# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commiss 00062485	sion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable	Rolando			Date Received  ELECTRONICAI	LY FILED
	NICKNAME	LAST		SUFFIX	07/15/2024	
	Roland	Gutierrez		301117		
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or [	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P.O. Box 15232				Receipt #	Amount
Change of Address	San Antonio, TX 78212					
	Carry antonio, 17, 70212				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-	
TREASURER NAME	Mr.	David D.				
	NICKNAME	LAST		SUFFIX		
	THOM WILL	Christian		301111		
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO 1800 McCullough Ave	BOX PLEASE);	APT	/ SUITE #; CITY;	STAT	E; ZIP CODE
(Residence or Business)						
(Residence of Business)	San Antonio, TX 78212					
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	EXTENSION			
TREASURER PHONE	(210) 710-8919					
8 REPORT TYPE	January 15	30th day before	election   I	Runoff	15th day after cam	
		<b>-</b>			appointment (office	
	X July 15	8th day before 6		Exceeded modified reporting limit	Final Report (Attac	h C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	IROUGH	06/30/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	11/05/2024	ΧG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	- Di-t-i-t 10 D		12 OFFICE SOUGHT		10
	State Senator Place Texas	s district 19 Bex	car	State Senator Pla	ace Texas District	19
	,					
		GO T	O PAGE 2			

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

2 of 114

13 C / OH NAME	Gutierrez, Rolando (1	he Honorable)	<b>14</b> Filer ID (E 00062485	Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or office	holder's knowledge or		
Additional Pages	COMMITTEE TYPE COMMITTEE NAME					
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 92,708.11		
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 104,656.04		
CONTRIBUTION BALANCE	REPORTING PE			<b>\$</b> 43,898.07		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT						
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.				
		The Honor	able Rolando Gutierre	۵7		
			Candidate or Officehold			
AFFIX NO	TARY STAMP / SEAL ABO	DVE				
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 office	cer administering	Printed name of officer administering	Title of officer	administering oath		

#### **SUBTOTALS - C/OH**

#### FORM C/OH COVER SHEET PG 3

			3 of 114			
18 FILER N. Gutierre	AME z, Rolando (The Honorable)	<b>19</b> Filer ID 00062485	(Ethics Commission Filers)			
	20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE					
1. X	\$ 92,708.11					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.	SCHEDULE E: LOANS		\$			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 104,656.04			
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$				
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 1/53 Rpt: 4/114	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 05/16/2024		out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$25.00
		McConnellsburg, PA 17233					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Date 05/28/2024	Full name of contributor  Ancira, April  Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu	Boerne, TX 78015 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Vice Preside			Ancira	,		
	Date 05/29/2024	Full name of contributor  Anselmo, John  Contributor address; City; State;	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$100.00
		Round Rock, TX 78665					
	Principal occu Program Ma	pation / Job title (See Instructions) nager		Employer (See Instructions Harbros Precision	)		
	Date 06/01/2024	Full name of contributor  Aragon, Gary  Contributor address; City; State;  Castke Rock, CO 80104				Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 05/05/2024	Archer, Christian	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$3,300.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self	)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/53 Rpt: 5/114	
2	FILER NAME Gutierrez, R	FILER NAME Gutierrez, Rolando (The Honorable)		3	Filer ID (Ethics Commission 00062485	Filers)
4		5 Full name of contributor out-of-state PAC (ID#:_Ayer, Bonnie 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00
_	Dringing! goog	San Antonio, TX 78230	D. Employer (Co.) Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Barber, Gary Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$3.00
	Principal occu	Mays Landing, NJ 08330 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Barber, Gary Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Mays Landing, NJ 08330				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_ Barber, Gary Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Mays Landing, NJ 08330 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#: Barnes, Sally Contributor address; City; State; Zip Code  Sterling, VA 20165			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/53 Rpt: 6/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4		Full name of contributor	)	7	Amount of Contribution (\$)	\$200.00
_	<u> </u>	San Antonio, TX 78210	10 - 1 (0 1 1 1			
8	Lawyer	ipation / Job title (See Instructions)	9 Employer (See Instructions Self	5)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_Barras, Donna  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Smithville, TX 78957  upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 06/04/2024	Full name of contributor out-of-state PAC (ID#:_Bartos, Janet  Contributor address; City; State; Zip Code  Little Rock, AR 72223			Amount of Contribution (\$)	\$10.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_Bedini , Linda  Contributor address; City; State; Zip Code  Sunnyvale, CA 94085			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/15/2024	Full name of contributor out-of-state PAC (ID#:_ Beer Alliance of Texas PAC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/53 Rpt: 7/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 05/25/2024	5 Full name of contributor out-of-state PAC (ID#:_ Bellayr, Lynn  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00
_	<u> </u>	Woodbridge, VA 22192				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 03/14/2024	Full name of contributor out-of-state PAC (ID#:_ Ben E. Keith Company Texas PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Fort Worth, TX 76102 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Berry, Barbra Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Salt Lake City, UT 88109 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/21/2024	Full name of contributor out-of-state PAC (ID#: Berwin, Gerard Contributor address; City; State; Zip Code  St Louis, MO 63109			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_Berzon, Judi  Contributor address; City; State; Zip Code  Oakland, CA 94602			Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/53 Rpt: 8/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 04/23/2024	5 Full name of contributor out-of-state PAC (ID#:_Blackridge 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5,000.00
_	<u> </u>	Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Breedlove, Scott Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Katy, TX 77449 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/01/2024	Full name of contributor out-of-state PAC (ID#:_ Breedlove, Scott  Contributor address; City; State; Zip Code  Katy, TX 77449			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ Brentwood Public Affairs  Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/10/2024	Full name of contributor out-of-state PAC (ID#:_ Brickell, Celia Contributor address; City; State; Zip Code  Mountain View, OK 73062			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTI	ON	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 6/53 Rpt: 9/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	n Filers)
4		<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$100.00
	Dringing Loon	Mountain View, OK 73062	٦	Employer (Co.s. Instructions	<u></u>		
8	Enumerator	pation / Job title (See Instructions)	9	Employer (See Instructions Census	5)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID: Bridgman, Sue  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$5.00
		Sun Valley, ID 83353					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID: Brinegar, John Contributor address; City; State; Zip Code	#:			Amount of Contribution (\$)	\$5.00
		Sutherlin, OR 97479					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID: Brinegar, John  Contributor address; City; State; Zip Code  Sutherlin, OR 97479		)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID: Britt, Briana  Contributor address; City; State; Zip Code  Dallas, TX 75206		)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u> S)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/53 Rpt: 10/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 06/27/2024	Full name of contributor		7	Amount of Contribution (\$)	\$5.00
_		Saaugerties, NY 91423				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Castaneda, Rodolfo Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77088 pation / Job title (See Instructions)	Employer (See Instructions	)		
	· 	, , ,	, , ,			
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_ Castillo, Rudy Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,700.00
		San Antonio, TX 78227				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self	)		
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_Cavender, Robert M. (Mr.)  Contributor address; City; State; Zip Code  San Antonio, TX 78212			Amount of Contribution (\$)	\$2,700.00
	Principal occu Auto Dealer	pation / Job title (See Instructions)	Employer (See Instructions Cavender Auto Group	)		
	Date 06/03/2024	Full name of contributor out-of-state PAC (ID#:_ Cencula, David Contributor address; City; State; Zip Code Painesville, OH 44077	)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/53 Rpt: 11/114	
2	FILER NAME	RNAME		3	Filer ID (Ethics Commission	n Filers)
	Gutierrez, R	rrez, Rolando (The Honorable)			00062485	
4	Date 05/18/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
		San Antonio, TX 78216				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor  ut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/24/2024	Church, Amy				\$5.00
		Contributor address; City; State; Zip Code				
		Lakemoor, IL 60051				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Clark, John Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		San Diego, CA 92128				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/06/2024	Full name of contributor out-of-state PAC (ID#:_ Clasper, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Cincinnati, OH 45215				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/21/2024	Full name of contributor out-of-state PAC (ID#:_ Cohen, C E			Amount of Contribution (\$)	\$100.00
		Contributor address; City; State; Zip Code  Westfield, NJ 07090				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 9/53 Rpt: 12/114
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Gutierrez, R	olando (The Honorable)		00062485
4	Date 05/10/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Coldiron, Ron</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$5.00
		Austin, TX 78731		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	)
	Date 06/01/2024	Full name of contributor out-of-state PAC (ID#:_ Coldiron, Ron Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$5.00
	Principal occu	Austin, TX 78731  upation / Job title (See Instructions)	Employer (See Instructions	)
	·	· · · · · · · · · · · · · · · · · · ·		
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_ Condit, John Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$3,300.00
		Boerne, TX 78006		
	Principal occu Real Estate	pation / Job title (See Instructions) Developer	Employer (See Instructions Foresight Asset Manage	
	Date 06/04/2024	Full name of contributor out-of-state PAC (ID#:_ Cooley, Jay Contributor address; City; State; Zip Code Tucson, AZ 85756		Amount of Contribution (\$) \$3.54
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_ Cramer, Hanni Contributor address; City; State; Zip Code  West Lafayette, IN 47906		Amount of Contribution (\$) \$100.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	

	MONET	ARY POLITICAL CONTRIB	SCHEDULE A1	
	The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 10/53 Rpt: 13/114
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Gutierrez, R	olando (The Honorable)		00062485
4	Date 05/18/2024	<ul> <li>Full name of contributor</li></ul>	PAC (ID#:)	7 Amount of Contribution (\$) \$5.00
		Aurora, CO 80017		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Date 01/18/2024	Full name of contributor X out-of-state F  DEC PAC  Contributor address; City; State; Zip Code	PAC (ID#: <u>C00354753</u>	Amount of Contribution (\$) \$2,000.00
		Oklahoma City, OK 73102		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Date 05/25/2024	Full name of contributor out-of-state F Daniels, Neville Contributor address; City; State; Zip Code	PAC (ID#:)	Amount of Contribution (\$) \$10.00
		Pittsboro, NC 27312		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Date 05/28/2024	Full name of contributor out-of-state F Donlan, Kathe Contributor address; City; State; Zip Code	PAC (ID#:)	Amount of Contribution (\$) \$50.00
		Hull, MA 02045		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Date 05/03/2024	Full name of contributor out-of-state F  Donovan, Carol  Contributor address; City; State; Zip Code	PAC (ID#:)	Amount of Contribution (\$) \$2,650.00
		Dallas, TX 75124		
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	(5)

