: -				<u> </u>		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	gnt			Office held		

			EXPENDITURE CATEGORIES	FOR I	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Food/Beverage Expense Pollin Gift/Awards/Memorials Expense Printir	e Overh ng Exper ing Expe ries/Wag	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_	Tatal warman Oak adula E4	<u> </u>				Files ID (Ethics Operationing Filese)	
L.	Total pages Schedule F1: Sch: 11/85 Rpt: 22/97	2	Bernal, Diego M. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00070466
4	Date	5	Payee name				
	06/17/2024		Chevron				
6	Amount (\$)	7	Payee address; City; State; Zip	Code	e		
	\$30.00		7150 San Pedro Avenue				
			San Antonio, TX 78216				
8	PURPOSE	(a)		0	b) Description		
ľ	OF	(~)	Category (See Categories listed at the top of this schedule) Travel In District			outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austin	, тх,	, officeholder living expense
					Gas		
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office :	sough	nt		Office held
	Date		Payee name				
	04/29/2024		Chevron				
				Code			
	Amount (\$)		Payee address; City; State; Zip	Code	5		
	\$58.18		7150 San Pedro Avenue				
			San Antonio, TX 78216				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel In District	(t			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office :	sough	nt		Office held
	Date		Payee name				
	04/17/2024		Chipotle				
	Amount (\$)		Payee address; City; State; Zip	Code	2		
	\$29.00		438 NW Loop 410	Cout	5		
	\$29.00		438 NW 2000 410				
			San Antonio, TX 78216				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(ł	b) Description		
	OF EXPENDITURE		Food/Beverage Expense		Check if Austin	, тх,	ide of Texas. Complete Schedule T. , officeholder living expense age for Meeting
-	Complete ONLY if direct	L(Candidate/Officeholder name Office	souar	nt		Office held
	expenditure to benefit C/OI			Jougi			

			EX	PENDITURE CATEO	GORIES FO	OR BO	OX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awa nmittee Legal Se	everage Expense ards/Memorials Expense	Office O Polling E Printing Salaries	Expense Expense Expense Wages	se s/Contract Labor		Travel in District Travel Out of Dist	quipment & Related	
1	Total pages Schedule F1:	2				-		3	Filer ID	(Ethics Commi	ssion Filers)
-	Sch: 12/85 Rpt: 23/97		Bernal, Diego M.	(The Honorable)				Ľ	00070466	(Eunos e	
4	Date 03/27/2024	1	Payee name Chipotle								
_			•								
6	Amount (\$) \$31.28		Payee address; 438 NW Loop 41(San Antonio, TX)	ate; Zip C	:00e					
Ļ	DUDDOOF					(1)					
8	PURPOSE OF EXPENDITURE		Category _{(See Categ} Food/Beverage E	ories listed at the top of this XPENSE	schedule)	(b)		ı, TX,	de of Texas. Comp officeholder living age for Meet	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	er name	Office so	ought			Office he	ld	
	Date	Γ	Payee name								
	05/30/2024		Circle K								
	Amount (\$)		Payee address;	City; Sta	ate; Zip C	code					
	\$63.21		3820 San Pedro A	Avenue	-						
	PURPOSE OF EXPENDITURE	(a)		ories listed at the top of this	schedule)	(b)			de of Texas. Comp officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officehold	er name	Office so	ought			Office he	ld	
	Date	Γ	Payee name								
	05/20/2024		Circle K								
	Amount (\$) \$44.78		Payee address; 3820 San Pedro /		ate; Zip C	Code					
			San Antonio, TX	78212		_					
	PURPOSE OF EXPENDITURE		Category _{(See Categ} Travel In District	ories listed at the top of this	schedule)	(b)			de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	er name	Office so	ought			Office he	ld	

			EXPENDITURE CA	TEGO	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen mittee Legal Services The Instruction Guide e		Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 13/85 Rpt: 24/97		Bernal, Diego M. (The Honorabl	e)				00070466
4	Date 04/08/2024	5	Payee name Circle K					
6	Amount (\$) \$8.64	7	Payee address; City; 3820 San Pedro Avenue San Antonio, TX 78212	State;	; Zip Co	de		
 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held
	Date		Payee name					
	01/02/2024		Circle K					
	Amount (\$) \$52.24		Payee address; City; 3820 San Pedro Avenue	State	; Zip Co	de		
	PURPOSE OF EXPENDITURE	(a)	San Antonio, TX 78212 Category (See Categories listed at the top of Travel In District	of this sch	iedule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held
	Date		Payee name					
	06/10/2024		Cochran, Zachary					
	Amount (\$) \$168.17		Payee address; City; 16306 Appaloosa Oak	State;	; Zip Co	de		
			Selma, TX 78154					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top o Event Expense	of this sch	iedule)	Check if Austin	ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense ood Drive Reimbursement (Coffee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office sou	ght		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)						
	Sch: 14/85 Rpt: 25/97	Bernal, Diego M. (The Honorable) 00070466							
4	Date 02/15/2024	5 Payee name Cochran, Zachary							
6	Amount (\$) \$141.19	7 Payee address; City; State; Zip Code 16306 Appaloosa Oak Selma, TX 78154							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Frames for District Office									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/13/2024	Cochran, Zachary							
	Amount (\$) \$400.00	Payee address; City; State; Zip Code 16306 Appaloosa Oak							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	03/04/2024	Costa Pacifica							
	Amount (\$) \$64.33	Payee address; City; State; Zip Code 434 N. Loop 1604 W. Suite 2101 San Antonio, TX 78232							
	PURPOSE OF EXPENDITURE	Check if Austin, T.	tside of Texas. Complete Schedule T. X, officeholder living expense erage for Meeting						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Fees Office Overn Food/Beverage Expense Polling Expe Gift/Awards/Memorials Expense Printing Exp	iead/R nse ense ges/Co	ental Expense T T ontract Labor C	Travel in District Travel Out of Dist	uipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME		3 F	-iler ID	(Ethics Commission Filers)			
	Sch: 15/85 Rpt: 26/97		Bernal, Diego M. (The Honorable)		C	00070466				
4	Date 03/04/2024		Payee name Crossroads Fuel							
6	Amount (\$) \$45.76		Payee address; City; State; Zip Code 3999 TX-16 Bandera, TX 78003	e						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) (I Travel Out of District		escription Check if travel outside Check if Austin, TX, of as					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office sough	nt		Office he	d			
	Date		Payee name							
	06/26/2024		Curry Boys BBQ							
	Amount (\$) \$52.68		Payee address; City; State; Zip Code 536 E. Courtland Place	e						
		<u> </u>	San Antonio, TX 78212							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) (I Food/Beverage Expense		escription Check if travel outside Check if Austin, TX, of Ood and Bevera	fficeholder living	expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sough	nt		Office he	d			
	Date		Payee name							
	05/28/2024		Curry Boys BBQ							
	Amount (\$) \$49.74		Payee address; City; State; Zip Code 536 E. Courtland Place	e						
			San Antonio, TX 78212							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) (I Food/Beverage Expense	E	escription Check if travel outside Check if Austin, TX, of ood and Bevera	fficeholder living	expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office sough	nt		Office he	d			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ov Polling Ex Printing E Salaries/V	oayme erhea xpens Expens Wage	ent/Reimbursement Id/Rental Expense e se s/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 16/85 Rpt: 27/97		Bernal, Diego M. (The Honorable)					00070466		
4	Date	5	Payee name							
	05/30/2024		Demo's Greek Food							
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode					
	\$55.67		7115 Blanco Road							
			Suite 120							
			San Antonio, TX 78216							
8	PURPOSE	(a)			(h)	Description				
ľ	OF	(4)	Category (See Categories listed at the top of this so Food/Beverage Expense	chedule)	(3)		outsi	de of Texas. Comp	blete Schedule T.	
	EXPENDITURE							officeholder living		
						Food and Be	ver	age for Meet	ting	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office sou	ught			Office he	ld	
	Date		Payee name							
	05/23/2024		Demo's Greek Food							
	Amount (\$)		Payee address; City; State	e; Zip Co	ode					
	\$60.57		7115 Blanco Road	· •						
			Suite 120							
			San Antonio, TX 78216							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description	outoi	de of Texas. Comp	Noto Sobodulo T	
	EXPENDITURE		Food/Beverage Expense					officeholder living		
						Food and Be				
								5	5	
	Complete ONLY if direct	(Candidate/Officeholder name	Office sou	l Jght			Office he	ld	
	expenditure to benefit C/OI	H								
-	Date		Payee name							
	05/13/2024		Demo's Greek Food							
	Amount (\$)		Payee address; City; State	e; Zip Co	ode					
	\$40.82		7115 Blanco Road	-, _, _,						
	\$1010 <u>2</u>		Suite 120							
			San Antonio, TX 78216							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description		de ef Teur O		
	EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
						Food and Be				
-	Complete ONLY if direct	L	Candidate/Officeholder name	Office sou	l Iabt			Office he	ld	
	expenditure to benefit C/OI			51166 501	ayın				iu.	
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Co	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ov Polling E Printing E Salaries/	oayme erhea kpens Expens Wages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Travel in District Travel Out of Distric	ipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID ((Ethics Commission Filers)	
	Sch: 17/85 Rpt: 28/97		Bernal, Diego M. (The Honorable)					00070466		
4	Date	5	Payee name							
	05/01/2024		Demo's Greek Food							
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip C	ode					
	\$37.31		7115 Blanco Road							
			Suite 120							
			San Antonio, TX 78216							
8	PURPOSE	(a)			(h)	Description				
ľ	OF	("	Category (See Categories listed at the top of this Food/Beverage Expense	schedule)	()	·	outsi	de of Texas. Comple	ete Schedule T.	
	EXPENDITURE		roou/Deverage Expense					officeholder living ex		
						Food and Be	ver	age for Meetir	ng	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ught			Office held	ł	
	Date		Payee name							
	04/10/2024		Demo's Greek Food							
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode					
	\$34.06		7115 Blanco Road	· •						
			Suite 120							
			San Antonio, TX 78216							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		de ef Teures Ormale	de Ochestule T	
	EXPENDITURE		Food/Beverage Expense					de of Texas. Comple officeholder living ex		
								age for Meetir		
									.5	
_	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l Jaht			Office held	ł	
	expenditure to benefit C/OI				5					
	Date	—	Payee name							
	02/08/2024		Demo's Greek Food							
_				ata, Zia C						
	Amount (\$)			ate; Zip Co	Jue					
	\$60.51		7115 Blanco Road							
			Suite 120							
			San Antonio, TX 78216							
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Comple		
								officeholder living ex		
						Food and Be	ver	age for Meetir	ng	
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held	t	
	expenditure to benefit C/OI	1								

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Transp Food/Beverage Expense Polling Expense Travel - Gift/Awards/Memorials Expense Printing Expense Travel					Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 18/85 Rpt: 29/97		Bernal, Dieg	jo M. (The Honor	able)				00070466		
4	Date	5	Payee name								
	01/03/2024		Demo's Gre	ek Food							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	le				
	\$28.39		7115 Blanco	Road							
			Suite 120								
			San Antonic	, TX 78216							
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b) Description				
	OF EXPENDITURE			age Expense		suulo)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE			-					officeholder living		
							Food and Be	ver	age for Mee	ting	
_						NGC			0.4%	- 1-1	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Om	ceholder name	U	Office sou	int		Office he	910	
	Date		Payee name								
	03/01/2024		Domino's								
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	le				
	\$49.45		7551 McCu	lough Avenue							
			San Antonic	, TX 78216							
	PURPOSE OF	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b) Description				
	EXPENDITURE		Food/Bever	age Expense					de of Texas. Com officeholder living		
							Food and Be				
							1 000 and De	vei	age for mee	ung	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought					Office he	eld			
	expenditure to benefit C/OI	H									
	Date		Payee name								
	01/02/2024		Domino's								
	Amount (\$)		Payee addres	s; City;	State:	Zip Co	le				
	\$38.98			lough Avenue	,	1					
			San Antonic	, TX 78216							
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Food/Bever	age Expense					de of Texas. Com		
	-								officeholder living		
							Food and Be	ver	age ioi mee	ung	
	Complete ONLY if direct	L(Candidate/Offic	ceholder name	0	Office soug	iht		Office he	eld	
	expenditure to benefit C/OF				Ū.		, -		000 10		
-											

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)				
-	Sch: 19/85 Rpt: 30/97	Bernal, Diego M. (The Honorable)	00070466				
4	Date 02/20/2024	5 Payee name Dulce Suenos Coffee					
6	Amount (\$) \$8.60	 Payee address; City; State; Zip Code 1904 Fredericksburg Road San Antonio, TX 78201 					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Food And Beverage for Meeting							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	04/25/2024	Dutch Bro's Coffee					
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 6024 West Avenue					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. IX, officeholder living expense erage for Meeting				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/15/2024	Dutch Bro's Coffee					
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 6024 West Avenue					
		Castle Hills, TX 78213					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

			EXPENDITURE CATEGOR	IES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 20/85 Rpt: 31/97		Bernal, Diego M. (The Honorable)				00070466		
4	Date 04/22/2024	5	Payee name El Cevichero						
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$101.60 2603 SE Military Drive Suite 106 San Antonio, TX 78223								
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if Check if Check if Check if Austin, TX, officeholder living expense Food/Beverage Expense Image: Check if Austin, TX, officeholder living expense Food and Beverage for Meeting Food and Beverage for Meeting								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	ht		Office held		
	Date		Payee name						
	04/22/2024		El Cevichero						
	Amount (\$) \$16.60		Payee address; City; State; 2603 SE Military Drive Suite 106 San Antonio, TX 78223	Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schere Food/Beverage Expense	dule)	Check if Austir	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense rage for Meeting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	ht		Office held		
	Date		Payee name						
	04/22/2024		El Cevichero						
	Amount (\$) \$7.67		Payee address; City; State; 2603 SE Military Drive Suite 106 San Antonio, TX 78223	Zip Coo	le				
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice souç	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 21/85 Rpt: 32/97		Bernal, Diego M. (The Honorable)				00070466			
4	Date	5	Payee name							
	04/01/2024		El Cevichero							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le					
-	\$80.50	·	2603 SE Military Drive	p 00						
			Suite 106							
	San Antonio, TX 78223									
8	PURPOSE	(0)			(h) Description					
°	OF	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	(b) Description	outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE						, officeholder living expense			
					Food and Be	ver	age for Meeting			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	yht		Office held			
	Date		Payee name							
	04/09/2024		Elizabeth Campos Campaign							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
\$170.00			1028 Rigsby							
			San Antonio, TX 78210							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)	Check if Austin	I, TX	ide of Texas. Complete Schedule T. , officeholder living expense : for Fiesta Event			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held			
	Date		Payee name							
	03/06/2024		Formosa Garden							
-	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$67.07		1011 NE Loop 410							
			San Antonio, TX 78209							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		ide of Texas. Complete Schedule T.			
	EXPENDITURE		Food/Beverage Expense		Check if Austin	і, TX	, officeholder living expense rage for Meeting			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held			

			EXPENDITURE CATEGORIES FO	R BC	DX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Ov Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	erhead pense xpens Vages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME		:	3	Filer ID (Ethics Commission Filers)	
	Sch: 22/85 Rpt: 33/97		Bernal, Diego M. (The Honorable)				00070466	
4	Date 02/13/2024		Payee name Formosa Garden					
6	Amount (\$)	7	Payee address; City; State; Zip Co	nde				
•	\$44.76 1011 NE Loop 410							
			San Antonio, TX 78209					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense							officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name Office sou	ight			Office held	
	Date		Payee name					
	06/03/2024		Frost Bank					
	Amount (\$)		Payee address; City; State; Zip Co	ode				
	\$30.05		P.O. Box 1600 San Antonio, TX 78296					
	PURPOSE OF EXPENDITURE	I	Category (See Categories listed at the top of this schedule) Fees	(b)		TX,	le of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office sou	ight			Office held	
	Date		Payee name					
	06/03/2024		Frost Bank					
	Amount (\$)		Payee address; City; State; Zip Co	ode				
	\$20.01		P.O. Box 1600					
			San Antonio, TX 78296	1				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees	(b)		TX,	le of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office sou	ight			Office held	

			EXPENDITURE CATEGORIES FOR	R BC	DX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Ove Food/Beverage Expense Polling Ext Gift/Awards/Memorials Expense Printing Ex	erhead pense xpens Vages	e s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 23/85 Rpt: 34/97		Bernal, Diego M. (The Honorable)	00070466			
4	Date 06/03/2024		Payee name Frost Bank				
6	Amount (\$) \$0.27		Payee address; City; State; Zip Co P.O. Box 1600 San Antonio, TX 78296	ode			
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description 							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sou	ight			Office held
	Date		Payee name				
	05/03/2024		Frost Bank				
	Amount (\$)	⊢	Payee address; City; State; Zip Co	de			
	\$30.05		P.O. Box 1600 San Antonio, TX 78296				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Fees	(b)		TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sou	ight			Office held
	Date		Payee name				
	05/03/2024		Frost Bank				
	Amount (\$) \$20.01		Payee address; City; State; Zip Co P.O. Box 1600	ode			
			San Antonio, TX 78296				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees	(b)		ΤX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office sou	ght			Office held

			EXPENDITURE CAT	EGOF	RIES FOR	во	X 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		-		Office Over Polling Exp Printing Exp Salaries/Wa	rhead ense pense ages/	e '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:							3	Filer ID (Ethics Commission Filers)
	Sch: 24/85 Rpt: 35/97		Bernal, Diego M. (The Honorable))					00070466
4	Date	5	Payee name						
	05/03/2024		Frost Bank						
6	Amount (\$)	7	Payee address; City;	State:	; Zip Cod	1e			
	\$0.27		P.O. Box 1600	01110,	, <u>-</u> ,p				
	Ψυ.21		F.O. BOX 1000						
			San Antonio, TX 78296						
8	PURPOSE	(a)	Category (See Categories listed at the top of	this sch	adula)	(b)	Description		
-	OF	`	Fees	1115 3011	leuule)		·	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					i	Check if Austin	, TX,	officeholder living expense
							Banking Fees	5	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	jht			Office held
	Date	Γ	Payee name						
	04/03/2024		Frost Bank						
_				Ctoto.	; Zip Cod	40			
	Amount (\$)	1		State,	; ZIP COU	Je			
	\$30.05		P.O. Box 1600						
			San Antonio, TX 78296						
	PURPOSE	(a)	Category (See Categories listed at the top of	this sch	nedule)	(b)	Description		
	OF EXPENDITURE		Fees			-		outsi	de of Texas. Complete Schedule T.
	EXPENDITORE								officeholder living expense
	ļ						Banking Fees	5	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	jht			Office held
	Date	<u> </u>	Payee name						
	04/03/2024		Frost Bank						
	Amount (\$)			State;	; Zip Cod	le			
	\$20.01		P.O. Box 1600						
	ļ								
			San Antonio, TX 78296						
	PURPOSE	(a)	Category (See Categories listed at the top of	this sch	(alubor	(b)	Description		
	OF		Fees	1113 30				outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					i	Check if Austin	, тх,	officeholder living expense
							Banking Fees	5	
	!								
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	Jht			Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			-	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/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 G	lide explains r	how to con	plete this form.	-		
1	Total pages Schedule F1:						3	Filer ID (Ethics Commission Filers)	
	Sch: 25/85 Rpt: 36/97		Bernal, Diego M. (The Hond	orable)				00070466	
4	Date	5	Payee name						
	04/03/2024		Frost Bank						
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$0.27								
	Ψ0.21		F.O. DOX 1000						
			San Antonio, TX 78296						
8	PURPOSE	<u> </u>	- ·			(h) Description			
0	OF	(a)	Category (See Categories listed at th	ne top of this sche	edule)	(b) Description	outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE								
						Banking Fee			
						-			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office held	
		л ——							
	Date	Γ	Payee name						
	03/04/2024		Frost Bank						
	Amount (\$)	┢	Payee address; City;	State [.]	Zip Cod	ام			
	\$30.05		P.O. Box 1600	Oune,					
	φου.υσ		P.U. DUX 1000						
			San Antonio, TX 78296						
	PURPOSE	(a)	Category (See Categories listed at t	he top of this schr	(alubo	(b) Description			
OF		`	(a) Category (See Categories listed at the top of this schedule) Fees Check if travel outside of Texas. Complete Schedule T.					de of Texas. Complete Schedule T.	
EXPENDITURE			Check if Austin, TX, officeholder living expense						
			Banking Fees						
Complete ONLY if direct			Candidate/Officeholder name	C	Office soug	ht		Office held	
expenditure to benefit C/OH									
	Date		Payee name						
	03/04/2024		Frost Bank						
		<u> </u>			7. 0				
	Amount (\$)		Payee address; City;	State;	Zip Cod	le			
	\$20.01		P.O. Box 1600						
S			San Antonio, TX 78296						
	PURPOSE	(a)	Category (See Categories listed at t	he top of this sche	edule) ((b) Description			
OF		Fees				· · _ ·	Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE						Check if Austin	, TX,	officeholder living expense	
						Banking Fee	S		
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name	C	Office soug	ht		Office held	
expenditure to benefit C/OH									

			EXPENDITURE CATEG	ORIES FO	R BO	OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Office O Polling E Printing I Salaries/	verhea Expense Expense Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	-		The Instruction Guide explain	ns how to c	omple	ete this form.		
1	Total pages Schedule F1:						3	Filer ID (Ethics Commission Filers)
	Sch: 26/85 Rpt: 37/97		Bernal, Diego M. (The Honorable)					00070466
4	Date	5	Payee name					
	03/04/2024		Frost Bank					
6	Amount (\$)	7	Payee address; City; Sta	te; Zip C	ode			
	\$0.27	I	P.O. Box 1600					
	-							
			San Antonio, TX 78296					
_					10.			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	schedule)	(0)	Description	outoi	de of Texas. Complete Schedule T.
	EXPENDITURE		Fees					officeholder living expense
						Banking Fees		
						0	-	
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name	Office so	l ught			Office held
	expenditure to benefit C/OI	н						
-	Date	—						
	02/05/2024		Payee name Frost Bank					
		<u> </u>						
	Amount (\$)	I		te; Zip C	ode			
	\$30.05		P.O. Box 1600					
			San Antonio, TX 78296					
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE		Fees			Check if travel	outsi	de of Texas. Complete Schedule T.
								officeholder living expense
						Banking Fees	5	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held
	experior of benefit of or	<u></u>						
	Date		Payee name					
	02/05/2024		Frost Bank					
	Amount (\$)	-	Payee address; City; Sta	te; Zip C	ode			
	\$20.01		P.O. Box 1600					
	• -							
			San Antonio, TX 78296					
					1			
	PURPOSE OF		Category (See Categories listed at the top of this s	schedule)	(b)	Description	toi	de ef Terres, Complete Cabadula T
	EXPENDITURE		Fees					de of Texas. Complete Schedule T. officeholder living expense
						Banking Fees		
							-	
	Complete ONLY if direct		Candidate/Officeholder name	Office so	uaht			Office held
	expenditure to benefit C/OF			Unice 30	uyin			Office field
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			EXPENDITURE CATEGO	ORIES FOF	R BC)X 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Office Ove Polling Ex Printing Ex Salaries/W	erhead pense kpens /ages	e /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					
1	Total pages Schedule F1:	1					3	Filer ID(Ethics Commission Filers)
	Sch: 27/85 Rpt: 38/97		Bernal, Diego M. (The Honorable)					00070466
4	Date	5	Payee name					
	02/05/2024		Frost Bank					
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	de			
	\$0.27		P.O. Box 1600	•				
			San Antonio, TX 78296					
<u> </u>		<u>.</u> .			(1-)			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description	outoi	de of Texas. Complete Schedule T.
	EXPENDITURE		Fees					officeholder living expense
						Banking Fees		
9	Complete <u>ONLY</u> if direct		Candidate/Officeholder name	Office sou	aht			Office held
	expenditure to benefit C/OF				0			
	Date							
		1	Payee name					
	01/11/2024	<u> </u>	Frost Bank					
	Amount (\$)			e; Zip Co	de			
	\$8.00		P.O. Box 1600					
			San Antonio, TX 78296					
	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description		
			Fees	Silcuare,	• -	·	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE							officeholder living expense
						Banking Fees	5	
	Complete ONLY if direct		andidate/Officeholder name	Office sou	ght			Office held
	expenditure to benefit C/OF	н				_		
	Date		Payee name					
	01/03/2024		Frost Bank					
	Amount (\$)	┢	Payee address; City; State	e; Zip Co	de			
	\$30.05		P.O. Box 1600	o, <u> </u>				
			1.0. 200 1000					
			Can Antonia TV 70206					
			San Antonio, TX 78296					
	PURPOSE OF		Category (See Categories listed at the top of this so	chedule)	(b)	Description		
	EXPENDITURE		Fees					de of Texas. Complete Schedule T. officeholder living expense
						Banking Fees		omcenoider living expense
						Danking i coo	5	
	Complete ONLY if direct	Ľ	Candidate/Officeholder name	Office sou	aht			Office held
	expenditure to benefit C/OF			UIIICE SOU	yπ			Onice neid