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/53 Rpt: 14/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 05/03/2024	5 Full name of contributor out-of-state PAC (ID#:_ Donovan, Dan  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$650.00
0	Dringing oggu	Dallas, TX 75124 pation / Job title (See Instructions)	9 Employer (See Instructions			
8	Not Employe		Not Employed	)		
	Date 05/16/2024	Full name of contributor out-of-state PAC (ID#:_ Dorr, Maria Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Victoria, TX 77904  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/16/2024	Full name of contributor out-of-state PAC (ID#:_ Dorr, Maria  Contributor address; City; State; Zip Code  Victoria, TX 77904			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#:_ Dorr, Maria Contributor address; City; State; Zip Code  Victoria, TX 77904			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/29/2024	Full name of contributor out-of-state PAC (ID#:_ Driscoll, Jane  Contributor address; City; State; Zip Code  Austin, TX 78735	)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/53 Rpt: 15/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4		5 Full name of contributor out-of-state PAC (ID#:_ Duffy, Jeannie  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$5.00
_	Deignaignal annu	Gettysburg, PA 17325	O Familia var (Can Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_ Earl, David (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,300.00
	Delicational	San Antonio, TX 78216	Faralassa (Caralassa trastica)			
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions Earl & Associated, PC	)		
	Date 04/06/2024	Full name of contributor out-of-state PAC (ID#:_ Ebel, John Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Chelmsford, MA 01824				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/16/2024	Full name of contributor out-of-state PAC (ID#:_Edwards, Jim  Contributor address; City; State; Zip Code  Austin, TX 78716	)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Eisenbarth, William  Contributor address; City; State; Zip Code  Libertyville, IL 60048			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/53 Rpt: 16/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	ı Filers)
4	Date 05/30/2024	5 Full name of contributor  out-of-state PAC (ID#:_ Ellison, Sharon  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$10.00
_	Duinning Langu	Germantown, MD 20876	O Familia var (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 06/04/2024	Full name of contributor out-of-state PAC (ID#:_Ellison, Sharon  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Germantown, MD 20876 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#: Enatsky, Jules Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Jenkintown, PA 19046  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_Fairbanks, Donald  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$3.00
	Principal occu	Long Beach, CA 90805 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Ferreira, Valerie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 14/53 Rpt: 17/114
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Gutierrez, R	olando (The Honorable)		00062485
	Date 05/29/2024	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribution (\$) \$5.00
		Portland, OR 97202		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<b>(</b> )
	Date	Full name of contributor  ut-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	05/21/2024	Fluster, Barry		\$15.00
		Contributor address; City; State; Zip Code		
		Los Angeles, CA 90048		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b>(</b> )
	Date	Full name of contributor	)	Amount of Contribution (\$)
	04/23/2024	Focused Advocacy PAC  Contributor address; City; State; Zip Code		\$1,000.00
		Austin, TX 78701		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Foster, Brynda		Amount of Contribution (\$) \$10.00
		Contributor address; City; State; Zip Code		
		Novato, CA 94949		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
	Date	Full name of contributor	)	Amount of Contribution (\$)
1	05/25/2024	Fowler, Gordon		\$10.00
		Contributor address; City; State; Zip Code		
		Austin, TX 78704		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/53 Rpt: 18/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	ı Filers)
4	Date 05/15/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$10.00
		Ottawa, IL 61350				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_ Fukudome, Connie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Wellesley, MA 02482 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Furca, Susan Contributor address; City; State; Zip Code  Holladay, UT 84121			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Furca, Susan Contributor address; City; State; Zip Code Holladay, UT 84121			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/31/2024	Full name of contributor out-of-state PAC (ID#:_ Garritano, Dolores  Contributor address; City; State; Zip Code  Wilmington, DE 19810			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/53 Rpt: 19/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 04/30/2024	5 Full name of contributor out-of-state PAC (ID#:_ Gerstenfeld, Gerald 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$35.00
_	<u> </u>	Reseda, CA 91335				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/10/2024	Full name of contributor out-of-state PAC (ID#:_ Gibson, James Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Dringing age	Los Angeles, CA 90034	Employer (Co.) Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Gorfine, Paul Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Newton Centre, MA 02459				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Graham, Brenda Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
	Principal occu	Port Lavaca, TX 77979  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Greenberg, Nancy Contributor address; City; State; Zip Code Chicago, IL 60640	)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/53 Rpt: 20/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 04/30/2024	5 Full name of contributor out-of-state PAC (ID#:_ Greve, Carol  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00
_	Deinsinal	Kingwood, TX 77339	O Frankrije (Construction			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 04/28/2024	Full name of contributor out-of-state PAC (ID#:_ Grimm, Diana Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
	Principal occu	Roseville, CA 95747  upation / Job title (See Instructions)	Employer (See Instructions	)		
		,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		
	Date 04/11/2024	Full name of contributor out-of-state PAC (ID#:_ Guerra, Francisco Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$3,300.00
		San Antonio, TX 78212				
	Principal occu Capital Partr	pation / Job title (See Instructions) ner	Employer (See Instructions Guerra LLP	)		
	Date 06/27/2024	Full name of contributor out-of-state PAC (ID#:_ Gunz, Betty Contributor address; City; State; Zip Code Charlotte, NC 28209			Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Guthrie, Stewart Contributor address; City; State; Zip Code Boulder, CO 80301	)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/53 Rpt: 21/114	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Gutierrez, R	olando (The Honorable)			00062485	
4	Date 05/30/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Gutierrez, Patrick</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$5.00
		Fort Worth, TX 76116				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	04/30/2024	Harding, Genest				\$5.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640	_			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/09/2024	Harrington, Marilyn				\$25.00
		Contributor address; City; State; Zip Code				
	5: : 1	Boerne, TX 78015		Ĺ		
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/27/2024	Harrington, Marilyn				\$25.00
		Contributor address; City; State; Zip Code				
		Boerne, TX 78015				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/31/2024	Harrington, Miriam				\$27.00
		Contributor address; City; State; Zip Code				
		Arlington, VA 22203				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			<u> </u>			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/53 Rpt: 22/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4		5 Full name of contributor out-of-state PAC (ID#:_ Hausman, Harry  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$3,300.00
_		Helotes, TX 78023				
8	Owner	pation / Job title (See Instructions)	9 Employer (See Instructions Hausman Holdings	)		
	Date 03/28/2024	Full name of contributor out-of-state PAC (ID#:_ Healy, Monique Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Luray, VA 22835 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (See instructions)	Employer (See Instructions	,		
	Date 06/27/2024	Full name of contributor out-of-state PAC (ID#:_ Hebel, Donald Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$8.00
		Morrisdale, PA 16858				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_ Hebley, Sandi Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Dallas, TX 75230 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/24/2024	Full name of contributor out-of-state PAC (ID#:_ Hebley, Sandi Contributor address; City; State; Zip Code  Dallas, TX 75230			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/53 Rpt: 23/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 05/25/2024	5 Full name of contributor out-of-state PAC (ID#:_ Hensel, Nancy  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$10.00
_		Laguna Woods, CA 92637				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 06/25/2024	Full name of contributor out-of-state PAC (ID#:_ Hensel, Nancy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Laguna Woods, CA 92637 pation / Job title (See Instructions)	Employer (See Instructions	)		
	· ····o.pa ooda	panent cos and (cos menastro)		,		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Hernandez, Beverly Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
		Pflugerville, TX 78660				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_ Hernandez, Maria Contributor address; City; State; Zip Code Tomball, TX 77375			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Herrera, Cecilia (Mrs.)  Contributor address; City; State; Zip Code  San Antonio, TX 78232	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/53 Rpt: 24/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 04/03/2024	5 Full name of contributor out-of-state PAC (ID#:_ Herrera, Jorge  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,700.00
_	Dringing! goog	San Antonio, TX 78207	Constant (See Instructions			
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions Self	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Hill, Kathy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77058  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/18/2024	Full name of contributor out-of-state PAC (ID#:_Hill, Kathy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77058 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/19/2024	Full name of contributor out-of-state PAC (ID#:_ Hillhouse, Tizzy Contributor address; City; State; Zip Code  Alvin, TX 77511			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/19/2024	Full name of contributor out-of-state PAC (ID#:_ Hillhouse, Tizzy  Contributor address; City; State; Zip Code  Alvin, TX 77511			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	l	otal pages Schedule A1: 6ch: 22/53 Rpt: 25/114	
2	FILER NAME			3 F	iler ID (Ethics Commission	r Filers)
	Gutierrez, R	olando (The Honorable)		0	0062485	
4	Date 06/02/2024	<ul> <li>Full name of contributor</li></ul>		<b>7</b> A	mount of Contribution (\$)	\$5.00
		Aventura, FL 33180				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_		А	mount of Contribution (\$)	
	04/30/2024	Hines, James				\$5.00
		Contributor address; City; State; Zip Code				
		Colorado Springs, CO 80909				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_ Holm, Erling Contributor address; City; State; Zip Code			mount of Contribution (\$)	\$25.00
		League City, TX 77573				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Holt, Carol Contributor address; City; State; Zip Code		,	mount of Contribution (\$)	\$10.00
		Pittston, ME 04345				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	A	mount of Contribution (\$)	
	05/03/2024	Howard, Leon				\$25.00
		Contributor address; City; State; Zip Code				
		Tuscon, AZ 85715				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/53 Rpt: 26/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 04/30/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Hufnail, Mark</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$5.00
•	Dringing Loggy	Portland, OR 97202	D. Employer (See Instructions			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_ Hutson, Gail Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Amarillo, TX 79106 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occu	pation 7 300 title (See Instructions)	Employer (See instructions	,		
	Date 04/11/2024	Full name of contributor out-of-state PAC (ID#:_ Intech Southwest Services, LLC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,700.00
		San Antonio, TX 78240				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Jensen, Diana Contributor address; City; State; Zip Code  Derwood, MD 20855			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/08/2024	Full name of contributor out-of-state PAC (ID#:_ Johns, Elinor  Contributor address; City; State; Zip Code  Butte, MT 59701			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 24/53 Rpt: 27/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 05/18/2024	5 Full name of contributor out-of-state PAC (ID#:_ Johnson, Victoria  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$5.00
_		San Jose, CA 95111				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 03/30/2024	Full name of contributor out-of-state PAC (ID#:_ Jones, Daniel  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Castro Valley, CA 94552 pation / Job title (See Instructions)	Employer (See Instructions	)		
	i illopai occa	pation / vob title (oce monucions)	Employer (See mandenons	,		
	Date 05/19/2024	Full name of contributor out-of-state PAC (ID#: Jordache, Madeleine Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.07
		New York, NY 10022				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ Keffer Konsulting Contributor address; City; State; Zip Code  Eastland, TX 76448			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/08/2024	Full name of contributor out-of-state PAC (ID#:_Kellum, Daniel  Contributor address; City; State; Zip Code  San Antonio, TX 78212			Amount of Contribution (\$)	\$1,700.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions Kellum Physician Partne			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 25/53 Rpt: 28/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 05/29/2024	<ul><li>5 Full name of contributor</li><li>Key , Chloe</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: ; Zip Code	)	7	Amount of Contribution (\$)	\$5.00
8	Princinal occur	Seattle, WA 98168 pation / Job title (See Instructions)	la la	Employer (See Instructions			
Ü	Not Employe			Not Employed	,		
	Date 05/08/2024	Full name of contributor King, Marian Contributor address; City; State	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$50.00
		Bay Shore, NY 11706					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 06/04/2024	Full name of contributor King, Matt Contributor address; City; State	out-of-state PAC (ID#:; Zip Code	)		Amount of Contribution (\$)	\$3.00
		Puyallup, WA 98372					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor  Kirkland, Joseph  Contributor address; City; State  Huntsville, TX 77340				Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 05/18/2024	Full name of contributor  Klaassen, Ron  Contributor address; City; State  Tumwater, WA 98512	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
			L_				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/53 Rpt: 29/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 05/24/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Korn, Karen</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$150.00
8	Dringinal occu	New Orleans, LA 70131 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Not Employe		Not Employed	')		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Koutsky, Barbara Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Woodridge, IL 60517	1			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 06/25/2024	Full name of contributor out-of-state PAC (ID#:_ Koutsky, Barbara Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Woodridge, IL 60517				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_Kull, Veda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Rowlett, TX 75088  pation / Job title (See Instructions)	Employer (See Instructions	:)		
		·	, , ,			
	Date 05/19/2024	Full name of contributor out-of-state PAC (ID#:_ Kunzler, Vivian Contributor address; City; State; Zip Code  Manhattan, NY 10128			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 27/53 Rpt: 30/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 03/28/2024	5 Full name of contributor out-of-state PAC (ID#:_ Lamantia, Lauren  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00
_		Boerne, TX 78015				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Laux, Lucinda Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Flushing, MI 48433 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/19/2024	Full name of contributor out-of-state PAC (ID#:_ Layco, Gail Contributor address; City; State; Zip Code  Waipahu, HI 96797			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/26/2024	Full name of contributor out-of-state PAC (ID#:_ Liska, Collum Contributor address; City; State; Zip Code Olympia, WA 98501			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#:_ Locke, J M Contributor address; City; State; Zip Code East Carondelet, IL 62240			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/53 Rpt: 31/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	ı Filers)
4	Date 05/15/2024	Full name of contributor		7	Amount of Contribution (\$)	\$20.00
_	<u> </u>	Morehead City, NC 28557				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_Lomas, Priscilla  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Dringinal occu	San Antonio, TX 78253  pation / Job title (See Instructions)	Employer (See Instructions	·/_		
	r inicipal occu	pation / 300 title (See instructions)	Employer (See Instructions	•)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Louie, Edmund Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		San Francisco, CA 94121				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/12/2024	Full name of contributor out-of-state PAC (ID#:_ Lovato, Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Deire de al case	Portland, OR 97267	Frankrije (O. a. kratinski ara	$\overline{\Gamma}$		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/17/2024	Full name of contributor out-of-state PAC (ID#:_Lovato, Robert  Contributor address; City; State; Zip Code  Portland, OR 97267			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/53 Rpt: 32/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	n Filers)
4		Full name of contributor		7	Amount of Contribution (\$)	\$5.00
_		DeKalb, IL 60115	<u> </u>			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Marquez, Jaela Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1.00
	Principal occu	Phoenix, AZ 85044  upation / Job title (See Instructions)	Employer (See Instructions	)		
	i illoipai ooda	pation 7 oob title (eee motiuotione)	Employer (eee medacione	,		
	Date 05/02/2024	Full name of contributor out-of-state PAC (ID#:_ Martines, Linda Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Charles Town, WV 25414				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/02/2024	Full name of contributor out-of-state PAC (ID#:_ Martines, Linda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Charles Town, WV 25414  upation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (3ee instructions)	Employer (See Instructions	,		
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_Martinez, Dennis  Contributor address; City; State; Zip Code  San Antonio, TX 78212			Amount of Contribution (\$)	\$100.00
	Principal occu Tax Credit C	upation / Job title (See Instructions) Consultant	Employer (See Instructions DM Associates	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/53 Rpt: 33/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	n Filers)
4		<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Victoria, TX 77905 pation / Job title (See Instructions)	Employer (See Instructions	.)		
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	•)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_Mayer, Dale  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Deireire I e e e	Brookline, MA 02446	Faralousy (Co.) In the estimation			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_McKenna, Thomas  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Delcambre, LA 70528				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b>i)</b>		
	Date 06/27/2024	Full name of contributor out-of-state PAC (ID#: Michaelis, Mary Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$8.00
	Principal occu	Lawrence, KS 66047 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#:_Micket, Mary  Contributor address; City; State; Zip Code  Penfield, NY 14526			Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/53 Rpt: 34/114	
2	FILER NAME			3	Filer ID (Ethics Commission	r Filers)
	Gutierrez, R	olando (The Honorable)			00062485	
4	Date 06/04/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
		Houston, TX 77005				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 05/31/2024	Full name of contributor out-of-state PAC (ID#:_ Montano, Beth Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Waco, TX 76708  pation / Job title (See Instructions)	Employer (See Instructions	·,		
	Fillicipal occu	pation / 300 title (See Instructions)	Employer (See instructions	·)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#: Morrison, Scott Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Lacey, WA 98503				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/28/2024	Full name of contributor out-of-state PAC (ID#:_Morrison, Scott  Contributor address; City; State; Zip Code  Lacey, WA 98503			Amount of Contribution (\$)	\$20.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#: Musselman, Sherri Contributor address; City; State; Zip Code Fredericksburg, VA 22407			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> 5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/53 Rpt: 35/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 04/19/2024	5 Full name of contributor out-of-state PAC (ID#:_NRG Energy PAC 6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$3,000.00
_	Dringing Local	Princeton , NJ 08540	D. Employer (See Instructions			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_Nabors, Booker  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Dringing age	Burlington, NJ 08016	Employer (See Instructions			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/01/2024	Full name of contributor out-of-state PAC (ID#:_Nabors, Booker  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Burlington, NJ 08016				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Napolitano, Carolyn  Contributor address; City; State; Zip Code  Valley Village, CA 91607			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Newman, Harold Contributor address; City; State; Zip Code  Aventura, FL 33180			Amount of Contribution (\$)	\$5.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 33/53 Rpt: 36/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 05/30/2024	Full name of contributor		7	Amount of Contribution (\$)	\$5.00
_		Aventura, FL 33180				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_ Newman, Harold Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Aventura, FL 33180  upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#: Newman, Harold Contributor address; City; State; Zip Code Aventura, FL 33180			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/27/2024	Full name of contributor out-of-state PAC (ID#: Newman, Harold Contributor address; City; State; Zip Code  Aventura, FL 33180			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_Nichols, Robert  Contributor address; City; State; Zip Code  Cypress, TX 77429			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 34/53 Rpt: 37/114	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Gutierrez, R	olando (The Honorable)			00062485	
4	Date 05/07/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$27.00
		Clackamas, OR 97015				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
_	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	05/24/2024	North, Nancy				\$10.00
		Contributor address; City; State; Zip Code				
		Hinton, WV 25951				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	05/01/2024	NuStar PAC Contributor address; City; State; Zip Code			\$	52,500.00
		San Antonio, TX 78278				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/12/2024	Full name of contributor out-of-state PAC (ID#:_ Oliva, Ralph			Amount of Contribution (\$)	\$100.00
		Contributor address; City; State; Zip Code				
		Wesley Chapel, FL 33543				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/24/2024	Olivares, Juventino				\$25.00
		Contributor address; City; State; Zip Code				
		Lavon, TX 75166				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 35/53 Rpt: 38/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	ı Filers)
4	Date 06/04/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Olivares, Juventino</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$10.00
•	Dringing con	Lavon, TX 75166	0 Employer (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_Olson, Margit  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78723 pation / Job title (See Instructions)	Employer (See Instructions	)		
	- Timoipai coca	pation / cos the (ese metastions)	Employer (Geo met detions			
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Palomo, Julio Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
		Riverside, CA 92506				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Palomo, Julio Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Riverside, CA 92506 pation / Job title (See Instructions)	Employer (See Instructions	)		
	· 	,	. , (			
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Parmer, Gail Contributor address; City; State; Zip Code  Newton Square, PA 19073	)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 36/53 Rpt: 39/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commissio 00062485	n Filers)
4	Date 05/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ Paulsen, Debra  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00
_	<u> </u>	Victorville, CA 92394				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#:_ Peckham, Harry Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
	Principal occu	Rantoul, KS 66079 pation / Job title (See Instructions)	Employer (See Instructions	)		
	· ····o.pa ooda	panent cos and (cos men actions)		,		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Perez, Bobby Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$700.00
		San Antonio, TX 78212				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Perillo, Sandra  Contributor address; City; State; Zip Code  De Pere, WI 54115	)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Pirie, Cynthia Contributor address; City; State; Zip Code  Aurora, OH 44202	)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 37/53 Rpt: 40/114
2	FILER NAME Gutierrez, R	olando (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062485
4		5 Full name of contributor out-of-state PAC (ID#:_Quigley, John 6 Contributor address; City; State; Zip Code	)	7 Amount of Contribution (\$) \$5.00
		Lincoln, CA 95648		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Ramirez, Rene Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,200.00
	Deinsinal assu	Edinburg, TX 78539	Familia ya (Can Instructiona	
		upation / Job title (See Instructions) tal Affairs Consultnt	Employer (See Instructions Rene Ramirez & Associa	
	Date 02/19/2024	Full name of contributor out-of-state PAC (ID#:_ Reagan, William Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,000.00
		Salt Lake City, UT 84116		
	Principal occu President	ipation / Job title (See Instructions)	Employer (See Instructions Reagan Outdoor Adverti	
	Date 05/16/2024	Full name of contributor out-of-state PAC (ID#:_ Reiser, Amy Contributor address; City; State; Zip Code  Northampton, MA 01060		Amount of Contribution (\$) \$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
	Date 06/04/2024	Full name of contributor out-of-state PAC (ID#:_ Remer, David Contributor address; City; State; Zip Code  Spring Branch, TX 78070		Amount of Contribution (\$) \$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 38/53 Rpt: 41/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 04/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Reyher, Kevin  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$1,700.00
8	Principal occu	Helotes, TX 78023  pation / Job title (See Instructions)	9 Employer (See Instructions	<u>.</u>		
_	CEO	pation 7 oob title (occ instructions)	Initech	,		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Rios-Gonzalez, Ester Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Donna, TX 78537  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	· 	, ,	. , ,			
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Rivas, Gabriel Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.00
		Wildwood Crest, NJ 08260				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 05/12/2024	Full name of contributor out-of-state PAC (ID#:_ Rivers, Constance Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Galveston, TX 77550  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		, ,				
	Date 06/12/2024	Full name of contributor out-of-state PAC (ID#:_ Rivers, Constance Contributor address; City; State; Zip Code Galveston, TX 77550			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			,			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 39/53 Rpt: 42/114
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Gutierrez, R	olando (The Honorable)		00062485
4	Date 05/30/2024	Full name of contributor		7 Amount of Contribution (\$) \$5.00
		Cedar Park, TX 78613		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)
	Date 05/19/2024	Full name of contributor out-of-state PAC (ID#:_ Rockman, Judi	)	Amount of Contribution (\$) \$10.00
		Contributor address; City; State; Zip Code		
		Austin, TX 78723		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Rodriguez, Marc Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$3,300.00
		Austin, TX 78701		
		ipation / Job title (See Instructions) t Relations Consultant	Employer (See Instructions The Offices of Marc A. F	
	Date 05/31/2024	Full name of contributor out-of-state PAC (ID#:_ Rogers, Mary B Contributor address; City; State; Zip Code  Round Top, TX 78954		Amount of Contribution (\$) \$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
	Date 06/01/2024	Full name of contributor out-of-state PAC (ID#:_ Roman, Ivan Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 40/53 Rpt: 43/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 06/30/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$10.00
_	<u> </u>	Walton, NY 13856				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Russell, Elizabeth  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Duinning Langu	Medford, OR 97504	Faralous (Cool lastructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_Salinas, Fred  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
		Houston, TX 77027				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Sanders, Nancy Contributor address; City; State; Zip Code  Dallas, TX 75229			Amount of Contribution (\$)	\$2,000.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	)		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#:_Sanders, Nancy Contributor address; City; State; Zip Code  Dallas, TX 75229	)		Amount of Contribution (\$)	\$3,300.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 41/53 Rpt: 44/114	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 05/05/2024	5 Full name of contributor out-of-state PAC (ID#:_ Sanders, Roger  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$3,300.00
8	Principal occu	Dallas, TX 75229  spation / Job title (See Instructions)	9 Employer (See Instructions			
•	Not Employe		Not Employed	,		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_Schwartz, Gary  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	North Bend, WA 98045 spation / Job title (See Instructions)	Employer (See Instructions			
	T Illicipal occu	pation 7 sob title (See instituctions)	Employer (See mandenons	,		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_Schwartz, Gary  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		North Bend, WA 98045				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/09/2024	Full name of contributor out-of-state PAC (ID#:_ Schwartz, Gary Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	North Bend, WA 98045  upation / Job title (See Instructions)	Employer (See Instructions	)		
		, , , , , , , , , , , , , , , , , , ,	, , ,			
	Date 06/29/2024	Full name of contributor out-of-state PAC (ID#:_Schwartz, Gary  Contributor address; City; State; Zip Code  North Bend, WA 98045			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 42/53 Rpt: 45/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 05/24/2024	5 Full name of contributor out-of-state PAC (ID#:_ Settannni, Anne  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$5.00
_		Normal, IL 61761				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_Sheaks, Robert  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Irving, TX 75060 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Shrake, Anita Contributor address; City; State; Zip Code Henderson, NV 89012			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_Sibley, Carol  Contributor address; City; State; Zip Code  Wilmington, NC 28412			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Silverberg, Ava Contributor address; City; State; Zip Code Chatsworth, CA 91311			Amount of Contribution (\$)	\$2.50
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	)NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 43/53 Rpt: 46/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 05/30/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Silverberg, Ava</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$5.00
_	7: -:	Chatsworth, CA 91311	To the second of	Ĺ		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	.) 		
	Date 06/05/2024	Full name of contributor out-of-state PAC (ID#:_Smith, Barry  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Salt Lake City, UT 84124 upation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#:_ Snodgrass, Leisa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Alexandria, VA 22304 upation / Job title (See Instructions)	Employer (See Instructions	,)		
	Date 04/08/2024	Full name of contributor out-of-state PAC (ID#:_ Soni, Sandeep Contributor address; City; State; Zip Code  Atlanta, GA 30309			Amount of Contribution (\$)	\$3,300.00
	Principal occu Professor	upation / Job title (See Instructions)	Employer (See Instructions) Emory University	)		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_Stanley, Len  Contributor address; City; State; Zip Code  Durham, NC 27701			Amount of Contribution (\$)	\$10.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	ı	Total pages Schedule A1: Sch: 44/53 Rpt: 47/114	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Gutierrez, R	olando (The Honorable)			00062485	
4	Date 04/30/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
		Lockhart, TX 78644				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_ Stillman, Myrna Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$)	\$10.00
		Dallas, TX 75214				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 05/31/2024	Full name of contributor out-of-state PAC (ID#:_ Stone, Rhonda Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$)	\$50.00
		Tuscon, AZ 85718				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_ Strickler, Thomas Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	San Antonio, TX 78232 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Sullivan, Donald Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Mill Valley, CA 94941				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 45/53 Rpt: 48/114	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 01/25/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
_	Dein sin al a sau	Helotes, TX 78023	O Frankrije (Construction			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_ TalamantezLyburn, Sarah Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
	Principal occu	Baltimore, MD 21212 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Talley, Roger Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Salem, OR 97317 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/07/2024	Full name of contributor	)		Amount of Contribution (\$)	\$5.00
	Principal occu	Salem, OR 97317 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Taylor, Antoinette  Contributor address; City; State; Zip Code  Houston, TX 77006	)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 46/53 Rpt: 49/114	
2	FILER NAME	ILER NAME			Filer ID (Ethics Commission	on Filers)
	Gutierrez, R	olando (The Honorable)			00062485	
4	Date 05/29/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$5.00
		Houston, TX 77006				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	06/09/2024	Taylor, Antoinette				\$5.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	04/17/2024	Texas Automobile Dealers Association  Contributor address; City; State; Zip Code		•		\$2,500.00
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	*** *** ***
	04/23/2024	Texas Lobby Partners LLP				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	ıpation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	03/13/2024	Texas Trial Lawyers Association PAC				\$5,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 47/53 Rpt: 50/114	
2	FILER NAME Gutierrez, R	ER NAME tierrez, Rolando (The Honorable)			Filer ID (Ethics Commission 00062485	ı Filers)
4	Date 05/15/2024	Full name of contributor		7	Amount of Contribution (\$)	\$5.00
0	Dringing occur	San Ysidro, CA 92173	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_ Tovar, Raymond Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
	Principal occu	China Spring, TX 76633  pation / Job title (See Instructions)	Employer (See Instructions	)		
		,	, , , , , , , , , , , , , , , , , , , ,			
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Ulrey, Jan Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Del Mar, CA 92014				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#:_ Uram, Eileen Contributor address; City; State; Zip Code San Antonio, TX 78230			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/06/2024	Full name of contributor out-of-state PAC (ID#:_Valenzuela, Claudia  Contributor address; City; State; Zip Code  Chicago, IL 60626			Amount of Contribution (\$)	\$10.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Immigrant Legal Defens			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 48/53 Rpt: 51/114		
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	Filers)	
4	Date 05/15/2024	5 Full name of contributor	)	7	Amount of Contribution (\$)	\$25.00	
_	Daine in all a second	Baton Rouge, LA 70810	S. Faralana (Garalantina)				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Van Buskirk, Jeanine  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00	
	Principal occu	Baton Rouge, LA 70810  upation / Job title (See Instructions)	Employer (See Instructions				
	i illicipai occu	pation / sob title (see instructions)	Employer (See Instructions	')			
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Van Duyne, Tom Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00	
		Loveland, CO 80538					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)			
	Date 05/19/2024	Full name of contributor out-of-state PAC (ID#:_Vanhoutte, Barb  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00	
	Principal occu	San Antonio, TX 78258  upation / Job title (See Instructions)	Employer (See Instructions	<u>;</u> )			
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_Villanueva, Josephine  Contributor address; City; State; Zip Code  New Braunfels, TX 78130			Amount of Contribution (\$)	\$5.00	
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 49/53 Rpt: 52/114	
2	FILER NAME Gutierrez, R	FILER NAME Gutierrez, Rolando (The Honorable)			Filer ID (Ethics Commission 00062485	Filers)
4	Date 06/22/2024	5 Full name of contributor out-of-state PAC (ID#:_ Viveiros, George  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00
_		North Kingstown, RI 02852				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Vossenas, Pamela Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
	Principal occu	Jackson Heights, NY 11372 pation / Job title (See Instructions)	Employer (See Instructions	)		
	· 	,				
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#: Washington, Paulette Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		New York, NY 10029				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Webb, Larry Contributor address; City; State; Zip Code  Pollock Pines, CA 95726			Amount of Contribution (\$)	\$2.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Webb, Larry Contributor address; City; State; Zip Code  Pollock Pines, CA 95726			Amount of Contribution (\$)	\$2.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 50/53 Rpt: 53/114		
2	FILER NAME Gutierrez, R	Gutierrez, Rolando (The Honorable)			Filer ID (Ethics Commission 00062485	Filers)	
4	Date 05/16/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$5.00	
_		Longview, TX 75608					
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)			
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Wein, Linda Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00	
	Principal occu	Brookline, MA 02446  upation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_ Wein, Linda Contributor address; City; State; Zip Code  Brookline, MA 02446			Amount of Contribution (\$)	\$5.00	
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#:_ Weinberg, Dani Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00	
	Principal occu	Rio Rancho, NM 87124 spation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#: Weinberg, Dani Contributor address; City; State; Zip Code  Rio Rancho, NM 87124			Amount of Contribution (\$)	\$15.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 51/53 Rpt: 54/114		
2	FILER NAME Gutierrez, Rolando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)	
4	Date 05/09/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$5.00	
_	Deinainal agai	Berkeley, CA 94708	O Familia var (Coo la atrustia an				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)			
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Welsh, Wilbur Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00	
	Principal occu	Tuscon, AZ 85745  upation / Job title (See Instructions)	Employer (See Instructions				
	i illicipai occu	pation 7 sob title (see instructions)	Employer (See instructions	,			
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Westerlund, Trina Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00	
		Bellevue, WA 98004					
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$1,500.00	
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 52/53 Rpt: 55/114		
2	FILER NAME Gutierrez, Ro	FILER NAME Gutierrez, Rolando (The Honorable)			Filer ID (Ethics Commission 00062485	ı Filers)	
4	Date 05/18/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$5.00	
_	Daine in all account	Amarillo, TX 79119	2 Farely (Carly Instruction				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)			
	Date 06/05/2024	Full name of contributor out-of-state PAC (ID#:_ Williamson, Steve Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
	Principal occu	Davidson, NC 28036 pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#: Willis, Leland Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
	Principal occu	Spring, TX 77379 pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Workman, Margaret  Contributor address; City; State; Zip Code  Charleston, WV 25304	)		Amount of Contribution (\$)	\$25.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Wyatt, William Contributor address; City; State; Zip Code  Bedford, MA 01730			Amount of Contribution (\$)	\$10.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			