			EXPENDITURE CATEGORIE	ES FOR I	3OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Or Food/Beverage Expense Pr Gift/Awards/Memorials Expense Pr mittee Legal Services Sa	Office Overhe Polling Exper Printing Expe Salaries/Wag	ense jes/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
-		1	The Instruction Guide explains hov	W to com	plete this ionii.	-	
1	Total pages Schedule F1:					3	Filer ID (Ethics Commission Filers)
	Sch: 28/85 Rpt: 39/97	<u> </u>	Bernal, Diego M. (The Honorable)				00070466
4	Date 01/03/2024		Payee name Frost Bank				
6	Amount (\$) \$20.01		Payee address; City; State; Z P.O. Box 1600 San Antonio, TX 78296	Zip Code	2		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedul	_{ile)} (t) Description		
	OF EXPENDITURE		Fees		Check if travel	, TX,	de of Texas. Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ice sough	nt		Office held
	Date		Payee name				
	01/03/2024		Frost Bank				
	Amount (\$)		Payee address; City; State; Z	Zip Code	9		
	\$0.27		P.O. Box 1600 San Antonio, TX 78296				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedul Fees	_{ile)} (k		, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ice sough	nt		Office held
	Date	Γ	Payee name				
	05/31/2024		Galvan's Tire Shop				
	Amount (\$)	\vdash	Payee address; City; State; Z	Zip Code	9		
	\$230.00		418 Fresno Street				
			San Antonio, TX 78212				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedul Travel In District	ile) (r		, тх,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ice sough	nt		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide expl	ains I	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pens ages	se s/Contract Labor		Travel in District Travel Out of District	ng Expense ment & Related Expense gory not listed above)	
1	Total pages Schedule F1:	2	· · ·					3	Filer ID (E	thics Commission Filers)	
-	Sch: 29/85 Rpt: 40/97		Bernal, Diego M. (The Honorable)						00070466		
4	Date 02/20/2024		Payee name Gino's Deli								
6	Amount (\$) \$61.94		Payee address; City; S 13210 Huebner Road San Antonio, TX 78230	state;	Zip Co	de					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting									ense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	С	Office sou	ght			Office held		
	Date		Payee name								
	02/05/2024		Golden Chick								
	Amount (\$) \$46.50		Payee address; City; S 2299 NW Military Highway	State;	Zip Co	de					
	PURPOSE OF EXPENDITURE		Castle Hills, TX 78213 Category (See Categories listed at the top of th Food/Beverage Expense	iis sche	edule)	(b)	Check if Austin	ı, TX,	de of Texas. Complete officeholder living exp age for Meeting	ense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C) Dffice sou	ght			Office held		
-	Date		Payee name								
	06/26/2024		Golden Wok								
	Amount (\$) \$41.89		Payee address; City; S 8822 Wurzbach Road	state;	Zip Co	de					
			San Antonio, TX 78240								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of the Food/Beverage Expense	iis sche	edule)	(b)	Check if Austin	ı, ТХ,	de of Texas. Complete officeholder living exp age for Meeting	ense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Office sou	ght			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	· · ·			.p.o		3	Filer ID (Ethics Commission Filers)	
1	Sch: 30/85 Rpt: 41/97	2	Bernal, Diego M. (The Honorable)					3	00070466	<i>.</i> ,	
4	Date	5	Payee name								
	01/25/2024		Golden Wok								
6	Amount (\$)	7	Payee address; City; St	ate;	Zip Cod	le					
\$52.53 8822 Wurzbach Road											
			San Antonio, TX 78240								
8	PURPOSE	(a)	Category (See Categories listed at the top of this	aaba	adula) ((b)	Description				
-	OF		Food/Beverage Expense	sche	edule)	,		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE						Check if Austin	, тх,	, officeholder living expense		
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9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	0)ffice soug	Iht			Office held		
	Date		Payee name								
	01/08/2024		Golden Wok								
				- 4	7						
	Amount (\$)			ate;	Zip Cod	ie					
	\$46.86		8822 Wurzbach Road								
			San Antonio, TX 78240								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting 							, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	0)ffice soug	lht			Office held		
-	Date		Payee name								
	06/24/2024		Google Domain								
			5	otor	Zin Cod	10					
	Amount (\$)			ale;	Zip Cod	ie					
	\$12.00		1600 Amphitheatre Parkway								
			Mountain View, CA 94043								
	BUBBOOF	(-)			L	(1-)					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	sche	edule)	(a)	Description		ide of Texas. Complete Schedule T.		
	EXPENDITURE		Office Overhead/Rental Expense						, officeholder living expense		
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	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Office soug	Int			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Loan Repa Fees Office Over Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Ex Legal Services Salaries/W The Instruction Guide explains how to cor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 31/85 Rpt: 42/97		Bernal, Diego M. (The Honorable)				00070466				
4	Date 06/04/2024	5	Payee name Google Domain								
6	Amount (\$)	7	Payee address; City; State; Zip Coo	de							
-	\$6.40 1600 Amphitheatre Parkway										
			Mountain View, CA 94043								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Image: Domain Hosting Image: Check if Austin, TX, officeholder living expense											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office soug	ght			Office held				
	Date		Payee name								
	05/03/2024		Google Domain								
	Amount (\$)		Payee address; City; State; Zip Coo	de							
	\$6.40		1600 Amphitheatre Parkway Mountain View, CA 94043								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			TX,	le of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sour	ght			Office held				
	Date		Payee name								
	04/03/2024		Google Domain								
	Amount (\$) \$6.40		Payee address; City; State; Zip Coo 1600 Amphitheatre Parkway	de							
			Mountain View, CA 94043								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			ΤX,	le of Texas. Complete Schedule T. officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office soug	ght			Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overt Food/Beverage Expense Polling Expe Gift/Awards/Memorials Expense Printing Exp	head ense bense ages/	e Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME		:	3	Filer ID (Ethics Commission Filers)				
	Sch: 32/85 Rpt: 43/97		Bernal, Diego M. (The Honorable)				00070466				
4	Date 03/04/2024		^p ayee name Google Domain								
6	Amount (\$) \$6.40		Payee address; City; State; Zip Cod 1600 Amphitheatre Parkway Mountain View, CA 94043	le							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Image: Domain Hosting Image: Check if Austin, TX, officeholder living expense											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office soug	ht			Office held				
	Date		Payee name								
	02/05/2024		Google Domain								
	Amount (\$) \$6.40		Payee address; City; State; Zip Cod 1600 Amphitheatre Parkway	le							
			Mountain View, CA 94043	<u>, , , , , , , , , , , , , , , , , , , </u>							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) (Office Overhead/Rental Expense			ТΧ, (e of Texas. Complete Schedule T. officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Office soug	ht			Office held				
	Date		Payee name								
	01/04/2024		Google Domain								
	Amount (\$) \$6.40		Payee address; City; State; Zip Cod 1600 Amphitheatre Parkway	le							
			Mountain View, CA 94043								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			TX, (e of Texas. Complete Schedule T. officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Office soug	ht			Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Imittee Legal Services The Instruction Guide	Travel in District Travel Out of Dis	quipment & Related Expense						
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1	Total pages Schedule F1: Sch: 33/85 Rpt: 44/97		FILER NAME Bernal, Diego M. (The Honorat	ole)			3	Filer ID 00070466	(Ethics Commission Filers)		
4	Date	5	Payee name								
	06/25/2024		Gravves Coffee								
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de					
	\$16.88		2106 McCullough Avenue								
			San Antonio, TX 78212								
8	PURPOSE	(a)	Category (See Categories listed at the top	o of this sch	edule)	(b) Description					
	OF EXPENDITURE		Food/Beverage Expense					side of Texas. Comp			
	-							x, officeholder living rage for Meet	•		
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9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office he	ld		
	Date		Payee name								
	05/30/2024		Gravves Coffee								
		<u> </u>		Stata	Zip Co	do					
	Amount (\$)		Payee address; City;	State,	Zip Co	ue					
	\$9.04		2107 McCullough Avenue								
			San Antonio, TX 78213								
	PURPOSE OF	(a)	Category (See Categories listed at the top	o of this sch	edule)	(b) Description					
	EXPENDITURE		Food/Beverage Expense					side of Texas. Comp X, officeholder living			
								erage for Meet			
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	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office he	ld		
	Date		Payee name								
	05/30/2024		Gravves Coffee								
	Amount (\$)		Payee address; City;	State [.]	Zip Co	de					
	\$10.04		2108 McCullough Avenue	otato,	2.p 00						
	\$10.04		2100 Miccallough / Wende								
			San Antonio, TX 78214								
	PURPOSE OF		Category (See Categories listed at the top	o of this sch	edule)	(b) Description		aida of Tours - O	alata Cabadula T		
	EXPENDITURE		Food/Beverage Expense					side of Texas. Comp X, officeholder living			
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-	Complete ONLY if direct	<u>_</u>	andidate/Officeholder name	ſ	Office sou	nht		Office he	Id		
	expenditure to benefit C/OF			C	-mec 300	9					

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Transportation Food/Beverage Expense Polling Expense Travel in Distriction / - Gift/Awards/Memorials Expense Printing Expense Travel out of Distriction							raising Expense quipment & Related strict category not listed a		
1	Total names Cabadula E1.					ipiete i		<u> </u>		(Ethias Commis	voion Filoro)	
1	Total pages Schedule F1: Sch: 34/85 Rpt: 45/97		Bernal, Diego M. (The Honor	able)					-iler ID 00070466	(Ethics Commis	sion Fliers)	
4	Date	5	Payee name									
	05/24/2024		Gravves Coffee									
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$25.33 \$2109 McCullough Avenue \$2109 McCullough Avenue \$2109 McCullough Avenue San Antonio, TX 78215 \$2109 McCullough Avenue \$2109 McCullough Avenue											
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Food/Beverage Expense	top of this sche	edule)		escription Check if travel o Check if Austin, OOd and Bev	TX, o	fficeholder living	•		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	jht			Office he	eld		
	Date		Payee name									
	04/22/2024		Gravves Coffee									
	Amount (\$)		Payee address; City;	State;	Zip Co	le						
	\$16.88		2110 McCullough Avenue San Antonio, TX 78216									
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Food/Beverage Expense	top of this sche	edule)		escription Check if travel o Check if Austin, Check and Bev	TX, o	fficeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	jht			Office he	eld		
	Date		Payee name		_		-		-			
	04/08/2024		Gravves Coffee									
	Amount (\$) \$25.33		Payee address; City; 2111 McCullough Avenue	State;	Zip Co	le						
			San Antonio, TX 78217									
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Food/Beverage Expense	top of this sche	edule)		escription Check if travel o Check if Austin, Check and Bev	TX, o	fficeholder living			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	jht			Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials f nittee Legal Services The Instruction Gu	Expense	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of District	uipment & Related Expense		
1	Total names Cabadula E1.					inpiete this form.	1	Filer ID	(Ethico Commission Filoro)		
1	Total pages Schedule F1: Sch: 35/85 Rpt: 46/97		Bernal, Diego M. (The Hono	rable)			3	Filer ID 00070466	(Ethics Commission Filers)		
4	Date	5 I	Payee name								
	03/25/2024		Gravves Coffee								
6	Amount (\$) \$16.88		Payee address; City; 2112 McCullough Avenue San Antonio, TX 78218	State;	Zip Co	de					
8	PURPOSE	(2)	Cotogon/			(b) Decoription					
0	OF		Category (See Categories listed at th Food/Beverage Expense	e top of this sche	edule)	Check if Austir	n, TX,	de of Texas. Compl , officeholder living e age for Meeti	expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	yht		Office hel	d		
	Date		Payee name								
	03/25/2024	(Gravves Coffee								
	Amount (\$)		Payee address; City;	State;	Zip Co	de					
	\$16.88		2113 McCullough Avenue San Antonio, TX 78219								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at th Food/Beverage Expense	e top of this sche	edule)	Check if Austir	n, TX,	de of Texas. Comp officeholder living e age for Meeti	expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	Jht		Office hel	d		
	Date	I	Payee name	-	_						
	02/23/2024	(Gravves Coffee								
	Amount (\$) \$25.33		Payee address; City; 2114 McCullough Avenue	State;	Zip Co	de					
			San Antonio, TX 78220								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at th Food/Beverage Expense	e top of this sche	edule)	Check if Austir	ı, TX,	de of Texas. Comp , officeholder living e age for Meeti	expense		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	jht		Office hel	d		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Travel in District Travel Out of Distri	ipment & Related Expense			
1	Total pages Schedule F1:	FILER N	AME				3	Filer ID	(Ethics Commission Filers)			
	Sch: 36/85 Rpt: 47/97		Diego M. (The Honora	able)				00070466	``````````````````````````````````````			
4	Date 06/17/2024	Payee n Greenh										
6	\$15.42 223 E. Hildebrand Avenue Suite 101b San Antonio, TX 78212											
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description 												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate	/Officeholder name	0	office sou	ht		Office held	1			
	Date	Payee n	ame									
	06/10/2024 Greenhouse											
	Amount (\$) \$22.15	Suite 10	Hildebrand Avenue	State;	Zip Co	le						
	PURPOSE OF EXPENDITURE		(See Categories listed at the everage Expense	top of this sche	edule)	Check if Austin	ı, TX,	de of Texas. Comple , officeholder living e: age for Meetii	xpense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate	/Officeholder name	0	office sou	ht		Office held	ł			
	Date	Payee n	ame									
	05/22/2024	Greenh										
	Amount (\$) \$15.39	Suite 10	Hildebrand Avenue	State;	Zip Co	le						
	PURPOSE OF EXPENDITURE		/ (See Categories listed at the everage Expense	top of this sche	edule)	Check if Austin	ı, TX,	de of Texas. Comple , officeholder living e: age for Meetir	xpense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate	/Officeholder name	0	office sou	ht		Office held	t			