	MONET	TARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instru	ection Guide explains how to complete this	form.	1	pages Schedule A1: 53/53 Rpt: 56/114	
2	FILER NAME  Gutierrez, Rolando (The Honorable)			3 Filer I 0006	D (Ethics Commission 2485	n Filers)
4	Date 06/04/2024	Full name of contributor		<b>7</b> Amou	nt of Contribution (\$)	\$50.00
		Port Aransas, TX 78373				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#: Zimbelman, Steven  Contributor address; City; State; Zip Code  Valley Village, CA 91607	)	Amou	nt of Contribution (\$)	\$25.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		

### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

l	Credit Card Payment	The Instruction Guide explains how to complete this form.	,
1	Total pages Schedule F1:	2 FILER NAME 3 Fil	er ID (Ethics Commission Filers)
	Sch: 1/57 Rpt: 57/114	Gutierrez, Rolando (The Honorable)	0062485
4	Date	5 Payee name	
	03/31/2024	ActBlue Technical Services	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$11.47	PO Box 441146	
L		Somerville, MA 02144-0031	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	(T
	EXPENDITURE	Fees Check if travel outside of Check if Austin, TX, office	f Texas. Complete Schedule T. ceholder living expense
		Service Fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	OH Control of the Con	
	Date	Payee name	
	04/07/2024	ActBlue Technical Services	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2.19	PO Box 441146	
		Somerville, MA 02144-0031	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Check if Austin, TX, offic	f Texas. Complete Schedule T.
		Service Fee	scholder living expense
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	DH	
Г	Date	Payee name	
	04/28/2024	ActBlue Technical Services	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$3.95	PO Box 441146	
l			
		Somerville, MA 02144-0031	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Fees Check if travel outside of Check if Austin, TX, offic	f Texas. Complete Schedule T.
l		Service Fee	Seriolaer living expense
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
T			

### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/57 Rpt: 58/114	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	05/05/2024	ActBlue Technical Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.31	PO Box 441146
		Somerville, MA 02144-0031
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Service Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	05/12/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.10	PO Box 441146
		Somerville, MA 02144-0031
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Service Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	ł
F	Date	Payee name
	05/19/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$104.42	PO Box 441146
		Somerville, MA 02144-0031
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Service Fee
		Scivice i ce
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
ı		

### SCHEDULE F1

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

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/57 Rpt: 59/114	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	05/26/2024	ActBlue Technical Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$44.49	PO Box 441146
		Somerville, MA 02144-0031
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Service Fee
		Service Fee
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.19	PO Box 441146
		Somerville, MA 02144-0031
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Service Fee
_	Opening the ONII Wife discort	Occasional Office health and a second of the
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/09/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.19	PO Box 441146
		Somerville, MA 02144-0031
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	- <del>-</del>	Check if Austin, TX, officeholder living expense  Service Fee
		Service ree
	Complete ONLY if direct	Condidate/Officeholder name Office country
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

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

1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filer)	ers)
Sch: 4/57 Rpt: 60/114 Gutierrez, Rolando (The Honorable) 00062485	
4 Date 5 Payee name	
06/16/2024 ActBlue Technical Services	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$1.59 PO Box 441146	
Somerville, MA 02144-0031	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Fees Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense  Service Fee	
Scrvice i ee	
0 Complete ONLY if direct Condidate/Officeholder name Office cought Office hold	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
· · · · · · · · · · · · · · · · · · ·	
Date Payee name	
06/23/2024 ActBlue Technical Services	
Amount (\$) Payee address; City; State; Zip Code	
\$7.52 PO Box 441146	
Somerville, MA 02144-0031	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  (c) Check if travel outside of Taxes Complete Schedule Tax	
Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
Service Fee	
33.7766 7 66	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Days name	
Date Payee name  O6/20/2024 ActPlus Tochnical Sorvices	
06/30/2024 ActBlue Technical Services	
Amount (\$) Payee address; City; State; Zip Code	
\$10.35 PO Box 441146	
Somerville, MA 02144-0031	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Fees Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officenoider living expense	
Service Fee	
Operation ONLY if direct Constitute (Office helder manners Constitute in	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/57 Rpt: 61/114	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	01/12/2024	Adobe Creative Cloud
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.53	345 Park Ave
		San Jose, CA 95110
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Software
		Software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	01/22/2024	Adobe Systems Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.11	345 Park Avenue
		San Jose, CA 95110
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software
		Solitiais
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date 02/12/2024	Payee name
		Adobe Systems Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.53	345 Park Avenue
		San Jose, CA 95110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	-	Check if Austin, TX, officeholder living expense  Software
		Sultware
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