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	2 F	LER NAME			3	Filer ID (Ethics Commission Filers)					
	Sch: 37/85 Rpt: 48/97		ernal, Diego M. (The Honorable)				00070466					
4	Date 05/15/2024		ayee name reenhouse									
6	\$7.05 223 E. Hildebrand Avenue Suite 101b San Antonio, TX 78212											
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description 												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name C	Office sou	yht		Office held					
	Date	P	ayee name									
	05/15/2024	G	reenhouse									
	Amount (\$)	P	ayee address; City; State;	Zip Co	de							
	\$12.20	2	23 E. Hildebrand Avenue									
		S	uite 101b									
		S	an Antonio, TX 78212									
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting 										
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name C	Office sou	jht		Office held					
	Date	P	ayee name									
	05/06/2024		reenhouse									
	Amount (\$) \$16.05	2: S	ayee address; City; State; 23 E. Hildebrand Avenue uite 101b an Antonio, TX 78212	Zip Co	de							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top of this schood/Beverage Expense	edule)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense age for Meeting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name C	Office sou	yht		Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Transportation Equipment & Travel in District - GitfAwards/Memorials Expense Polling Expense Travel out of District								
1	Total pages Schedule F1:	2 FI	_ER NAME				3	Filer ID (Ethics Commission Filers	5)	
	Sch: 38/85 Rpt: 49/97	Be	ernal, Diego M. (The Honora	uble)				00070466		
4	Date 04/03/2024		yee name reenhouse							
6	Amount (\$)		yee address; City;	State;	; Zip Coo	le				
	\$14.12		3 E. Hildebrand Avenue							
		_	uite 101b							
		Sa	an Antonio, TX 78212							
8	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the t ood/Beverage Expense	op of this sch	edule)	Check if Austin	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense rage for Meeting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	C	Office sou	ht		Office held		
	Date	Pa	lyee name							
	02/12/2024	G	eenhouse							
	Amount (\$)	Pa	yee address; City;	State;	; Zip Coo	le				
	\$26.28	22	3 E. Hildebrand Avenue							
		Sı	uite 101b							
		Sa	an Antonio, TX 78212							
	PURPOSE		tegory (See Categories listed at the t	on of this sch	odulo)	(b) Description				
	OF EXPENDITURE		ood/Beverage Expense		cuuc)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense rage for Meeting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	C	Dffice soug	ht		Office held		
⊢	Date	Pa	yee name						-	
	04/15/2024		utierrez, Bethany							
	Amount (\$)	Pa	yee address; City;	State;	; Zip Coo	le				
	\$500.00	98	07 Wind Dancer							
		Sa	an Antonio, TX 78251							
	PURPOSE OF EXPENDITURE		ttegory (See Categories listed at the t alaries/Wages/Contract Lab		edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	С	Dffice soug	ht		Office held		

				EXPENDITUR	E CATEGOF	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, _ I Cor	nmittee	Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services	Expense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising E Transportation Equipment Travel in District Travel Out of District OTHER (enter a category	t & Related Expense
	-			The Instruction Gu	ide explains l	explains how to complete this form.				
1	Total pages Schedule F1:	2						3		s Commission Filers)
	Sch: 39/85 Rpt: 50/97		Bernal, Dieg	o M. (The Hond	orable)				00070466	
4	Date	5	Payee name							
	05/24/2024		HEB							
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	le			
	\$55.41		6839 San Pe	edro Avenue						
			San Antonio	, TX 78216						
8	PURPOSE	(a)	Category (so	e Categories listed at th	o top of this coh	odulo)	(b) Description			
-	OF	()		iead/Rental Exp		edule)		outsi	ide of Texas. Complete Sch	edule T.
	EXPENDITURE						Check if Austir	ι, TX,	, officeholder living expense	2
							Food and Be	ver	age for District Off	ïce
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	lht		Office held	
	Date		Payee name							
	05/06/2024		HEB							
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	le			
	\$95.05		6840 San Pe	edro Avenue						
			San Antonio	, TX 78217						
	PURPOSE OF	(a)		e Categories listed at th		edule)	(b) Description			
	EXPENDITURE		Office Overh	lead/Rental Exp	bense				ide of Texas. Complete Sch , officeholder living expense	
									age for District Off	
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	iht		Office held	
	expenditure to benefit C/OI				-		,			
	Data		Davies re-							
	Date 04/19/2024		Payee name HEB							
					a					
	Amount (\$)		Payee addres	-	State;	Zip Co	le			
	\$69.49		6841 San Pe	edro Avenue						
			San Antonio	, TX 78218						
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this scho	edule)	(b) Description			
	OF EXPENDITURE		Office Overh	lead/Rental Exp	ense				ide of Texas. Complete Sch	
									, officeholder living expense age for District Off	
							i oou anu be	vei	age for District Off	
	Complete ONLY if direct	Ļ	Candidate/Offic	eholder name	~	Office soug	lht		Office held	
	expenditure to benefit C/OF			Enviuer fidilie	C		pric		Onice Held	

				EXPENDITU	IRE CATEGOR	RIES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	nmittee	Event Expense Fees Food/Beverage Expr Gift/Awards/Memoria Legal Services		Office Ove Polling Exp Printing Ex			Travel in District Travel Out of Dist	uipment & Related Expense	
	Credit Card Payment			The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2	FILER NAME	E				3	Filer ID	(Ethics Commission Filers)	
	Sch: 40/85 Rpt: 51/97		Bernal, Die	go M. (The Ho	norable)				00070466		
4	Date	5	Payee name								
	04/11/2024		HEB								
6	Amount (\$)	7	Payee addres	ss; City;	State;	; Zip Co	de				
	\$58.76		6842 San P	edro Avenue							
			San Antonio	o, TX 78219							
8	PURPOSE	(a)		ee Categories listed a	t the ten of this cab	odulo)	(b) Description				_
	OF	(,		head/Rental E		eaule)		outsi	ide of Texas. Comp	lete Schedule T.	
	EXPENDITURE						Check if Austir	n, TX	, officeholder living	expense	
							Food and Be	ever	age for Distri	ct Office	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	С	Office sou	ght		Office he	ld	
	Date		Payee name								
	03/18/2024		HEB								
	Amount (\$)		Payee addres	ss; City;	State;	; Zip Co	de				
	\$57.04		6843 San P	edro Avenue							
			San Antonio	o, TX 78220							
	PURPOSE	(a)		ee Categories listed a	t the ten of this cab	odulo)	(b) Description				
	OF			head/Rental E		euule)		outsi	ide of Texas. Comp	lete Schedule T.	
	EXPENDITURE								, officeholder living		
							Food and Be	ever	age for Distri	ct Office	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	jht		Office he	ld	
	expenditure to benefit C/OF										
	Date		Payee name								
	04/18/2024		Halcyon - S	outhtown							
	Amount (\$)		Payee addres	ss; City;	State;	; Zip Co	de				
	\$15.42		1414 S. Ala	mo Street							
			San Antonio	o, TX 78210							
-	PURPOSE	(a)	Category (s)	ee Categories listed a	t the ton of this sch	edule)	(b) Description				
		Ľ		age Expense	a are top of this 301	courcy		outsi	ide of Texas. Comp	lete Schedule T.	
	EXPENDITURE								, officeholder living		
							Food and Be	ever	age for Meet	ing	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	jht		Office he	ld	
	capenditure to benefit C/Of	1									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 41/85 Rpt: 52/97	Bernal, Diego M. (The Honorable)	00070466							
4	Date 03/15/2024	5 Payee name Halcyon - Southtown								
6	Amount (\$) \$13.79	 Payee address; City; State; Zip Code 1414 S. Alamo Street San Antonio, TX 78210 								
8	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense verage for Meeting							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/03/2024	Hill Country Springs								
	Amount (\$) \$11.37	Payee address; City; State; Zip Code 10019 South I-35 Frontage Road Austin, TX 78747								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense r for Capitol Office							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/01/2024	Hill Country Springs								
	Amount (\$) \$11.37	Payee address; City; State; Zip Code 10019 South I-35 Frontage Road								
		Austin, TX 78747								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense r for Capitol Office							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gitf/Awards/Memorials Expense Legal Services The Instruction Guide expla	Office Overhea Polling Expens Printing Expen Salaries/Wage	se s/Contract Labor	Travel in District Travel Out of Distri	uipment & Related Expense				
1	Total pages Schedule F1:				3 Filer ID	(Ethics Commission Filers)				
	Sch: 42/85 Rpt: 53/97	Bernal, Diego M. (The Honorable)			00070466	``````````````````````````````````````				
4	Date 04/01/2024	ayee name Hill Country Springs								
_			tate; Zip Code							
6	Amount (\$) \$31.36									
8	PURPOSE	Category (See Categories listed at the top of th	is schedule) (b)	Description						
	OF EXPENDITURE	 a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Water Deliver for Capitol Office 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name	Office sought		Office hel	d				
	Date	Payee name								
	03/01/2024	ill Country Springs								
	Amount (\$)	Payee address; City; S	tate; Zip Code							
	\$11.37	0019 South I-35 Frontage Road								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th Office Overhead/Rental Expense	is schedule) (b)	Check if Austin,	outside of Texas. Comp , TX, officeholder living e r for Capitol Offic	expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name	Office sought		Office hel	d				
	Date	Payee name								
	02/01/2024	fill Country Springs								
	Amount (\$) \$11.37	Payee address; City; S .0019 South I-35 Frontage Road	tate; Zip Code							
		Austin, TX 78747								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th Office Overhead/Rental Expense	is schedule) (b)	Check if Austin,	outside of Texas. Comp , TX, officeholder living e r for Capitol Offic	expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name	Office sought		Office hel	d				

		EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 43/85 Rpt: 54/97	Bernal, Diego M. (The Honorable)	00070466							
4	Date 01/02/2024	5 Payee name Hill Country Springs								
6	Amount (\$) \$11.37	7 Payee address; City; State; Zip Code 37 10019 South I-35 Frontage Road Austin, TX 78747								
8	outside of Texas. Complete Schedule T. TX, officeholder living expense • for Capitol Office									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/29/2024	J's Auto Shop and Mobile Mechanic								
Amount (\$)Payee address;City;State;Zip Code\$980.001326 Basse Road										
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ir							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/13/2024	Jersey Mike's Subs								
	Amount (\$) \$53.98	Payee address; City; State; Zip Code 999 E. Basse Road Suite 178 San Antonio, TX 78209								
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense /erage for Meeting							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Transport Food/Beverage Expense Polling Expense Travel in Gift/Awards/Memorials Expense Printing Expense Travel Out					Travel in District Travel Out of Dis	quipment & Related Expense		
-	Total names Cabadula E1.		· · · · · ·						(Ethico Commission Filoro)		
1	Total pages Schedule F1: Sch: 44/85 Rpt: 55/97	2	Bernal, Diego M. (The Honorable)					Filer ID 00070466	(Ethics Commission Filers)		
4	Date 05/08/2024	5	Payee name Jersey Mike's Subs								
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	de						
	\$11.77		999 E. Basse Road								
			Suite 178								
			San Antonio, TX 78209								
8	PURPOSE	(a)	Category (See Categories listed at the top of this se	abadula)	(b) Descr	intion					
-	OF		Food/Beverage Expense	criedule)	_	•	outsic	de of Texas. Com	plete Schedule T.		
	EXPENDITURE				Che	eck if Austin,	TX,	officeholder living	expense		
					Food	and Bev	vera	age for Mee	ting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office he	eld		
	Date		Payee name								
	02/21/2024		Jersey Mike's Subs								
	Amount (\$)		Payee address; City; Stat	e; Zip Co	de						
	\$54.96		999 E. Basse Road								
			Suite 178								
			San Antonio, TX 78209								
	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b) Descr	iption					
	OF EXPENDITURE		Food/Beverage Expense	cheddic)	_	•	outsic	de of Texas. Com	plete Schedule T.		
	EXPENDITORE							officeholder living			
					Food	and Bev	vera	age for Mee	ting		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght			Office he	eld		
	Date		Payee name								
	01/02/2024		Jersey Mike's Subs								
	Amount (\$)		Payee address; City; Stat	e; Zip Co	de						
	\$76.10		999 E. Basse Road								
			Suite 178								
			San Antonio, TX 78209								
	PURPOSE	(a)	Category (See Categories listed at the top of this se	abadula)	(b) Descr	intion					
	OF		Food/Beverage Expense	criedule)			outsic	de of Texas. Com	plete Schedule T.		
	EXPENDITURE		· · · · · · · · · · · · · · · · · · ·		Che	eck if Austin,	TX,	officeholder living	expense		
					Food	and Bev	vera	age for Mee	ting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office he	eld		