# SCHEDULE F1

Solicitation/Fundraising Expense

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

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

	zounung/Banking nsulting Expense ntributions/ Donations Made By - Candidate/Officeholder/Political C edit Card Payment	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel Out of District OTHER (enter a category not listed above)
Sch: 6/57 Rpt: 6/2/114		The Instruction Guide explains how to complete this form.	
Adobe Systems Inc.  Amount (\$) 7 Payee address; City; State; Zip Code  \$54.11 7 Payee address; City; State; Zip Code  \$4 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description			
Adobe Systems Inc.  7 Payee address; City; State; Zip Code  \$54.11  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office sought Office beld  Payee name Adobe Systems Inc.  Amount (\$)  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office sought Office held  Office held  Date O3/12/2024  Amount (\$)  Payee name San Jose, CA 95110  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Office held  Office held  (b) Description Office held  (c) Description Office held  Office Overhead/Rental Expense  Office Sought Office held  Office held  Office Overhead/Rental Expense  Office Sought Office held  Office held  Office held  Office held  Office held  Date Omplete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought Office held  Office held  Office held  Date Oardidate/Officeholder name Office sought Office held  Office held  Payee name Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code	e <b>5</b>	5 Pavee name	
\$54.11 345 Park Avenue  San Jose, CA 95110  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  9 Complete ONLY if direct expenditure to benefit C/OH  Date O3/12/2024 Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code  \$59.53 345 Park Avenue  San Jose, CA 95110  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name  Office Sought  Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software  Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name  Office Sought  Office Sought  Office held  Date ONLY if direct expenditure to benefit C/OH  Date Payee name Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code			
San Jose, CA 95110  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  9 Complete ONLY if direct expenditure to benefit C/OH  Date 03/12/2024 Adobe Systems Inc.  Amount (\$)  Purpose Office Overhead/Rental Expense  (a) Category (See Categories listed at the top of this schedule) Office Sought  Office sought Office held  (b) Description   Check if ravel outside of Texas. Complete Schedule T.	ount (\$) 7	Payee address; City; State; Zip Code	
Second   Complete	\$54.11	345 Park Avenue	
Office Overhead/Rental Expense  Office Overhead/Rental Expense  Office Sought  Office Sought  Office Held  Office Overhead/Rental Expense  Office Sought  Office Held  Offic		San Jose, CA 95110	
Purpose Office Overhead/Rental Expense    Candidate/Officeholder name   Office sought   Office held			
Date O3/12/2024 Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code San Jose, CA 95110  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date O3/21/2024 Adobe Systems Inc.  Candidate/Officeholder name Office sought Office held  Payee address; City; State; Zip Code San Jose, CA 95110  (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software  Complete ONLY if direct expenditure to benefit C/OH  Date Payee name Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code		Check if Austin, TX, (	·
Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code  \$59.53 345 Park Avenue  San Jose, CA 95110  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought Office held  Date Payee name  03/21/2024 Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code			Office held
Amount (\$) Payee address; City; State; Zip Code  \$59.53 345 Park Avenue  San Jose, CA 95110  PURPOSE OF CAPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Date Payee name  03/21/2024  Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code	e	Payee name	
\$59.53 345 Park Avenue  San Jose, CA 95110  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought Office held  Date O3/21/2024  Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code	12/2024	Adobe Systems Inc.	
San Jose, CA 95110  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought  Date O3/21/2024  Adobe Systems Inc.  Amount (\$)  Payee address; City; State; Zip Code  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software  Office sought Office held	ount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH  Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH  Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code	\$59.53	345 Park Avenue	
Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Date 03/21/2024  Amount (\$)  Payee address; City; State; Zip Code  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software  Office Sought  Office held  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software		San Jose, CA 95110	
EXPENDITURE  Office Overnead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Date  03/21/2024  Amount (\$)  Payee address; City; State; Zip Code	1,		
Date Payee name 03/21/2024 Adobe Systems Inc. Amount (\$) Payee address; City; State; Zip Code		Check if Austin, TX, of	
03/21/2024 Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code	•	Candidate/Officeholder name Office sought	Office held
O3/21/2024 Adobe Systems Inc.  Amount (\$) Payee address; City; State; Zip Code	e	Payee name	
	21/2024		
	ount (\$)	Payee address; City; State; Zip Code	
San Jose, CA 95110		San Jose, CA 95110	
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  Software	OF .	Office Overhead/Rental Expense Check if travel outsid	·
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			Office held
Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.d	nrovided by Tevas Eth	nics Commission www.ethics.state.tv.us	Version V4.1.0.d378aba

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/57 Rpt: 63/114	Gutierrez, Rolando (The Honorable)	00062485
4	Date	5 Payee name	
	04/12/2024	Adobe Systems Inc.	
6	Amount (\$) \$59.53	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
8	PURPOSE OF EXPENDITURE	1 Onice Overneda/Nerital Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	04/22/2024	Adobe Systems Inc.	
	Amount (\$) \$54.11	Payee address; City; State; Zip Code 345 Park Avenue	
		San Jose, CA 95110	
	PURPOSE OF EXPENDITURE	Office Overficad/Nertial Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
	Date 05/13/2024	Payee name Adobe Systems Inc.	
	Amount (\$) \$64.94	Payee address; City; State; Zip Code 345 Park Avenue	
		San Jose, CA 95110	
	PURPOSE OF EXPENDITURE	Onice Overhead/Nertal Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 8/57 Rpt: 64/114	Gutierrez, Rolando (The Honorable) 00062485
4 Date	5 Payee name
05/21/2024	Adobe Systems Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$54.11	345 Park Avenue
	San Jose, CA 95110
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/O	
Date	Payee name
06/12/2024	Adobe Systems Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$64.94	345 Park Avenue
	San Jose, CA 95110
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Software
	Sullware
Complete CAU V if dire-t	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Dete	
Date	Payee name
06/21/2024	Adobe Systems Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$54.11	345 Park Avenue
	San Jose, CA 95110
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
Di Libilone	Check if Austin, TX, officeholder living expense
	Software
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	<b>y</b>
,	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/57 Rpt: 65/114	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	01/01/2024	Alvarez, Cecilia
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	262 E Baetz Blvd
		San Antonio, TX 78221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Compaign contract labor
		Campaign contract labor
<u> </u>	0 1: 0:::::::::::::::::::::::::::::::::	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/20/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,521.95	7400 San Pedro Ave
		San Antonio, TX 78216
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office Supplies
		Cinic Supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/18/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,163.92	7400 San Pedro Ave
		San Antonio, TX 78216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Office Equipment
	Commission ONU Wife allows	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
<u> </u>	Tatalana O. I. I. T.			
1	Total pages Schedule F1:			
L	Sch: 10/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485		
4	Date	5 Payee name		
	04/18/2024	Apple Store		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$108.24	7400 San Pedro Ave		
	φ100.24	1700 Juli I Gulo AVC		
L		San Antonio, TX 78216		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		
	EAFENDITURE	Check if Austin, TX, officeholder living expense		
		Office Equipment		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	<del>'</del>		
H	Date	Davisa nama		
		Payee name		
	01/03/2024	Asana		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$143.80	633 Folsom St		
		San Francisco, CA 94107		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Software		
Т	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
H	Data	Davies name		
	Date	Payee name		
	02/05/2024	Asana		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$215.71	633 Folsom St		
		San Francisco, CA 94107		
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Office Overhead/Rental Expense  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Software		
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	03/04/2024	Asana
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$215.71	633 Folsom St
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software
		Soliware
<u> </u>	0 1. 0	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to benefit of or	
	Date	Payee name
	04/03/2024	Asana
	Amount (\$)	Payee address; City; State; Zip Code
	\$143.81	633 Folsom St
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Software
		Soliware
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2024	Barajas, Francisco
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	15022 Breezy Bend Dr
		San Antonio, TX 78217
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	1
1 Total pages Schedule F1: Sch: 12/57 Rpt:	2 FILER NAME Gutierrez, Rolando (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062485
•	
4 Date	5 Payee name
01/08/2024	Best Buy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$530.36	3142 SE Military Dr
	San Antonio, TX 78223
0 DUDDOCE	1
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Office Equipment
	Since Equipment
O Commission Chill V if all	Condidate/Officeholder name Office south
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
3.4.2	
Date	Payee name
04/30/2024	CCR Studios
Amount (\$)	Payee address; City; State; Zip Code
\$2,814.50	9501 Argyle
	<b>5</b>
	Aughin TV 70740
	Austin, TX 78749
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Advertising
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
3.,50.16.16.15 to bottom 0/01	
Date	Payee name
02/02/2024	Cavender Buick GMC West
Amount (\$)	Payee address; City; State; Zip Code
\$405.36	7400 TX-1604 Loop
	San Antonio, TX 78254
DUPPOSE	I
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Tayas, Complete Schedule T
EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign vehicle
	Sampaigh Tollioto
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
•	

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	02/02/2024	Cavender Buick GMC West
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$131.42	7400 TX-1604 Loop
		San Antonio, TX 78254
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense
		Campaigh vehicle
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Davies same
		Payee name
	01/11/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	1601 Trapelo Rd
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software
		Soliware
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 01/22/2024	Payee name  Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo Rd
		Waltham, MA 02451
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Software
		Solivale
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 14/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485	
4	Date	5 Payee name	_
	02/12/2024	Constant Contact	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$117.26	1601 Trapelo Rd	
	*==:		
		Waltham, MA 02451	
Ļ	DUDDOOF		_
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Software	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
	Date	Payee name	=
	02/20/2024	Constant Contact	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$79.95	1601 Trapelo Rd	
	******		
		Waltham, MA 02451	
	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Software	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	03/11/2024	Constant Contact	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$117.26	1601 Trapelo Rd	
		Waltham, MA 02451	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Software	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiulture to beliefft C/OI	1	

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	03/20/2024	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo Rd
		Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Software
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	04/11/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	1601 Trapelo Rd
	·	
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Software
_	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/22/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo Rd
		Waltham, MA 02451
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
ı		Check if Austin, TX, officeholder living expense
		Software
		Software
	Complete ONLY if direct	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

l	Credit Card Payment	The Instruction Guide explains how to complete this form.	,
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	n Filers)
l	Sch: 16/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485	
4	Date	5 Payee name	
	05/13/2024	Constant Contact	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$117.26	1601 Trapelo Rd	
		Waltham, MA 02451	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense  Software	
		Soltware	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
ľ	expenditure to benefit C/OI		
H	Date	Payee name	
	05/20/2024	Constant Contact	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$79.95		
	Ψ19.55	1001 Παρείο Να	
		Waltham MA 02451	
L	5,155,055	Waltham, MA 02451	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Software	
L			
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	experialitire to benefit C/Oi		
l	Date	Payee name	
	06/11/2024	Constant Contact	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$117.26	1601 Trapelo Rd	
l		Waltham, MA 02451	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
l		Software	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
H			
L			

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	06/20/2024	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo Rd
		Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software
		Soliware
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	04/22/2024	Courtyard by Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$347.89	207 N St Mary's St
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Lodging Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Lodging for campaign staff
		Loughly for campaign stan
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Davies same
	Date 06/14/2024	Payee name  Cross, Brett
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	243 Mulberry
		Uvalde, TX 78801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Gift/Awards/Memoria Legal Services	•		/ages	/Contract Labor		Travel Out of D OTHER (enter	District a category not listed above)
	·	_		The Instruction	Guide explains	how to co	mple	ete this form.	_		
1	Total pages Schedule F1:	2							3		(Ethics Commission Filers)
	Sch: 18/57 Rpt:		Gutierrez, F	Rolando (The H	Honorable)					00062485	
4	Date	5	Payee name								
	04/15/2024		Cross, Bret	t							
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de				
	\$1,250.00		243 Mulber	ry							
			Uvalde, TX	78801							
8	PURPOSE	(a)	Category (S	ee Categories listed a	t the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Contribution	ns/Donations N	/lade By			_ `	outsi	de of Texas. Co	mplete Schedule T.
	EAPENDITURE			Officeholder/Po		nittee		<b>—</b>	, TX,	officeholder livir	ng expense
								Donation			
9	Complete ONLY if direct		Candidate/Off	ceholder name		Office sou	ght		_	Office h	neld
L	expenditure to benefit C/OI	1									
	Date		Payee name								
	01/08/2024		Dallas Morr	ning News							
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de				
	\$23.40		1954 Comn	nerce St							
			Dallas, TX	75201							
	PURPOSE	(a)		ee Categories listed a		nedule)	(b)	Description			
	OF EXPENDITURE		Office Over	head/Rental E	xpense			<b>=</b>			mplete Schedule T.
								Newspaper s		officeholder livir	ng expense
								i ve vi spaper s	uus	Jonpuon	
_	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	(	Office sou	aht			Office h	neld
	expenditure to benefit C/OI		our la la de la	Sonoidor Hairie	`	e moo sou	9.11			J.1100 1	
	Date	Ι	Payee name								
	01/17/2024		Facebook								
		_		001 Cit ::	Ctat-	7 7 C -	de				
	Amount (\$)		Payee addre		State	; Zip Co	ue				
	\$900.00		1 Hacker W	ay							
			Menlo Park	, CA 94025							
	PURPOSE OF	(a)		ee Categories listed a	t the top of this sch	nedule)	(b)	Description			
	EXPENDITURE		Advertising	Expense				<u></u>			mplete Schedule T.
								Advertising	, IX,	officeholder livir	ng expense
								, wvertiality			
	Complete ONLY if direct	Щ	Candidate/Offi	ceholder name	(	Office sou	aht			Office h	neld
	expenditure to benefit C/OI		Janaraatt/OIII	oonolaci name	,	omoc sou	Airr			Office I	1010

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	· ·····
1	Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID (Ethics Comm	nission Filers)
	Sch: 19/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485	
4	Date	5 Payee name	
	01/24/2024	Facebook	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$900.00	1 Hacker Way	
		Menlo Park, CA 94025	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
		Check if Austin, TX, officeholder living expense  Advertising	
		Auvertising	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
ľ	expenditure to benefit C/OI		
$\vdash$	Date	Payee name	
	02/08/2024	Facebook	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$53.43		
	400.10	Thatas way	
		Menlo Park, CA 94025	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Advertising	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	·		
	Date	Payee name	
	02/08/2024	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$490.21	.   1 Hacker Way	
		M. J. D. J. 04 04005	
		Menlo Park, CA 94025	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Advertising	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	JH	

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	02/20/2024	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$900.00	1 Hacker Way
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Advertising
Ļ	0 1: 0:::::::::::::::::::::::::::::::::	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	·	
	Date	Payee name
	02/27/2024	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	1 Hacker Way
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Advertising
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/28/2024	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	1 Hacker Way
		Menlo Park, CA 94025
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Advertising
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment		The Instruction Guid	e explains how to co	omple	ete this form.		
1 Total pages Schedul	le F1: <b>2</b>	FILER NAME			3	Filer ID	(Ethics Commission Filers)
Sch: 21/57 Rpt	t:	Gutierrez, Rolando (The Hono	orable)			00062485	
4 Date	5	Payee name			<u> </u>		
02/29/2024		Facebook					
6 Amount (\$)	7	Payee address; City;	State; Zip Co	ode			
\$90	00.00	1 Hacker Way					
		Menlo Park, CA 94025					
8 PURPOSE	(6	a) Category (See Categories listed at the t	on of this schodulo)	(b)	Description		
OF	Ι`	Advertising Expense	op of this schedule)	<u> `</u> ´	Check if travel outsi	de of Texas. Comp	olete Schedule T.
EXPENDITURE		· ·			Check if Austin, TX,	officeholder living	expense
					Advertising		
9 Complete ONLY if di expenditure to benef		Candidate/Officeholder name	Office sou	ught		Office he	eld
Date		Payee name					
03/01/2024		Facebook					
Amount (\$)		Payee address; City;	State; Zip Co	ode			
\$90	00.00	1 Hacker Way					
		Menlo Park, CA 94025					
PURPOSE	(6	a) Category (See Categories listed at the t	op of this schedule)	(b)	Description		
OF EXPENDITURE		Advertising Expense			Check if travel outsi		
					Check if Austin, TX, Advertising	officeriolder living	expense
					, lavor tioning		
Complete ONLY if di	lirect	Candidate/Officeholder name	Office sou	<u>l</u> ught		Office he	eld
expenditure to benef				J			
Date		Payee name					
03/01/2024		Facebook					
Amount (\$)		Payee address; City;	State; Zip C	ode			
	00.00	1 Hacker Way	State, 2.p 3	-			
,		,					
		Menlo Park, CA 94025					
PURPOSE	1:			(h)	Description		
OF	"	<ul> <li>a) Category (See Categories listed at the the the the second secon</li></ul>	op of this schedule)	(5)	Check if travel outsi	de of Texas. Comp	olete Schedule T.
EXPENDITURE		Advertising Expense			Check if Austin, TX,	officeholder living	expense
					Advertising		
Complete ONLY if di expenditure to benef		Candidate/Officeholder name	Office sou	ught		Office he	eld
experialitie to bellet	0/011						

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

l	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		)
	Sch: 22/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485	
4	Date	5 Payee name	_
	03/04/2024	Facebook	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$900.00	1 Hacker Way	
		Menlo Park, CA 94025	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Advertising	
		Advertising	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
⊨	Data		_
	Date 03/04/2024	Payee name Facebook	
L			
	Amount (\$)	Payee address; City; State; Zip Code	
	\$900.00	1 Hacker Way	
L		Menlo Park, CA 94025	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Advertising	
		- Automoning	
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
F	Date	Payee name	_
	03/04/2024	Facebook	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$900.00	1 Hacker Way	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Menlo Park, CA 94025	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Advertising	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	Superiord to benefit 0/01		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	03/04/2024	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$900.00	1 Hacker Way
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Advertising
Ļ	Operation ONLY & Street	Occasional Office had been assessed to the contract of the con
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	03/04/2024	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	1 Hacker Way
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Advertising
		Advertising
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨		
	Date	Payee name
	01/26/2024	Farias, Katie
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1122 Par Four
		San Antonio, TX 78221
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Campaign contract labor
<u> </u>	Commission ONU V. M. alling .	Condidate (Office helder name
1	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
L		

#### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total names Schodule F1:	1
Ĺ	Total pages Schedule F1: Sch: 24/57 Rpt:	Gutierrez, Rolando (The Honorable)  00062485
4	Date	5 Payee name
	01/08/2024	Fly Away Jet Valet
6	Amount (\$) \$36.06	7 Payee address; City; State; Zip Code Terminal A, 9800 Airport Blvd San Antonio, TX 78216
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Transportation Equipment And Related  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense  Check if Austin, TX, officeholder living expense  Valet fee
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9	expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/11/2024	FormKeep
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
		Suite 708
		San Francisco, CA 94025
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software
		Soliward
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/12/2024	FormKeep
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
		Suite 708
		San Francisco, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Software
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	03/11/2024	FormKeep
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
		Suite 708
		San Francisco, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	-	Check if Austin, TX, officeholder living expense  Software
		Soliware
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/OI	
	Date	Payee name
	04/11/2024	FormKeep
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
	7-2-2-2	Suite 708
		San Francisco, CA 94025
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/13/2024	FormKeep
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
		Suite 708
		San Francisco, CA 94025
	PURPOSE	I ma
	OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Pental Expanse  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	T-+-1 C-l l-1 E1.	
1	Total pages Schedule F1: Sch: 26/57 Rpt:	2 FILER NAME Gutierrez, Rolando (The Honorable)  3 Filer ID (Ethics Commission Filers) 00062485
4	Date	5 Payee name
•	06/11/2024	FormKeep
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
		Suite 708
		San Francisco, CA 94025
		1
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Software
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2024	GM Financial
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,489.50	P.O. Box 78143
	Ψ1,409.50	F.O. Box 70143
		Phoenix, AZ 85062
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Campaign vehicle
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	02/14/2024	GM Financial
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,489.50	P.O. Box 78143
		Phoenix, AZ 85062
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Transportation Equipment And Related  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Campaign vehicle
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 27/57 Rpt: Gutierrez, Rolando (The Honorable) 00062485 4 Date Payee name 02/23/2024 **GM Financial** 6 Amount (\$) Payee address; City; State; Zip Code \$1,489.50 P.O. Box 78143 Phoenix, AZ 85062 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Campaign vehicle Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/27/2024 **GM Financial** Amount (\$) Payee address; City; State; Zip Code \$1,489.50 P.O. Box 78143 Phoenix, AZ 85062 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Campaign vehicle Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/18/2024 **GM Financial** Amount (\$) Payee address: City: State; Zip Code \$156.43 P.O. Box 78143 Phoenix, AZ 85062 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Campaign vehicle Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	05/15/2024	GM Financial
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,589.50	P.O. Box 78143
		Phoenix, AZ 85062
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related  Fxpense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Expense Lagrangian Check if Austin, TX, officeholder living expense  Campaign vehicle
		Campaign volucio
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/03/2024	GM Financial
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,489.50	P.O. Box 78143
		Phoenix, AZ 85062
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Expense La Check if Austin, TX, officeholder living expense  Campaign vehicle
		Campaign volucio
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	01/03/2024	Garcia, Christopher
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5814 Sugarberry
	Ψ1,000.00	3014 Sugarberry
		San Antonio, TX 78253
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
$\vdash$	•	
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#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	02/14/2024	Garcia, Christopher
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	5814 Sugarberry
		San Antonio, TX 78253
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign contract labor
		Campaign contract labor
_	Compulate ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
	·	
	Date	Payee name
	03/28/2024	Garcia, Christopher
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5814 Sugarberry
		San Antonio, TX 78253
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		☐ Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Pouce name
	04/10/2024	Payee name Garcia, Christopher
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5814 Sugarberry
		San Antonio, TX 78253
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign contract labor
		Campaign contract labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 30/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	04/30/2024	Garcia, Christopher
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	5814 Sugarberry
		San Antonio, TX 78253
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/Ol	
	Date	Dougo nama
	06/06/2024	Payee name Garcia, Christopher
	Amount (\$)	
	\$1,000.00	Payee address; City; State; Zip Code 5814 Sugarberry
	φ1,000.00	3014 Sugarberry
		Can Antonia TV 702E2
		San Antonio, TX 78253
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	01/16/2024	GoDaddy.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.31	14455 N. Hayden Rd
		Scottsdale , AZ 85260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZXI ZXIDITORZ	Check if Austin, TX, officeholder living expense
		Website hosting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

#### SCHEDULE F1

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

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

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

Credit Card Payment	The Instruction Guide explains how to o	omplete this form.	- · · · · · · · · · · · · · · · · · · ·	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission F	-ilers)
Sch: 31/57 Rpt:	Gutierrez, Rolando (The Honorable)		00062485	
4 Date	5 Payee name		-1	
01/22/2024	GoDaddy.com			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$36.16	14455 N. Hayden Rd			
	Scottsdale , AZ 85260			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense	Check if trav	rel outside of Texas. Complete Schedule T.	
LXI ENDITORE		ı —	stin, TX, officeholder living expense	
		Software		
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C		ugnı	Office field	
Data				
Date	Payee name			
02/16/2024	GoDaddy.com			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$21.31	14455 N. Hayden Rd			
	Scottsdale , AZ 85260			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense	l —	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense	
		Software	in, 17, onechouch hving expense	
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held	
expenditure to benefit C/C				
Date	Payee name			
03/18/2024	GoDaddy.com			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$21.31	14455 N. Hayden Rd			
	.,			
	Scottsdale , AZ 85260			
PURPOSE		(b) Description		
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description  Check if trav	rel outside of Texas. Complete Schedule T.	
EXPENDITURE	Office Overhead/Nertial Expense	Check if Aus	stin, TX, officeholder living expense	
		Software		
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held	
expenditure to benefit C/C	лп 			

#### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 32/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	04/16/2024	GoDaddy.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.31	14455 N. Hayden Rd
		Scottsdale , AZ 85260
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/16/2024	GoDaddy.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.31	14455 N. Hayden Rd
		·
		Scottsdale , AZ 85260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAI LIADITORE	Check if Austin, TX, officeholder living expense  Software
		Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>
	Date	Payee name
	06/17/2024	GoDaddy.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.31	14455 N. Hayden Rd
	,	
		Scottsdale , AZ 85260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Software
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 33/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	01/02/2024	Golando, Martin (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,000.00	2326 West Magnolia
		San Antonio, TX 78201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/10/2024	Golando, Martin (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	2326 West Magnolia
		San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Condidate/Officeholder name Office county Office hold
	expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/05/2024	Golando, Martin (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	2326 West Magnolia
		San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Operation Children	Open districts (Office the Island as a second as a sec
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 34/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	06/06/2024	Golando, Martin (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	2326 West Magnolia
		San Antonio, TX 78201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantare to benefit Great	
	Date	Payee name
	04/09/2024	Golando, Martin (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,250.00	2326 West Magnolia
		San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Operation ONLY if allowed	Open Helder (Office helder manner)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/02/2024	Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.13	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 35/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	01/02/2024	Google LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$405.53	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software
		Software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_		
	Date	Payee name
	02/02/2024	Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.45	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Software
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	02/02/2024	Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$437.49	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Software
	Operation ONE VIII II	Open Highest Office health are seen as the second to the s
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 36/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	03/04/2024	Google LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$99.45	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software
		Software
9	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
"	Complete ONLY if direct expenditure to benefit C/OI	
⊨		
	Date	Payee name
L	03/04/2024	Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$437.49	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Software
L	Commiste ONII V if diseast	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
┕		
	Date	Payee name
	04/02/2024	Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.45	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Software
$\vdash$	Complete ONLY if divert	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
L		
L		