			EXPENDITURE	CATEGOR	RIES FOR	R BO)X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E mittee Legal Services The Instruction Gui	xpense	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense 'ages/	e /Contract Labor		Solicitation/Fund Transportation E Travel in District Travel Out of Di OTHER (enter a	Equipment & R	elated Expense
1	Total names Cabadula E1.					iihie		3	Filer ID	(Ethico Co	mmission Filoro)
1	Total pages Schedule F1: Sch: 45/85 Rpt: 56/97		Bernal, Diego M. (The Honorable)						Filer ID 00070466	(Ethics Co	mmission Filers)
4	Date	5	Payee name					•			
	03/08/2024		Jimmy John's								
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de					
	\$33.29		7313 San Pedro Avenue								
			San Antonio, TX 78216								
8	PURPOSE OF	(a)	Category (See Categories listed at the	e top of this sche	edule)	(b)	Description				
	EXPENDITURE		Food/Beverage Expense						de of Texas. Com officeholder living		е Т.
							Food and Bey				
									age let mee		
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C)ffice sou	ght			Office h	eld	
	Date		Payee name								
	01/31/2024		Jimmy John's								
	Amount (\$)		Payee address; City;	State;	Zip Co	de					
	\$29.02		7313 San Pedro Avenue		·						
			San Antonio, TX 78216								
	PURPOSE OF		Category (See Categories listed at the	e top of this sche	edule)	(b)	Description			alata Cabadal	- -
	EXPENDITURE		Food/Beverage Expense Check if travel outside c								e I.
							Food and Bev				
									-	-	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght			Office h	eld	
	Date		Payee name								
	01/04/2024		Jimmy John's								
	Amount (\$)		Payee address; City;	State;	Zip Co	de					
	\$27.58		7313 San Pedro Avenue		•						
			San Antonio, TX 78216								
	PURPOSE OF		Category (See Categories listed at the	e top of this sche	edule)	(b)	Description				
	EXPENDITURE		Food/Beverage Expense						de of Texas. Com officeholder living		е Т.
							Food and Bey				
										3	
ļ	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C)ffice sou	ght			Office h	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 46/85 Rpt: 57/97		Bernal, Diego M. (The Honorable)				00070466				
4	Date	5	Payee name								
	03/07/2024		LAZ Parking								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de						
	\$15.00		515 Congress Avenue								
Suite 2240											
			Austin, TX 78701								
8	PURPOSE	(a)			(b) Description						
Ũ	OF	(~)	Category (See Categories listed at the top of this sche Travel In District	edule)		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE				Check if Austin	, тх,	officeholder living expense				
					Parking Fee						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office sou	yht		Office held				
	Date		Payee name								
	01/10/2024		La Vida Coffee								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$8.33		106 Jefferson								
			San Antonio, TX 78205								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	Check if Austin	, TX,	de of Texas. Complete Schedule T. . officeholder living expense age for Meeting				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					Office held				
	Date		Payee name								
	05/08/2024		Laguna Madre Seafood Company								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$29.12		1227 NE Loop 410								
			San Antonio, TX 78209	i							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	out	do of Toylog, Complete Schodule T				
	EXPENDITURE		Food/Beverage Expense		Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense age for Meeting				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C)ffice sou	ght		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	FII FR NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 47/85 Rpt: 58/97	Bernal, Diego M. (The Honorable)	00070466								
4	Date 04/12/2024	Payee name Laguna Madre Seafood Company									
6	Amount (\$) \$51.47	Payee address; City; State; Zip Code 1227 NE Loop 410 San Antonio, TX 78209 San Antonio, TX 78209									
8	PURPOSE OF EXPENDITURE		rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Beverage for Meeting								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	03/21/2024	Laguna Madre Seafood Company									
	Amount (\$) \$39.08	Payee address;City;State;Zip Code1227 NE Loop 410									
	PURPOSE OF EXPENDITURE		rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Beverage for Meeting								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
_	Date	Payee name									
	04/16/2024	Liberty Bar									
	Amount (\$) \$59.92	Payee address; City; State; Zip Code 1111 S. Alamo Street									
		San Antonio, TX 78210									
	PURPOSE OF EXPENDITURE		rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Beverage for Meeting								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)							
1	Sch: 48/85 Rpt: 59/97	Bernal, Diego M. (The Honorable)	00070466							
4	Date 03/19/2024	5 Payee name Liberty Bar								
_										
6	Amount (\$) \$66.21	 Payee address; City; State; Zip Code 1111 S. Alamo Street San Antonio, TX 78210 								
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description								
0	OF	Food/Beverage Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense /erage for Meeting							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	03/18/2024	Liberty Bar								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$63.82	1111 S. Alamo Street San Antonio, TX 78210								
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense rerage for Meeting							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/10/2024	Little Caesars								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$29.75	4431 Blanco Road								
		San Antonio, TX 78212								
	PURPOSE OF EXPENDITURE	Check if Austin,	nutside of Texas. Complete Schedule T. TX, officeholder living expense rerage for Meeting							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Gift/Awards Legal Servi	age Expense /Memorials Expense	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Ex Transportation Equipment Travel in District Travel Out of District OTHER (enter a category	& Related Expense
1	Tatal pages Cabadula F1	-						Filer ID (Ethios	Commission Filero)
1	Total pages Schedule F1: Sch: 49/85 Rpt: 60/97			ha Hanarahla)			3	Filer ID (Ethics 00070466	s Commission Filers)
_			Bernal, Diego M. (T					00070400	
4	Date 05/13/2024		Payee name Little Caesars						
6	Amount (\$) \$39.48		Payee address; C 4431 Blanco Road San Antonio, TX 78		Zip Cod	e			
8	PURPOSE OF		Category (See Categorie		edule) (b) Description	outei	de of Texas. Complete Sch	odulo T
	EXPENDITURE		Food/Beverage Exp	ense		Check if Austin	n, TX,	officeholder living expense age for Meeting	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name O	Office soug	ht		Office held	
	Date		Payee name						
	06/07/2024		Local Coffee						
	Amount (\$)		Payee address; C	ity; State;	Zip Cod	e			
	\$7.60		5903 Broadway San Antonio, TX 78	209					
	PURPOSE OF EXPENDITURE		Category _{(See Categorie} Food/Beverage Exp		edule) (Check if Austin	n, TX,	de of Texas. Complete Sch officeholder living expense age for Meeting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name O	Office soug	ht		Office held	
	Date		Payee name						
	06/10/2024		Lucky's Food Mart						
	Amount (\$) \$48.65		Payee address; C 119 E. Commerce S	•	Zip Cod	e			
			San Antonio, TX 78	205					
	PURPOSE OF EXPENDITURE		Category _{(See Categorie} Travel In District	is listed at the top of this sche	edule)			de of Texas. Complete Sch officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder	name O	Office soug	ht		Office held	

			EXPENDITURE CATEGOR	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 50/85 Rpt: 61/97		Bernal, Diego M. (The Honorable)				00070466
4	Date	5	Payee name				
	06/24/2024		Max & Louie's New York Diner				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le		
	\$76.98		226 W. Bitters Road				
			Suite 126				
			San Antonio, TX 78216				
8	PURPOSE	(2)			(b) Deceriation		
°	OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description Check if travel	outs	ide of Texas. Complete Schedule T.
	EXPENDITURE		Food/Beverage Expense				, officeholder living expense
					Food and Be	ver	age for Meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	Dffice sou	Jht		Office held
	Date		Payee name				
	06/11/2024		Max & Louie's New York Diner				
	Amount (\$)		Payee address; City; State;	Zip Co	le		
	\$63.62		226 W. Bitters Road	•			
			Suite 126				
			San Antonio, TX 78216		<i>"</i> 、		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	outo	ide of Texas. Complete Schedule T.
	EXPENDITURE		Food/Beverage Expense				, officeholder living expense
							age for Meeting
							0
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O)ffice sou	ıht		Office held
	Date		Payee name				
	05/15/2024		Medina River Coffee Roasters				
				Zip Co	10		
	Amount (\$)			Zip Co	le		
	\$7.70		11825 West Avenue				
			Suite 101				
			San Antonio, TX 78216				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.
							, officeholder living expense
					Food and Be	ver	age for Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	Jht		Office held
		-					

		EXPE	NDITURE CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expen Fees Food/Bevera Gift/Awards/ nittee Legal Servic	se Ige Expense Memorials Expense	Loan Repay Office Overh Polling Expe Printing Exp Salaries/Wa	ment/Reimbursement lead/Rental Expense nse ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	ILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 51/85 Rpt: 62/97	Bernal, Diego M. (Th	e Honorable)				00070466	
4	Date 05/21/2024	ayee name ⁄lichaels						
6	Amount (\$) \$33.50	Payee address; Ci 155 E. Basse Road Guite 120 Gan Antonio, TX 782		; Zip Cod	e			
8	PURPOSE OF EXPENDITURE	Category _{(See Categories} Office Overhead/Rei		nedule) (n, TX,	de of Texas. Com officeholder living 2CO I	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder r	name C	Office soug	nt		Office he	eld
	Date	ayee name						
	06/03/2024	IGP VAN						
	Amount (\$) \$402.80	Payee address; Ci 55 15th Street NW Suite 650 Vashington, DC 200		; Zip Cod	e			
	PURPOSE OF EXPENDITURE	Category (See Categories Office Overhead/Rei		nedule) (n, TX,	de of Texas. Com officeholder living gement	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder r	name C	Office soug	nt		Office he	eld
	Date	ayee name						
	05/02/2024	IGP VAN						
	Amount (\$) \$402.80	Payee address; Ci 55 15th Street NW Guite 650 Vashington, DC 200		; Zip Cod	e			
	PURPOSE OF EXPENDITURE	Category (See Categories Office Overhead/Rei		iedule) (n, TX,	de of Texas. Com officeholder living gement	
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder r	name C	Office soug	nt		Office he	eld

			EXPENDITUR	E CATEGO	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials I	e Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 52/85 Rpt: 63/97		ernal, Diego M. (The Hono	rable)				00070466	``````````````````````````````````````
4	Date 04/02/2024		ayee name IGP VAN						
6	Amount (\$) \$402.80	6 S	ayee address; City; 55 15th Street NW uite 650 /ashington, DC 20005	State;	; Zip Coo	le			
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at th office Overhead/Rental Exp		nedule)		n, TX,	de of Texas. Comp officeholder living gement	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	yht		Office he	ld
	Date	P	ayee name						
	03/27/2024	Ν	IGP VAN						
	Amount (\$) \$763.20	6 S	ayee address; City; 55 15th Street NW uite 650 /ashington, DC 20005	State;	; Zip Coo	de			
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at th office Overhead/Rental Exp		iedule)		n, TX,	de of Texas. Comp officeholder living gement	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	jht		Office he	ld
	Date 05/17/2024		ayee name Iblate Cafe						
				01-1	. 7:- 0				
	Amount (\$) \$18.03		ayee address; City; 04 Oblate Drive	State;	; Zip Coo	Je			
		S	an Antonio, TX 78216						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at th ood/Beverage Expense	e top of this sch	nedule)		n, TX,	de of Texas. Comp officeholder living age for Meet	expense
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	(Dffice soug	yht		Office he	ld

			EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex e Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense
1	Total pages Schedule F1:	2 FILE	ER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 53/85 Rpt: 64/97	Ber	Bernal, Diego M. (The Honorable)				00070466		
4	Date 04/09/2024	-	ee name ceMax						
6	Amount (\$) \$74.04	321 Sui	ee address; City; NW Loop 410 e 101 Antonio, TX 78216	State;	Zip Coo	le			
8	PURPOSE OF EXPENDITURE		egory (See Categories listed at the ent Expense	top of this sche	edule)		n, TX,	ide of Texas. Comp , officeholder living od Drive Flye	expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	0	office soug	ht		Office he	ld
	Date	Pay	ee name						
	05/16/2024	Olla	a Express Cafe						
	Amount (\$) \$7.31	821	ee address; City; E. Quincy Street	State;	Zip Coo	le			
	PURPOSE OF EXPENDITURE	(a) Cat	a Antonio, TX 78215 egory (See Categories listed at the d/Beverage Expense	top of this sche	edule)		n, TX,	ide of Texas. Comp , officeholder living age for Meet	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	0	Office soug	ht		Office he	ld
	Date 05/16/2024		ee name I Express Cafe						
	Amount (\$) \$9.50		ee address; City; E. Quincy Street	State;	Zip Coo	le			
		Sar	Antonio, TX 78215						
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the d/Beverage Expense	top of this sche	edule)		n, TX,	ide of Texas. Comp , officeholder living age for Meet	expense
	Complete ONLY if direct expenditure to benefit C/OF		idate/Officeholder name	0	Office soug	ht		Office he	ld

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburse Fees Office Overhead/Rental Exp Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract La	ense Transportation Equipment & Related Expense Travel in District Travel Out of District Dor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
-	Sch: 54/85 Rpt: 65/97	Bernal, Diego M. (The Honorable)	00070466
4	Date 06/24/2024	Payee name QT	
6	Amount (\$) \$59.46	Payee address; City; State; Zip Code 7203 San Pedro Avenue San Antonio, TX 78216	
8	PURPOSE OF EXPENDITURE		ON f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/28/2024	QT	
	Amount (\$) \$28.39	Payee address; City; State; Zip Code 7203 San Pedro Avenue San Antonio, TX 78216	
	PURPOSE OF EXPENDITURE		ON f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/28/2024	QT	
	Amount (\$) \$25.04	Payee address; City; State; Zip Code 7203 San Pedro Avenue	
		San Antonio, TX 78216	
	PURPOSE OF EXPENDITURE		ON f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

			EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	ense ages/Contract Labor		Transportation E Travel in District Travel Out of Di	
1	Total pages Schedule F1:	FILER NA	ЛЕ				3	Filer ID	(Ethics Commission Filers)
	Sch: 55/85 Rpt: 66/97		iego M. (The Honor	able)				00070466	
4	Date	Payee nam	ne						
	03/20/2024	Robert's F	-lower Shop						
6	Amount (\$) \$99.53	Payee add 423 Castr	ress; City; oville Road	State;	Zip Coo	le			
		San Anto	nio, TX 78207						
8	PURPOSE OF EXPENDITURE		(See Categories listed at the ds/Memorials Exper		edule)		n, TX,	, officeholder living	nplete Schedule T. g expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/C	fficeholder name	C	Office sou	ht		Office h	eld
	Date	Payee nam	ne						
	02/16/2024	Robert's F	lower Shop						
	Amount (\$)	Payee add	ress; City;	State;	Zip Co	le			
	\$126.63		oville Road nio, TX 78207						
	PURPOSE OF EXPENDITURE		(See Categories listed at the ds/Memorials Exper		edule)		n, TX,	, officeholder living	nplete Schedule T. g expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/C	officeholder name	C	Office sou	ht		Office h	eld
	Date	Payee nam	ne						
	02/06/2024	Rock & B	rews						
	Amount (\$) \$78.58	Payee add 5702 Lan	ress; City; dmark Parkway	State;	Zip Coo	le			
		San Anto	nio, TX 78249						
	PURPOSE OF EXPENDITURE		(See Categories listed at the erage Expense	top of this sche	edule)		ı, TX,	, officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/C	officeholder name	C	Office sou	ht		Office h	eld

		EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prii	fice Overh olling Expe inting Exp alaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 56/85 Rpt: 67/97		Bernal, Diego M. (The Honorable)				00070466	
4	Date	5	Payee name					
	03/13/2024		Rosario's ComidaMex & Bar					
6	Amount (\$)	7	Payee address; City; State; Zi	ip Cod	е			
	\$56.74		722 S. St. Mary's Street					
			San Antonio, TX 78205					
8	PURPOSE	(a)		<u> </u>	b) Description			
ľ	OF	(4)	Category (See Categories listed at the top of this schedule Food/Beverage Expense	e) (outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE				Check if Austin	, TX,	, officeholder living expense	
					Food and Be	ver	age for Meeting	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office	e sougl	nt		Office held	
	Date		Payee name					
	02/28/2024		Rose Hip Market					
_	Amount (\$)		Payee address; City; State; Zi	ip Cod	9			
	\$8.22		116 W. Olmos Drive		-			
	+0.==							
			San Antonio, TX 78212					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule	e) (I	b) Description			
	EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense	
							age for Meeting	
	Complete ONLY if direct		Candidate/Officeholder name Office	e sougl	ht		Office held	
	expenditure to benefit C/Oł			o ooug.				
_	Data	<u> </u>	D					
	Date 06/11/2024		Payee name SINGHS Vietnamese					
	Amount (\$)		Payee address; City; State; Zi	ip Cod	9			
	\$62.11		2803 N. St. Mary's Street					
			San Antonio, TX 78212					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	e) (I	b) Description			
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.	
							, officeholder living expense	
					Food and Be	ver	age for Meeting	
					-			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	e sougl	nt		Office held	
		•						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 57/85 Rpt: 68/97	Bernal, Diego M. (The Honorable)	00070466					
4	Date 05/16/2024	5 Payee name SINGHS Vietnamese						
6	Amount (\$) \$34.09	 Payee address; City; State; Zip Code 2803 N. St. Mary's Street San Antonio, TX 78212 						
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/28/2024	SINGHS Vietnamese						
	Amount (\$) \$48.24	Payee address; City; State; Zip Code 2803 N. St. Mary's Street						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/05/2024	SINGHS Vietnamese						
	Amount (\$) \$31.56	Payee address; City; State; Zip Code 2803 N. St. Mary's Street						
		San Antonio, TX 78212						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

			EXPENDITURE CATEGO	RIES FOF	R BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 58/85 Rpt: 69/97		Bernal, Diego M. (The Honorable)				00070466
4	Date 06/13/2024		Payee name San Antonio Gold				
6	Amount (\$) \$38.54		Payee address; City; State 1913 S. Flores Street Suite A San Antonio, TX 78204	; Zip Co	de		
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Food/Beverage Expense	nedule)	Check if Austin	, тх	de of Texas. Complete Schedule T. officeholder living expense age for Meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held
	Date		Payee name				
	05/30/2024		San Antonio Gold				
	Amount (\$) \$38.98		Payee address; City; State 1913 S. Flores Street Suite A San Antonio, TX 78204	; Zip Co	de		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Food/Beverage Expense	nedule)	Check if Austin	, тх	de of Texas. Complete Schedule T. officeholder living expense age for Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held
	Date		Payee name				
	05/14/2024		San Antonio Gold				
	Amount (\$) \$25.83		Payee address; City; State 1913 S. Flores Street Suite A San Antonio, TX 78204	; Zip Co	de		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Food/Beverage Expense	nedule)	Check if Austin	, тх	de of Texas. Complete Schedule T. officeholder living expense age for Meeting
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held

			EXPENDITURE CATEGO	RIES FOR	R BC	DX 8(a)			_
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhead opense xpens Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 59/85 Rpt: 70/97		Bernal, Diego M. (The Honorable)					00070466	
4	Date	5	Payee name						٦
	05/14/2024		San Antonio Gold						
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode				┨
	\$8.50		1913 S. Flores Street						
			Suite A						
			San Antonio, TX 78204						
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description			┨
	OF EXPENDITURE		Food/Beverage Expense	,		Check if travel of		ide of Texas. Complete Schedule T.	
								, officeholder living expense	
						Food and Bev	vera	age for Meeting	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held	_
	Date		Payee name						
	04/24/2024		San Antonio Gold						
	Amount (\$)		Payee address; City; State	e; Zip Co	ode				
	\$24.16		1913 S. Flores Street						
			Suite A						
			San Antonio, TX 78204						
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description			
	OF EXPENDITURE		Food/Beverage Expense	,				ide of Texas. Complete Schedule T.	
								, officeholder living expense	
						FUUU anu bev	ven	age for Meeting	
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht			Office held	\neg
	expenditure to benefit C/OF			Office 300	igin			Once neu	
	Date	—							=
	04/12/2024		Payee name San Antonio Gold						
	Amount (\$)			e; Zip Co	ndo				\neg
	\$31.40		1913 S. Flores Street	е, zip сс	Jue				
	401. +0		Suite A						
			San Antonio, TX 78204						
	DUDDOCC				(1-)	D			_
	PURPOSE OF	(a)	Category (See Categories listed at the top of this so Food/Beverage Expense	chedule)	(0)	Description	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Food/Develage Expense					, officeholder living expense	
						Food and Bev	ver	age for Meeting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held	
									\neg

			EXPENDITURE CATEG	ORIES FO	R BO	OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ov Polling Ex Printing E Salaries/V	erhea kpens Expens Nages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 60/85 Rpt: 71/97		Bernal, Diego M. (The Honorable)					00070466
4	Date	5	Payee name					
	04/05/2024		San Antonio Gold					
6	Amount (\$)	7	Payee address; City; Stat	te; Zip Co	ode			
	\$13.53		1913 S. Flores Street	· •				
			Suite A					
			San Antonio, TX 78204					
8	PURPOSE	(2)			(h)	Description		
ľ	OF	(4)	Category (See Categories listed at the top of this s Food/Beverage Expense	schedule)	(3)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	, TX,	officeholder living expense
						Food and Be	ver	age for Meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	03/14/2024		San Antonio Gold					
	Amount (\$)		Payee address; City; Stat	te; Zip Co	ode			
	\$35.83		1913 S. Flores Street					
			Suite A					
			San Antonio, TX 78204					
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description		
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Schedule T.
								officeholder living expense
						FOOD and Be	ven	age for Meeting
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l Ight			Office held
	expenditure to benefit C/OF			Onice Sol	Jynt			Onice field
	Data							
	Date 02/20/2024		Payee name San Antonio Gold					
	Amount (\$) \$20.70		Payee address; City; Stat 1913 S. Flores Street	te; Zip Co	Jue			
	φ20.70							
			Suite A					
			San Antonio, TX 78204					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description	outei	de of Texas. Complete Schedule T.
	EXPENDITURE		Food/Beverage Expense					officeholder living expense
								age for Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held
-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel out of District mmittee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2					
-	Sch: 61/85 Rpt: 72/97		Bernal, Diego M. (The Honorable) 00070466				
4	Date	5	Payee name				
	03/18/2024		Sawasdee Thai Cuisine				
6	Amount (\$)	7	Payee address; City; State; Zip Code				
	\$63.62		6407 Blanco Road				
			San Antonio, TX 78216				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.				
			Check if Austin, TX, officeholder living expense				
			Food and Beverage for Meeting				
_							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought Office held				
	Date		Payee name				
	02/22/2024		Sawasdee Thai Cuisine				
	Amount (\$)		Payee address; City; State; Zip Code				
	\$34.39		6407 Blanco Road				
			San Antonio, TX 78216				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
			Food and Beverage for Meeting				
	Complete ONLY if direct		Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	Н					
	Date		Payee name				
	05/20/2024		Starbucks				
	Amount (\$)		Payee address; City; State; Zip Code				
	\$8.77		7311 San Pedro Avenue				
			San Antonio, TX 78216				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
			Food and Beverage for Meeting				
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/Oł						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Offic Food/Beverage Expense Pollin Gift/Awards/Memorials Expense Print	Repayment/Reimbursement e Overhead/Rental Expense ing Expense ries/Wages/Contract Labor o complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)						
-	Sch: 62/85 Rpt: 73/97	Bernal, Diego M. (The Honorable)		00070466						
4	Date 04/08/2024	Payee name Starbucks								
6	Amount (\$)	Payee address; City; State; Zip	Code							
Ū	\$12.18	7311 San Pedro Avenue San Antonio, TX 78216								
•	DUDDOCE									
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense everage for Meeting						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office	sought	Office held						
	Date	Payee name								
	06/20/2024	Station Cafe								
	Amount (\$)	Payee address; City; State; Zip	Code							
	\$35.37	.08 King William Street San Antonio, TX 78205								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense everage for Meeting						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office	sought	Office held						
	Date	Payee name								
	04/23/2024	Station Cafe								
	Amount (\$) \$35.24	Payee address; City; State; Zip .08 King William Street	Code							
		San Antonio, TX 78205								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense everage for Meeting						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office	sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/wards/Memorials Exp nittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor	e	Travel in District Travel Out of Dist	quipment & Related Expense	
1	Total pages Cabadula E1.			explains	100 10 001	ipiete tills form.		Filer ID	(Ethios Commission Filoro)	
1	Total pages Schedule F1: Sch: 63/85 Rpt: 74/97		ernal, Diego M. (The Honora	ble)			3	Filer ID 00070466	(Ethics Commission Filers)	
4	Date		ayee name							
	04/05/2024		station Cafe							
6	Amount (\$) \$32.38	1	ayee address; City; 08 King William Street 5an Antonio, TX 78205	State;	Zip Co	de				
8	PURPOSE	(a) (ategory (See Categories listed at the to	on of this sche	edule)	(b) Description				
-	OF EXPENDITURE		ood/Beverage Expense	op or this some	euule)	Check if tr	avel outs ustin, TX	side of Texas. Comp (, officeholder living rage for Meet	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	pht		Office he	ld	
	Date	F	ayee name							
	03/22/2024	5	station Cafe							
	Amount (\$)	F	ayee address; City;	State;	Zip Co	de				
	\$14.35		08 King William Street an Antonio, TX 78205							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the tr ood/Beverage Expense	op of this sche	edule)	Check if A	avel outs ustin, TX	side of Texas. Comp (, officeholder living rage for Meet	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	Jht		Office he	ld	
	Date	F	ayee name		_					
	03/20/2024	5	tation Cafe							
	Amount (\$) \$35.24		ayee address; City; 08 King William Street	State;	Zip Co	de				
		5	an Antonio, TX 78205							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to cood/Beverage Expense	op of this sche	edule)	Check if A	avel outs ustin, TX	side of Texas. Comp <, officeholder living rage for Meet	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice sou	ght		Office he	ld	