#### SCHEDULE F1

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 37/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	04/02/2024	Google LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$395.13	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software
		Solivare
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	05/02/2024	Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.03	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software
		Solivare
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		
	Date	Payee name
	05/02/2024	Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$270.94	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Software
		Soliware
	0 1: 0 1: 0	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to com	nple	te this form.	
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 38/57 Rpt:	Gutierrez, Rolando (The Honorable)		00062485	
4	Date	5 Payee name		<u> </u>	
	06/03/2024	Google LLC			
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le		
	\$99.03	1600 Amphitheatre Pkwy			
		Mountain View, CA 94043			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.	
	-			Check if Austin, TX, officeholder living expense Software	
				Conware	
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held	
ľ	expenditure to benefit C/OI				
F	Date	Payee name			
	06/03/2024	Google LLC			
┝	Amount (\$)	Payee address; City; State; Zip Cod	le.		
	\$230.26	1600 Amphitheatre Pkwy			
	¥				
		Mountain View, CA 94043			
┝	PURPOSE		(b)	Description	
	OF	Office Overhead/Rental Expense	,	Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	·		Check if Austin, TX, officeholder living expense	
				Software	
L	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held	
	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
⊨	Date	Davies warms			
	01/25/2024	Payee name HCTRA			
┝	Amount (\$)	Payee address; City; State; Zip Cod	10		
	\$57.21	7701 Wilshire	ic		
	401.22	7702 ***********************************			
		Houston, TX 77040			
H	PURPOSE	· ·	'h)	Description	
	OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related	,	Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Expense		Check if Austin, TX, officeholder living expense	
				Toll fees	
L				200	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	nt	Office held	
dash					

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 39/57 Rpt:	Gutierrez, Rolando (The Honorable)	00062485		
4	Date	5 Payee name			
	01/01/2024	Hernandez, Andrew (Mr.)			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,000.00	12623 Mexican Plum			
	, ,				
		San Antonio, TX 78253			
8	PURPOSE		) Description		
°	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Salaries/ wages/Contract Labor	Check if Austin, TX, officeholder living expense		
			Campaign contract labor		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI	1			
	Date	Payee name			
	04/02/2024	Hill Country Springs Water			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$19.99	10019 IH 35 S			
		Austin, TX 78747			
-	PURPOSE		) Description		
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	2ee 2eeaa	Check if Austin, TX, officeholder living expense		
			Water for office		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
	experiantiale to belief of of	•			
	Date	Payee name			
	01/08/2024	Houston Chronicle			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$55.44	4747 Southwest Fwy			
		Houston, TX 77027			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITORE		Check if Austin, TX, officeholder living expense		
			Newspaper subscription		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
l					

#### SCHEDULE F1

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

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

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

6 Amount (\$)  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$2
4 Date 01/01/2024 5 Payee name Huerta, Sandra 6 Amount (\$) \$1,000.00 132 Ricardo St San Antonio , TX 78237  8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor  9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held
6 Amount (\$)  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$2
7 Payee address; City; State; Zip Code \$1,000.00 \$1,000.00  San Antonio , TX 78237  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor  9 Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held
\$1,000.00  132 Ricardo St  San Antonio , TX 78237  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor  9 Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held
San Antonio , TX 78237  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor  9 Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held
8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor  9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held
8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor  9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held
OF EXPENDITURE  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contract labor  9 Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held
Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Campaign contract labor  9 Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH
· · · · · · · · · · · · · · · · · · ·
Date Payee name
02/01/2024 Kovach Enterprises
Amount (\$) Payee address; City; State; Zip Code
\$2,500.00 8010 Aeromedical Rd
San Antonio, TX 78235
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description
OF EXPENDITURE  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense  Campaign contract labor
Can page contact tase
Complete ONLY if direct Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH
Date Payee name
01/03/2024 Kovach, Andrew
1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Amount (\$) Pavee address: City: State: Zin Code
Amount (\$) Payee address; City; State; Zip Code \$1.500.00 8010 Aeromedical Rd
Amount (\$) Payee address; City; State; Zip Code 8010 Aeromedical Rd
\$1,500.00 8010 Aeromedical Rd
\$1,500.00 8010 Aeromedical Rd  San Antonio, TX 78235
\$1,500.00 8010 Aeromedical Rd  San Antonio, TX 78235  PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
\$1,500.00 8010 Aeromedical Rd  San Antonio, TX 78235  PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
\$1,500.00 8010 Aeromedical Rd  San Antonio, TX 78235  PURPOSE OF Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T.
\$1,500.00  8010 Aeromedical Rd  San Antonio, TX 78235  PURPOSE OF Salaries/Wages/Contract Labor  (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
\$1,500.00  8010 Aeromedical Rd  San Antonio, TX 78235  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held
\$1,500.00  8010 Aeromedical Rd  San Antonio, TX 78235  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
\$1,500.00  8010 Aeromedical Rd  San Antonio, TX 78235  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held

#### SCHEDULE F1

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 41/57 Rpt:	Gutierrez, Rolando (The Honorable)	00062485
4	Date	5 Payee name	
	03/09/2024	Kovach, Andrew	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	8010 Aeromedical Rd	
		San Antonio, TX 78235	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Galaries/Wages/Goritraet Eabor	I outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense Ontract labor
		Campaigne	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	05/05/2024	Kristian Carranza Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	PO Box 831436	
	• •		
		San Antonio, TX 78283	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made by	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Donation	ii, iii, oincerolaer iiviiig expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	01/02/2024	Light, Donald	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,000.00	3714 Shimmering Dawn St	
		San Antonio, TX 78253	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Eabor	l outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense Ontract labor
		Campaign	Shir dot labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	<b>9</b>	

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction			Nages	s/Contract Labor			R (enter a	a category not listed at	oove)
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer	ID	(Ethics Commiss	sion Filers)
	Sch: 42/57 Rpt:			Rolando (Th	e Honoral	ble)				0006	52485		
4	Date	5	Payee name	!									
	04/08/2024		Light, Dona	ald									
6	Amount (\$)	7	Payee addre	ess; City;		State; Zip Co	ode						
l	\$7,000.00		3714 Shim	mering Dawı	n St								
l													
			San Antoni	o, TX 78253									
8	PURPOSE	(a)	Category (S	ee Categories list	ed at the top of	f this schedule)	(b)	Description					
	OF EXPENDITURE		Salaries/W	ages/Contra	ct Labor							nplete Schedule T.	
								Campaign co				g expense	
								Campaign co	ווווו	act ia	iboi		
Ļ	Complete ONLY if direct	<u> </u>	20 m di doto / Off	:  -		Office					74: h	ماما	
9	Complete ONLY if direct expenditure to benefit C/OI		Januluale/On	iceholder nan	ie	Office sou	ıgnı			,	Office h	eiu	
F	Date	Π	Payee name										
	01/08/2024		Makan Hal										
┝	Amount (\$)	$\vdash$	Payee addre	ess; City;		State; Zip Co	ode						
	\$25.94		•	ericksburg R	d								
	<del>+</del> 20.0 .				<b>.</b>								
			San Antoni	o, TX 78229	ı								
	PURPOSE	(a)	Category (S	ee Categories list	ed at the top of	f this schedule)	(b)	Description					
l	OF EXPENDITURE		Food/Beve	rage Expens	se							nplete Schedule T.	
l								Check if Austin		, omcen	older living	g expense	
								Jun meeting	1				
┝	Complete ONLY if direct		Candidate/Off	iceholder nan	ne	Office sou	<u>l</u> ıght				Office h	eld	
	expenditure to benefit C/OI	Н					•						
F	Date		Payee name	·									
	01/01/2024		Medina, Ya										
H	Amount (\$)	H	Payee addre	ess; City;		State; Zip Co	ode						
	\$500.00		10415 Colv	-		. ,							
l													
			San Antoni	o, TX 78002									
Г	PURPOSE	(a)	Category (5	see Categories list	ed at the top of	f this schedule)	(b)	Description					
l	OF EXPENDITURE			ages/Contra		,		Check if travel	outs	ide of Te	exas. Com	nplete Schedule T.	
l	EXPENDITURE							Check if Austin				g expense	
								Campaign co	ontr	act la	bor		
L	Operated ONE VIII	L	D			0‴					D#:- '	-1-1	
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Off	iceholder nan	ie	Office sou	ıgnt			(	Office h	eid	
L													
l													

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to com	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 43/57 Rpt:	Gutierrez, Rolando (The Honorable)		00062485
4	Date	5 Payee name		•
	06/10/2024	NGPVAN, Inc.		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$4,455.88	1445 New York Ave. NW		
L		Washington, DC 20005		
8	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Software
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht	Office held
	experialiture to beriefft C/O	1		
	Date	Payee name		
L	06/13/2024	NGPVAN, Inc.		
l	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$1,439.10	1445 New York Ave. NW		
		Washington, DC 20005		
	PURPOSE OF	,	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Software
L				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht	Office held
	experialitate to belieff 6/01	1		
	Date	Payee name		
	01/24/2024	NTTA	_	
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$37.76	PO Box 260928		
		Diana TV 75026		
	DUDDOOF	Plano, TX 75026	71- \	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related	(a)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense		Check if Austin, TX, officeholder living expense
				Toll fees
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ht	Office held
L	p = 1 3.5.2 12 13.10.10 17.01			

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide explains how	to comp	olete this form.				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID	(Ethics Commission Filers)	
	Sch: 44/57 Rpt:		Gutierrez, Rolando (The Honorable)				00062485		
4	Date	5	Payee name						_
	01/24/2024		NTTA						
6	Amount (\$)	7	Payee address; City; State; Zip	Code	)				_
	\$143.13		PO Box 260928						
			Plano, TX 75026						
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(h	Description				_
	OF	```	Transportation Equipment And Related	'   '		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Expense		Check if Austin,	TX,	officeholder living	j expense	
					Toll fees				
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office	sough	it		Office he	eld	
	experiorarie to berieff C/O								
	Date		Payee name						
	01/30/2024		NTTA						
Г	Amount (\$)		Payee address; City; State; Zip	Code	?				_
	\$40.00	0 PO Box 260928							
			Plano, TX 75026						
Н	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	Description				_
	OF EXPENDITURE		Transportation Equipment And Related		Check if travel of		de of Texas. Com		
	EXPENDITORE		Expense			TX,	officeholder living	g expense	
					Toll fee				
L	Operation ONLY & Street	<u>L</u>	Out distance (Office In Indian Incident				Off: 1	-1.4	_
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office	sough	ıı		Office he	eid	
⊨		_							_
	Date		Payee name						
	02/09/2024		NTTA						
	Amount (\$)		Payee address; City; State; Zip	Code	9				
	\$40.00		PO Box 260928						
L			Plano, TX 75026						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b	Description				
	EXPENDITURE		Transportation Equipment And Related		<b>=</b>		de of Texas. Com officeholder living		
			Expense		Toll fees	17,	onicendider living	у ехрепае	
$\vdash$	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office	sough	ıt		Office he	eld	_
	expenditure to benefit C/OI			911			200 //0		
$\vdash$									_
<u>L</u>									

#### SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services Salaries  The Instruction Guide explains how to c	oTHER (enter a category not listed above)  complete this form.
1 Total pages Schedule F1: 2 FILER I	NAME	3 Filer ID (Ethics Commission Filers)
· · ·	ez, Rolando (The Honorable)	00062485
4 Date 5 Payee i	name	
02/20/2024 NTTA		
6 Amount (\$) 7 Payee a	address; City; State; Zip C	Code
\$40.00 PO Bo	x 260928	
Plano,	TX 75026	
8 PURPOSE (a) Categor	(See Categories listed at the top of this schedule)	(b) Description
I EVEENDITURE I :	ortation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.
Expens	Se Se	Check if Austin, TX, officeholder living expense  Toll fees
		Tollitees
	10111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
9 Complete <u>ONLY</u> if direct Candidat expenditure to benefit C/OH	e/Officeholder name Office so	ought Office held
Date Payee i	name	
02/22/2024 NTTA		
Amount (\$) Payee a	address; City; State; Zip C	Code
\$46.17 PO Bo	x 260928	
Plano,	TX 75026	
PURPOSE (a) Catego	(See Categories listed at the top of this schedule)	(b) Description
	ortation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.
Expens	Se Se	Check if Austin, TX, officeholder living expense  Toll fees
		Toll lees
Occasional CNU V if align at a Countillate	Office and all an arrangement of the second	Office held
Complete <u>ONLY</u> if direct Candidat expenditure to benefit C/OH	e/Officeholder name Office so	ought Office held
Date Payee i	name	
03/26/2024 NTTA		
Amount (\$) Payee a	address; City; State; Zip C	Code
\$3.38 PO Bo	x 260928	
Plano,	TX 75026	
PURPOSE (a) Catego	Ty (See Categories listed at the top of this schedule)	(b) Description
OF Transp	ortation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.
ο <b>Γ</b> Ι΄΄ ΄	ortation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
OF Transp	ortation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.
OF Transp EXPENDITURE Expens	ortation Equipment And Related se	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Toll fees
OF EXPENDITURE  Transp Expens  Complete ONLY if direct  Candidat	ortation Equipment And Related	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Toll fees
OF Transp EXPENDITURE Expens	ortation Equipment And Related se	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Toll fees
OF Transp Expenditure  Complete ONLY if direct  Candidate	ortation Equipment And Related se	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Toll fees

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Frinting Expense
Salaries/Wangs/Contract Labor

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 46/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	01/03/2024	Prestige Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,071.68	8 Burwood Ln
		San Antonio, TX 78216
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Printing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/03/2024	Prestige Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,172.35	8 Burwood Ln
	, ,	
		San Antonio, TX 78216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense  Printing
		Finding
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	04/30/2024	Preston, Rudy
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	3440 Hyacinth St
		Eugene, OR 97404
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cabadula F1:	1
1	Total pages Schedule F1:	
L	Sch: 47/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	04/13/2024	Progressive Auto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$854.00	15000 W Interstate 10
	φου-1.00	10000 W Interstate 10
		0 4 4 5 70 700 10
		San Antonio, TX 78249
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense
		Campaign vehicle
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experiorale to belieff C/OI	
	Date	Payee name
	03/26/2024	RMA Toll Processing
	Amount (\$)	Payee address; City; State; Zip Code
	\$22.16	P.O. Box 734182
	Ψ <i>LL</i> .10	
		Dallas TV 75070
		Dallas, TX 75373
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Toll fees
		Toll lees
<u> </u>	Operation ONE VALUE II	Overfildsta 10ff and a little and a second to the second t
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	03/27/2024	RMA Toll Processing
	Amount (\$)	Payee address; City; State; Zip Code
	\$70.31	P.O. Box 734182
		Dallas, TX 75373
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel sutside of Taxes Complete Schedule T
	EXPENDITURE	Transportation Equipment And Related    Check if travel outside of Texas. Complete Schedule T.   Check if Austin, TX, officeholder living expense
		Expense Check if Austin, TX, officeholder living expense  Toll fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 48/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	01/03/2024	Restream
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.00	515 Congress Ave
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>-</del>
	Date	Payee name
	02/05/2024	Restream
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.00	515 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Davies same
	03/04/2024	Payee name Restream
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.00	515 Congress Ave
	Ψ19.00	313 Congress Ave
		Austin, TX 78701
	PURPOSE	Tu.
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Software
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	oxperialitate to beliefit 6/01	•

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 49/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	04/03/2024	Restream
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.00	515 Congress Ave
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software
		Soliware
_	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/03/2024	Restream
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.00	515 Congress Ave
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software
		Software
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/03/2024	Restream
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.00	515 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Software
_	Complete ONU V & direct	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_		

#### SCHEDULE F1

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 50/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485
4 Date	5 Payee name
05/08/2024	Rey Feo Scholarship Foundation
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 626 Ave E San Antonio, TX 78215
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/22/2024	Rise 4U
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 243 Mulberry
	Uvalde, TX 78801
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date 05/12/2024	Payee name Southwest Airlines
Amount (\$) \$765.96	Payee address; City; State; Zip Code 2702 Love Field Dr
	Dallas, TX 75235
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description    Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense     Travel Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarias/Magas/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 51/57 Rpt: Gutierrez, Rolando (The Honorable) 00062485 4 Date Payee name 01/08/2024 Spectrum 6 Amount (\$) Payee address; State; Zip Code \$158.81 3151 SE Military Dr San Antonio, TX 78223 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Internet service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/08/2024 Spectrum Amount (\$) Payee address; City; State; Zip Code \$158.81 3151 SE Military Dr San Antonio, TX 78223 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Internet service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/08/2024 Spectrum Amount (\$) Payee address; City: State; Zip Code \$160.83 3151 SE Military Dr San Antonio, TX 78223 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Internet service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

Advertising Expense Accounting/Banking Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense		pense ages/	Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		
1	Total pages Schedule F1:								Filer ID	(Ethics Commission File	rs)
	Sch: 52/57 Rpt:	Gutierrez,	Rolando (The Hor	norable)					00062485		
4	Date	5 Payee nam	е								
	04/08/2024	Spectrum									
6	Amount (\$)	<b>7</b> Payee addr		State;	Zip Co	de					
	\$160.83	3151 SE N	Military Dr								
		Cor. Arad	i. TV 70000								
	DUDDOCE		nio, TX 78223		Г	/b\	<u> </u>				
8	PURPOSE OF		See Categories listed at the erhead/Rental Expe		edule)	(a) I	Description  Check if travel of	outsio	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Onice Ove	meau/Rentai Expe	511 <b>5</b> C		i	<b>=</b>		officeholder living		
							Internet servi	се			
9	Complete ONLY if direct expenditure to benefit C/Oh		fficeholder name	0	Office sou(	ght			Office he	eld	
	Date	Payee nam	e								
	05/08/2024	Spectrum									
	Amount (\$)	Payee addr	ess; City;	State;	Zip Cod	de					
	\$160.83	3151 SE N	/lilitary Dr								
		San Antor	nio, TX 78223								
	PURPOSE	(a) Category	See Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		erhead/Rental Expe			ļ	<u>—</u>			plete Schedule T.	
							Internet servi		officeholder living	j expense	
	Complete ONLY if direct	Candidate/O	fficeholder name	0	Office souç	ght			Office he	eld	
	expenditure to benefit C/OH	4									
	Date	Payee nam	e								
	06/10/2024	Spectrum									
	Amount (\$)	Payee addr	ress; City;	State;	Zip Cod	de					
	\$160.83	3151 SE N	Military Dr								
		San Antor	nio, TX 78223								
	PURPOSE	(a) Category	See Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		erhead/Rental Expe			ļ	<b>_</b>			plete Schedule T.	
						Į.	Check if Austin, Internet servi		officeholder living	g expense	
							michiet 361VII				
	Complete ONLY if direct	Candidate/O	fficeholder name	Ω	Office soug	aht			Office he	eld	
	expenditure to benefit C/Oh		3	0	554	J •			200 110		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment						
		· · · · · · · · · · · · · · · · · · ·					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 53/57 Rpt:	Gutierrez, Rolando (The Honorable)	00062485				
4	Date	5 Payee name					
	01/10/2024	Squarespace					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$35.18	459 Broadway					
		New York , NY 10013					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overficad/Nertial Experise	el outside of Texas. Complete Schedule T.				
		Software	tin, TX, officeholder living expense				
		Soliware					
Ļ	Complete ONU V if alice	Condidate/Officeholder name	Office hold				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/29/2024	Squarespace					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$24.52	459 Broadway					
		New York , NY 10013					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Office Overficad/Nertial Experise	el outside of Texas. Complete Schedule T.				
		Software	tin, TX, officeholder living expense				
		Software					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O		Office field				
_							
	Date	Payee name					
	02/12/2024	Squarespace					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$35.18	459 Broadway					
		New York , NY 10013					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overficad/Nertial Experise   L	el outside of Texas. Complete Schedule T.				
		l —	tin, TX, officeholder living expense				
		Software					
_	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		200				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held				
	experience to belieff 6/01	·•					
	rms provided by Tevas F	thics Commission www.athics state ty us	Version V// 1.0 d278aha0				

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment		The Instruction Guide explains how to co	omple	te this form.	
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID	(Ethics Commission Filers)
	Sch: 54/57 Rpt:		Gutierrez, Rolando (The Honorable)		0006248	5
4	Date	5	Payee name		•	
	02/29/2024		Squarespace			
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode		
	\$24.52		459 Broadway			
			New York , NY 10013			
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. C	
					Software	ving expense
9	Complete ONLY if direct		Candidate/Officeholder name Office sou	l Jaht	Office	e held
	expenditure to benefit C/O			3		
_	Date	Π	Payee name			
	03/11/2024	1	Squarespace			
	Amount (\$)	₩	Payee address; City; State; Zip Co	ode		
	\$35.18	1	459 Broadway			
	, , , , ,					
			New York , NY 10013			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
	EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. C	
					Software	vilig expense
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ught	Office	e held
	expenditure to benefit C/OI	Н				
	Date		Payee name			
	03/29/2024	1	Squarespace			
	Amount (\$)		Payee address; City; State; Zip Co	ode		
	\$24.52	1	459 Broadway			
			New York , NY 10013			
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. 0	
	LAI LINDITORE				Check if Austin, TX, officeholder li	ving expense
					Software	
	Complete ONLY if direct	Ļ	Candidate/Officeholder name Office sou	ıabt	Office	e held
	expenditure to benefit C/O		on an anathra control of the solution of the s	agrit	Office	, notu
l						

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

l	Credit Card Payment	The Instruction Guide explains how to comp	olete this form.
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
L	Sch: 55/57 Rpt:	Gutierrez, Rolando (The Honorable)	00062485
4	Date	5 Payee name	
	04/10/2024	Squarespace	
6	Amount (\$) \$35.18	7 Payee address; City; State; Zip Code 459 Broadway	
		New York , NY 10013	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	t Office held
	Date	Payee name	
	04/29/2024	Squarespace	
	Amount (\$) \$24.52	Payee address; City; State; Zip Code 459 Broadway	
		New York , NY 10013	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Software
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
Г	Date	Payee name	
l	05/10/2024	Squarespace	
	Amount (\$) \$35.18	Payee address; City; State; Zip Code 459 Broadway	
		New York , NY 10013	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Final Services Salaries/Manes/Contract Labor

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
ᆫ	· 	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File)	ers)
	Sch: 56/57 Rpt:	Gutierrez, Rolando (The Honorable) 00062485	
4	Date	5 Payee name	
	05/29/2024	Squarespace	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$24.52	459 Broadway	
		New York , NY 10013	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Software	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	H	
F	Date	Payee name	
	06/10/2024	Squarespace	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$35.18	459 Broadway	
		New York , NY 10013	
L	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Software	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	H	
F	Date	Payee name	
	04/02/2024	Tiscareno, Jorge	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$550.00	411 Huron St	
	φ550.00	411 Hullon St	
		0 . A TV 70044	
		San Antonio, TX 78211	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Campaign contract labor	
		Campaign contract tabor	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
$\vdash$			
1			

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete t	this form.
1	Total pages Schedule F1: Sch: 57/57 Rpt:	2 FILER NAME Gutierrez, Rolando (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062485
4	Date 01/05/2024	5 Payee name Twilio	
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 101 Spear St  San Francisco, CA 94105	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	escription  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  oftware
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 06/24/2024	Payee name Twitter	
	Amount (\$) \$90.72	Payee address; City; State; Zip Code 1355 Market St #900 San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Advertising Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Elvertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 01/08/2024	Payee name Westin Riverwalk	
	Amount (\$) \$667.95	Payee address; City; State; Zip Code 420 W Market St	
		San Antonio, TX 78205	
	PURPOSE OF EXPENDITURE	Lodging	escription  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense odging for staff
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCI		

The Instruction Guide explains how to complete this form.				Total pages Schedule T: Sch: 1/1 Rpt: 114/114
2 FILER NAME			3	Filer ID (Ethics Commission Filers)
Gutierrez, Rolan	do (The H	onorable)		00062485
4 Name of Contribut	or / Corpora	ation or Labor Organization / Pledgor /Payee	•	
Southwest Airlin	es			
5 Contribution / Expe	enditure rep	orted on:		
Schedule A2		Schedule B Schedule B(J) Schedule C2		Schedule D X Schedule F1
Schedule F2		Schedule F4 Schedule G Schedule H		Schedule COH-UC
6 Dates of Travel	7 Name	of person(s) traveling		
	I	rez, Roland		
	8 Depart	ure city or name of departure location		
05/12/2024	San A			
	9 Destina	ation city or name of destination location		
05/12/2024	Dallas			
<b>10</b> Means of transpor	tation	11 Purpose of travel (including name of conference, seminar,	or oth	er event)
Commercial Airp	lane	Meeting with supporters		
				,
				,
				,