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense umittee Legal Services The Instruction Guide exp		Office Ove Polling Exp Printing Ex Salaries/W	rhea bense pens ages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	2 FILER NAME 3 Fi						Filer ID (Ethics Commission Filers)		
-	Sch: 64/85 Rpt: 75/97		Bernal, Diego M. (The Honorable)					00070466		
4	Date 02/29/2024	5	Payee name Station Cafe								
6	Amount (\$) \$35.24	7	Payee address; City; 108 King William Street	State	; Zip Co	de					
			San Antonio, TX 78205								
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Food/Beverage Expense	this sch	nedule)	(b)	Check if Austin	, TX,	side of Texas. Complete Schedule T. K, officeholder living expense rage for Meeting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	(Office sou	ght			Office held		
	Date		Payee name								
	02/14/2024		Station Cafe								
	Amount (\$) \$35.24		Payee address; City; 108 King William Street	State	; Zip Co	de					
			San Antonio, TX 78205								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Food/Beverage Expense	this sch	nedule)	(b)	Check if Austin	, TX,	side of Texas. Complete Schedule T. K, officeholder living expense rage for Meeting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	(Office sou	ght			Office held		
	Date		Payee name							-	
	02/09/2024		Station Cafe								
	Amount (\$) \$28.82		Payee address; City; 108 King William Street	State	; Zip Co	de					
			San Antonio, TX 78205								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Food/Beverage Expense	this sch	nedule)	(b)	Check if Austin	, тх,	side of Texas. Complete Schedule T. K, officeholder living expense rage for Meeting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	(Office sou	ght			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Guid	xpense	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total names Cabadula E1.						1	Filer ID	(Ethics Commission Filers)	
1	Total pages Schedule F1: Sch: 65/85 Rpt: 76/97		ego M. (The Honor	able)				Filer ID 00070466	(Ethics Commission Filers)	
4	Date	Payee nam	е							
	02/07/2024	Station Ca	fe							
6	Amount (\$) \$29.17	-	ess; City; Villiam Street io, TX 78205	State;	Zip Coc	e				
8	PURPOSE			4		b) Description				
0	OF		See Categories listed at the erage Expense	top of this sche	edule)	Check if travel	n, TX,	de of Texas. Com officeholder living age for Mee	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/O	fficeholder name	C	Office soug	ht		Office he	eld	
	Date	Payee nam	е							
	03/28/2024	Stranded (Coffee							
	Amount (\$)	Payee addr	ess; City;	State;	Zip Coo	е				
	\$8.41	San Anton	amo Street io, TX 78210							
	PURPOSE OF EXPENDITURE		See Categories listed at the erage Expense	top of this sche	edule)		n, TX,	de of Texas. Com officeholder living age for Mee	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/O	fficeholder name	C	Office soug	ht		Office he	eld	
	Date	Payee nam	е							
	02/26/2024		Food Mart							
	Amount (\$) \$20.39	Payee addr 6614 San	ess; City; Pedro Avenue	State;	Zip Coo	e				
		San Anton	io, TX 78216							
	PURPOSE OF EXPENDITURE) Category ₍ Travel In E	See Categories listed at the District	top of this sche	edule)			de of Texas. Com officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/O	fficeholder name	C	Office soug	ht		Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
1	Sch: 66/85 Rpt: 77/97	Bernal, Diego M. (The Honorable)	00070466							
4	Date 06/17/2024	5 Payee name Super Express								
6	Amount (\$) \$44.91	 Payee address; City; State; Zip Code 3702 Waterwood Pass Drive Elmendorf, TX 78112 								
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/21/2024	Sushi Haya								
	Amount (\$) \$93.64	Payee address; City; State; Zip Code 226 W. Bitters Road Suite 120 San Antonio, TX 78216								
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense verage for Meeting							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/14/2024	T-Mobile								
	Amount (\$) \$146.22	Payee address;City;State;Zip Code12920 SE 38th Street								
		Bellevue, WA 98006								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ayment							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Travel in District Food/Beverage Expense Polling Expense Travel out of District Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category no								
1	Total pages Schedule F1:	LER NAME		3 Filer ID (Ethics Commission Filers)						
	Sch: 67/85 Rpt: 78/97	ernal, Diego M. (The Honorable)		00070466						
4	Date 05/14/2024	ayee name -Mobile								
6	Amount (\$) \$146.22	ayee address; City; State 2920 SE 38th Street ellevue, WA 98006	e; Zip Code							
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this so ffice Overhead/Rental Expense	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Payment						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held						
	Date	ayee name								
	04/15/2024	-Mobile								
	Amount (\$)	ayee address; City; State	e; Zip Code							
	\$146.22	2920 SE 38th Street ellevue, WA 98006								
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this sc ffice Overhead/Rental Expense	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Payment						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held						
	Date	ayee name								
	03/14/2024	-Mobile								
	Amount (\$) \$146.22	ayee address; City; State 2920 SE 38th Street	e; Zip Code							
		ellevue, WA 98006								
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this so ffice Overhead/Rental Expense	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Payment						
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 68/85 Rpt: 79/97	Bernal, Diego M. (The Honorable)	00070466							
4	Date 02/14/2024	Payee name T-Mobile								
6	Amount (\$) \$111.89	Payee address; City; State; Zip Code 12920 SE 38th Street Bellevue, WA 98006								
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense ayment							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/25/2024	T-Mobile								
	Amount (\$) \$136.89	Payee address; City; State; Zip Code 12920 SE 38th Street Bellevue, WA 98006								
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense ayment							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/16/2024	T-Mobile								
	Amount (\$) \$111.89	Payee address;City;State;Zip Code12920 SE 38th Street								
		Bellevue, WA 98006								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense ayment							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								ated Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Com	mission Filers)
	Sch: 69/85 Rpt: 80/97		Bernal, Diego M. (The Honorable)					00070466	
4	Date	5	Payee name				1		
	06/28/2024		Taqueria Chapala Jalisco						
6	Amount (\$)	7	Payee address; City; S	tate; Zip	Code)			
	\$37.37		1902 McCullough Avenue						
			San Antonio, TX 78212						
8	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense	ie concurrency			outsi	ide of Texas. Complete Schedule 1	.
	EXPENDITORE							, officeholder living expense	
						Food and Be	ver	rage for Meeting	
_	-				<u> </u>	-			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office	sough	t		Office held	
_	Data								
	Date		Payee name						
	06/12/2024		Taqueria Chapala Jalisco						
	Amount (\$)			tate; Zip	Code	2			
	\$21.66		1902 McCullough Avenue						
			San Antonio, TX 78212						
_	PURPOSE	(a)	Category (See Categories listed at the top of th		(h) Description			
	OF		Food/Beverage Expense	is schedule)			outsi	ide of Texas. Complete Schedule 1	<u>.</u>
	EXPENDITURE					Check if Austin	n, TX,	, officeholder living expense	
						Food and Be	ver	age for Meeting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	Office	sough	t		Office held	
	Date		Payee name						
	05/29/2024		Taqueria Chapala Jalisco						
	Amount (\$)		Payee address; City; S	tate; Zip	Code	9			
	\$30.87		1902 McCullough Avenue						
			San Antonio, TX 78212						
	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b	Description			
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule 1	
								, officeholder living expense	
						FUUU allu De	vel	rage for Meeting	
_	Complete ONLY if direct		andidate/Officeholder name	Office	souch	t		Office held	
	expenditure to benefit C/OI			Chice	Sough	n.			
-									

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemu Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense bommittee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Se Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
-	Sch: 70/85 Rpt: 81/97	Bernal, Diego M. (The Honorable)	00070466
4	Date 05/28/2024	Payee name Taqueria Chapala Jalisco	
6	Amount (\$) \$25.86	Payee address; City; State; Zip Code 1902 McCullough Avenue San Antonio, TX 78212 State; Zip Code	
8	PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense Beverage for Meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/16/2024	Taqueria Chapala Jalisco	
	Amount (\$) \$47.49	Payee address; City; State; Zip Code 1902 McCullough Avenue	
	PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense Beverage for Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/19/2024	Taqueria Chapala Jalisco	
	Amount (\$) \$33.66	Payee address;City;State;Zip Code1902 McCullough Avenue	
		San Antonio, TX 78212	
	PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense Beverage for Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office O Polling E Printing Salaries/	verhea xpens Expens Wage	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed a	·
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commis	sion Filers)
	Sch: 71/85 Rpt: 82/97		Bernal, Diego M. (The Honorable)					00070466	
4	Date	5	Payee name						
	04/19/2024		Taqueria Chapala Jalisco						
6	Amount (\$)	7	Payee address; City; Sta	te; Zip C	ode				
	\$24.38		1902 McCullough Avenue						
			San Antonio, TX 78212						
8	PURPOSE	<u> </u>	Category (See Categories listed at the top of this		(b)	Description			
Ŭ	OF		Food/Beverage Expense	schedule)	(,		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE					Check if Austin	, тх,	, officeholder living expense	
						Food and Be	ver	age for Meeting	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held	
	Data	<u> </u>	2						
	Date		Payee name						
	04/08/2024		Taqueria Chapala Jalisco						
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode				
	\$20.85		1902 McCullough Avenue						
			San Antonio, TX 78212						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Food/Beverage Expense	,		Check if travel	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITORE							, officeholder living expense	
						Food and Be	ver	age for Meeting	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held	
	Date		Payee name						
	04/03/2024		Taqueria Chapala Jalisco						
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode				
	\$25.65		1902 McCullough Avenue	,					
			San Antonio, TX 78212						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.	
	-							, officeholder living expense	
						roou anu Be	ver	age for Meeting	
	Complete ONUV 5 allocat	Ļ	Condidate (Office hald are not to	Office				Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ugnt			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exponentiate Legal Services The Instruction Guide		Office Ove Polling Ex Printing Ex Salaries/W	erhead pense xpens Vages	I/Rental Expense e /Contract Labor	Travel in District Travel Out of Dist	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
-	Sch: 72/85 Rpt: 83/97	[Bernal, Diego M. (The Honoral	ble)			-	00070466	()	
4	Date 04/01/2024	5	Payee name Taqueria Chapala Jalisco							
6	Amount (\$) \$27.93	7	Payee address; City; 1902 McCullough Avenue San Antonio, TX 78212	State;	Zip Co	ode				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the to Food/Beverage Expense	p of this sch	edule)	(b)	Description Check if travel outside Check if Austin, TX, c Food and Bevera	officeholder living	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office sou	ght		Office he	ld	
	Date		Payee name							
	03/13/2024		Taqueria Chapala Jalisco							
	Amount (\$) \$34.66		Payee address; City; 1902 McCullough Avenue	State;	Zip Co	de				
	PURPOSE OF EXPENDITURE	(a)	San Antonio, TX 78212 Category (See Categories listed at the to Food/Beverage Expense	p of this sch	edule)	(b)	Description Check if travel outside Check if Austin, TX, c Food and Bevera	officeholder living	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office he	ld	
	Date		Payee name							
	03/07/2024		Taqueria Chapala Jalisco							
	Amount (\$) \$24.11		Payee address; City; 1902 McCullough Avenue	State;	Zip Co	de				
			San Antonio, TX 78212							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the to Food/Beverage Expense	p of this sch	edule)	(b)	Description Check if travel outside Check if Austin, TX, c Food and Bevera	officeholder living	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office sou	ght		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Office Polling Printin Salarie	Overhe Expen g Exper s/Wage	nse es/Contract Labor		Solicitation/Fundraising Exp Transportation Equipment & Travel in District Travel Out of District OTHER (enter a category n	& Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics	Commission Filers)
	Sch: 73/85 Rpt: 84/97		Bernal, Diego M. (The Honorable)					00070466	
4	Date	5	Payee name				-		
	02/16/2024		Taqueria Chapala Jalisco						
6	Amount (\$)	7	Payee address; City; St	ate; Zip	Code				
	\$43.22		1902 McCullough Avenue						
			San Antonio, TX 78212						
8	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense	,		Check if travel		de of Texas. Complete Sche	dule T.
	EXFENDITORE							officeholder living expense	
						Food and Be	ver	age for Meeting	
_					<u> </u>				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office s	ough	t		Office held	
	Data	_							
	Date		Payee name						
	02/12/2024		Taqueria Chapala Jalisco						
	Amount (\$)		Payee address; City; St	ate; Zip	Code				
	\$33.38		1902 McCullough Avenue						
			San Antonio, TX 78212						
	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Sche	dule T.
								officeholder living expense	
						FOOU and Be	ver	age for Meeting	
	Complete ONLY if direct		Candidate/Officeholder name	Office s	ouah	t		Office held	
	expenditure to benefit C/OI				e agri	•			
⊨	Date		Payee name						
	01/30/2024		Taqueria Chapala Jalisco						
	Amount (\$)		Payee address; City; St	ate; Zip	Code				
	\$15.35		1902 McCullough Avenue						
			San Antonio, TX 78212						
	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense	,		Check if travel	outsi	de of Texas. Complete Sche	dule T.
	EXPENDITORE							officeholder living expense	
						Food and Be	ver	age for Meeting	
	0			017	<u> </u>				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office s	ough	t		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 74/85 Rpt: 85/97	Bernal, Diego M. (The Honorable)	00070466					
4	Date 01/02/2024	5 Payee name Taqueria Chapala Jalisco						
6	Amount (\$) \$23.23	 Payee address; City; State; Zip Code 1902 McCullough Avenue San Antonio, TX 78212 						
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	05/13/2024	Target						
	Amount (\$) \$288.96	Payee address; City; State; Zip Code 746 NW Loop 410 San Antonio, TX 78216						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Office Overhead/Rental Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense aning Supplies					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	04/24/2024	Target						
	Amount (\$) \$104.69	Payee address;City;State;Zip Code746 NW Loop 410						
		San Antonio, TX 78216						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense S					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Exp nmittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract	Expense t Labor		Travel in District Travel Out of Dist	uipment & Related Expense
1	Total pages Schedule F1:	2			100.10			3	Filer ID	(Ethics Commission Filers)
1	Sch: 75/85 Rpt: 86/97	2	Bernal, Diego M. (The Honora	ble)				3	00070466	
4	Date	5	Payee name							
	03/25/2024		Target							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de				
	\$74.99		746 NW Loop 410							
			Con Antonio TV 70216							
			San Antonio, TX 78216							
8	PURPOSE OF	(a)	Category (See Categories listed at the to		iedule)	(b) Descri			. (7 0	
	EXPENDITURE		Office Overhead/Rental Exper	ise					de of Texas. Comp officeholder living	
							e Supplie		j	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice sou	jht			Office he	d
	Date		Payee name							
	02/13/2024		Texas Ethics Commission							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$500.00		201 E. 14th Street	,	, I					
			Austin, TX 78701							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the to Fees	op of this sch	edule)		eck if travel o		de of Texas. Comp	
							eck if Austin, Report F		officeholder living	expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice sou	jht			Office he	d
	Date		Payee name							
	02/13/2024		Texas Ethics Commission							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$12.45		201 E. 14th Street							
			Austin, TX 78701							
	PURPOSE OF	(a)	Category (See Categories listed at the to	op of this sch	edule)	(b) Descri	•			
	EXPENDITURE		Fees						de of Texas. Comp officeholder living	
									ocessing Fe	
							aymon	1	coccorrig i c	~
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name	ſ	Office sou	nht			Office he	d
	expenditure to benefit C/OI			C C	2					
-										

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 76/85 Rpt: 87/97	Bernal, Diego M. (The Honorable)	00070466
4	Date	Payee name	
	04/10/2024	Texas House LGBTQ Caucus	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$421.37	1100 Congress Avenue	
		Austin, TX 78701	
8	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Membership	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/10/2024	The Cove	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$70.80	606 W. Cypress Street	
		San Antonio, TX 78212	
	PURPOSE OF) Category (See Categories listed at the top of this schedule) (b) Description	el outside of Texas. Complete Schedule T.
	EXPENDITURE		in, TX, officeholder living expense
		Food and B	everage for Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/15/2024	The Cove	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$74.36	606 W. Cypress Street	
	PURPOSE	San Antonio, TX 78212	
	OF) Category (See Categories listed at the top of this schedule) (b) Description Food/Beverage Expense	el outside of Texas. Complete Schedule T.
	EXPENDITURE		in, TX, officeholder living expense
		Food and B	everage for Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
-			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhea pense xpens Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	· · ·				3	Filer ID (Ethics Commission Filers	-)
T	Sch: 77/85 Rpt: 88/97		Bernal, Diego M. (The Honorable)					00070466	5)
4	Date	5	Payee name						
	03/25/2024		The Dakota East Side Ice House						
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode				
	\$57.00		433 S. Hackberry Street						
			San Antonio, TX 78203						
_	DUDDOOF				(1-)				
8	PURPOSE OF		Category (See Categories listed at the top of this so	chedule)	(d)	Description		de ef Teure Commission Cohedule T	
	EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Schedule T. officeholder living expense	
								age for Meeting	
						1 000 and De	ven		
_									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ıght			Office held	
	Date		Payee name						
	04/15/2024		The Hayden						
			,						
	Amount (\$)			e; Zip Co	bde				
	\$69.59		4025 Broadway						
			San Antonio, TX 78209						
	PURPOSE				(h)	Description			
	OF		Category (See Categories listed at the top of this so	chedule)	(0)	Description	nutsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Food/Beverage Expense					officeholder living expense	
								age for Meeting	
	Complete ONLY if direct		candidate/Officeholder name	Office sou	l			Office held	
	expenditure to benefit C/OI		anduale/Oncentitier name	Once sou	iyin			Onice field	
	_	1							
	Date		Payee name						
	05/06/2024		The Spin Coffee & Vinyl						
	Amount (\$)		Payee address; City; State	e; Zip Co	ode				
	\$20.05		3131 Nacogdoches Road						
			Suite 101						
			San Antonio, TX 78217						
	PURPOSE OF		Category (See Categories listed at the top of this so	chedule)	(b)	Description			
	EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Schedule T.	
								officeholder living expense	
							veli	age for Meeting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held	
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	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
-	Sch: 78/85 Rpt: 89/97	Bernal, Diego M. (The Honorable)	00070466					
4	Date 04/22/2024	5 Payee name The Wicked Wich						
6	Amount (\$) \$41.07	 Payee address; City; State; Zip Code 825 Fredericksburg Road San Antonio, TX 78212 						
8	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/26/2024	The Wicked Wich						
	Amount (\$) \$32.05	Payee address; City; State; Zip Code 825 Fredericksburg Road						
	PURPOSE	San Antonio, TX 78212 (a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Food/Beverage Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	03/26/2024	The Wicked Wich						
	Amount (\$) \$34.81	Payee address; City; State; Zip Code 825 Fredericksburg Road						
		San Antonio, TX 78212						
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense erage for Meeting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 79/85 Rpt: 90/97	Bernal, Diego M. (The Honorable)	00070466					
4	Date 02/12/2024	5 Payee name The Wicked Wich						
6	Amount (\$) \$33.36	 Payee address; City; State; Zip Code 825 Fredericksburg Road San Antonio, TX 78212 						
8	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense rerage for Meeting					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	01/19/2024	The Wicked Wich						
	Amount (\$) \$28.15	Payee address; City; State; Zip Code 825 Fredericksburg Road						
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense rerage for Meeting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	06/04/2024	Tlahco Mexican Kitchen						
	Amount (\$) \$90.85	Payee address; City; State; Zip Code 6702 San Pedro Avenue						
		San Antonio, TX 78216						
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense 'erage for Meeting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ov Polling E Printing I Salaries/	verhea xpens Expens Wages	ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)		
-	Sch: 80/85 Rpt: 91/97		Bernal, Diego M. (The Honorable)			00070466		
4	Date 05/10/2024		Payee name Tlahco Mexican Kitchen					
6	Amount (\$) \$117.42		Payee address; City; Sta 6702 San Pedro Avenue San Antonio, TX 78216	te; Zip C	ode	9		
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Food/Beverage Expense	schedule)	(b)	 Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting 		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught	nt Office held		
	Date		Payee name					
	02/26/2024		Tlahco Mexican Kitchen					
	Amount (\$) \$51.85		Payee address; City; Sta 6702 San Pedro Avenue	te; Zip C	ode	9		
	DUDDOSE	<u> </u>	San Antonio, TX 78216		(b)			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Food/Beverage Expense	chedule)		 Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting 		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught	nt Office held		
	Date		Payee name					
	05/06/2024		Trapper's Sushi Co.					
	Amount (\$) \$117.01		Payee address; City; Sta 415 W. Loop 1604 South Suite 112 San Antonio, TX 78253	te; Zip C	ode	9		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Food/Beverage Expense	chedule)	(b)	 Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage for Meeting 		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught	nt Office held		

			EXPENDITURE	CATEGORI	ES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp	pense	Loan Repay Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reimbursement nead/Rental Expense ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 FI		•		•	3	Filer ID	(Ethics Commission Filers)
-	Sch: 81/85 Rpt: 92/97		ernal, Diego M. (The Honora	ıble)			ľ	00070466	(
4	Date 05/06/2024		ayee name apper's Sushi						
6	Amount (\$) \$6.87	4 <u>:</u> Si	ayee address; City; .5 W. Loop 1604 South uite 112 an Antonio, TX 78253	State;	Zip Cod	e			
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to bod/Beverage Expense	op of this sched	dule) (n, TX	ide of Texas. Com , officeholder living age for Mee	expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Off	fice soug	ht		Office he	eld
	Date	Pá	ayee name						
	04/23/2024	TI	ibute Store Flowers						
	Amount (\$) \$128.21	2: Si	ayee address; City; 501 Parmenter Street uite 300A iddleton, WI 53562	State;	Zip Cod	e			
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to ft/Awards/Memorials Expen		dule) (n, TX	ide of Texas. Com , officeholder living ;	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Of	fice soug	ht		Office he	eld
	Date	Pá	ayee name						
	03/29/2024	U	per Eats						
	Amount (\$) \$41.30	14 Si	ayee address; City; 155 Market Street uite 400 an Francisco, CA 94103	State;	Zip Cod	e			
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the tr bod/Beverage Expense	op of this sched	dule) (n, TX	ide of Texas. Com , officeholder living age for Mee	expense
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	Of	fice soug	ht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 82/85 Rpt: 93/97		Bernal, Diego M. (The Honorable)				00070466	
4	Date 06/17/2024		Payee name United States Postal Service					
6	Amount (\$) \$67.00		Payee address; City; State; 475 L'Enfant Plaza SW Washington, DC 20260	Zip Co	le			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held	
	Date		Payee name					
	03/18/2024		United States Postal Service					
	Amount (\$) \$67.00		Payee address; City; State; 475 L'Enfant Plaza SW	Zip Co	le			
			Washington, DC 20260					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held	
	Date		Payee name					
	06/17/2024		Valero					
	Amount (\$) \$30.28		Payee address; City; State; 5811 San Pedro Avenue	Zip Coo	le			
			San Antonio, TX 78212					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel In District	edule)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain:	Office Ov Polling Ex Printing E Salaries/V	erhead kpense xpens Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · ·				3	Filer ID (Ethics Commission Filers)
T	Sch: 83/85 Rpt: 94/97		Bernal, Diego M. (The Honorable)				<u>з</u>	00070466
4	Date	5	Payee name					
	03/25/2024		Wal-Mart					
6	Amount (\$) \$5.63		8500 Jones Maltsberger Road	e; Zip Co	ode			
			San Antonio, TX 78216					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	06/25/2024		Zoom					
	Amount (\$)		Payee address; City; State	e; Zip Co	ode			
	\$17.07		55 Almaden Boulevard	•				
			6th Floor					
			San Jose, CA 95113					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense Software
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	05/28/2024		Zoom					
	Amount (\$)		Payee address; City; State	e; Zip Co	ode			
	\$17.07		55 Almaden Boulevard					
			6th Floor					
			San Jose, CA 95113					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)	(b)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense
						Virtual Meetir	ıy .	Soliwale
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Exper mittee Legal Services The Instruction Guide 6		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labo	or	ר ר ר	Fravel in District Fravel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	3 F	-iler ID	(Ethics Commission Filers)
	Sch: 84/85 Rpt: 95/97		Bernal, Diego M. (The Honorab	le)				(00070466	
4	Date 04/25/2024		Payee name Zoom							
6	Amount (\$)	7	Payee address; City;	State:	; Zip Co	de				
-	\$17.07		55 Almaden Boulevard	,	, 1					
			6th Floor							
			San Jose, CA 95113							
		<u> </u>								
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Office Overhead/Rental Expens		iedule)		travel ou Austin, T	TX, o	fficeholder living	blete Schedule T. expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office he	ld
	Date		Payee name							
	03/25/2024		Zoom							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$17.07		55 Almaden Boulevard							
			6th Floor							
			San Jose, CA 95113							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Office Overhead/Rental Expens		iedule)		travel ou Austin, T	TX, o	fficeholder living	olete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	jht			Office he	ld
	Date		Payee name							
	02/26/2024		Zoom							
-	Amount (\$)	-	Payee address; City;	State:	; Zip Co	de				
	\$17.07		55 Almaden Boulevard	,	, 1					
	, -		6th Floor							
			San Jose, CA 95113							
	DUDDOOF					(h) =				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Office Overhead/Rental Expens		edule)		travel ou Austin, T	TX, o	fficeholder living	blete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	jht			Office he	ld

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District offit/Awards/Memorials Expense Printing Expense Travel OUt of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 85/85 Rpt: 96/97	Bernal, Diego M. (The Honorable) 00070466
4	Date	
4		5 Payee name
	01/25/2024	Zoom
6	Amount (\$) \$17.07	7 Payee address; City; State; Zip Code 55 Almaden Boulevard 6th Floor San Jose, CA 95113
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Virtual Meeting Software
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

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: 97/97	
2 FILER NAME		3 Filer ID (Ethics Co	Filer ID (Ethics Commission Filers)	
Bernal, Diego M. (The Honorable) 00		00070466		
4 Date	5 Name of person from whom amount is received	8 Amount		
02/12/2024	Frost Bank		\$0.01	
	6 Address of person from whom amount is received; City; State; Zip Code			
	San Antonio, TX 78296			
	7 Purpose for which amount is received Check	if political contribution return	ned to filer	
	Interest on Account Balance			
Date	Name of person from whom amount is received	Amount	(\$)	
03/12/2024	Frost Bank		\$0.79	
	Address of person from whom amount is received; City; State; Zip Code			
	San Antonia TV 79206			
	San Antonio, TX 78296 Purpose for which amount is received Check	if political contribution ratur	nod to filor	
	Interest on Account Balance	if political contribution return	ned to mer	
Data		Amount	(
Date 04/10/2024	Name of person from whom amount is received Frost Bank	Amount	(\$) \$0.72	
04/10/2024	Address of person from whom amount is received; City; State; Zip Code		φ0.7 <i>2</i>	
	Address of person norm whom amount is received, "City, State, Zip Code			
	San Antonio, TX 78296			
		if political contribution return	ned to filer	
	Interest on Account Balance			
Date	Name of person from whom amount is received		(\$)	
05/10/2024	2024 Frost Bank		\$0.53	
Address of person from whom amount is received; City; State; Zip Code				
	San Antonio, TX 78296			
		I f political contribution return	ned to filer	
	Interest on Account Balance			
Date	Name of person from whom amount is received	Amount	(\$)	
06/12/2024			\$0.26	
Address of person from whom amount is received; City; State; Zip Code				
	San Antonio, TX 78296			
		if political contribution return	ned to filer	
	Interest on Account Balance			