#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00067895 42 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Luz Elena D. NAME Date Received **ELECTRONICALLY FILED** 10/28/2024 NICKNAME LAST **SUFFIX** Chapa CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** The Honorable Leticia NAME NICKNAME LAST **SUFFIX** Van de Putte **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 854-6604 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 09/27/2024 10/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

**GO TO PAGE 2** 

Court Of Appeals, Justice Place 4 District 4

Court Of Appeals, Justice Place 4 District 4

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Chapa, Luz Elena D.	(The Honorable)	<b>14</b> Filer ID 00067895	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political These expenditures may have been ma officeholders are required to report this	de without the candidate's or office	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURE	R NAME			
		COMMITTEE CAMPAIGN TREASURE	R ADDRESS			
40 CONTRIBUTION	1. TOTAL UNITEM	ZED DOUGLOAL CONTRIBUTIONS OF				
16 CONTRIBUTION TOTALS	HER THAN PLEDGES, LOANS, MADE ELECTRONICALLY)	\$ 0.00				
	\$ 60,811.06					
EXPENDITURE TOTALS						
	\$ 246,231.91					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	\$ 2,036.57		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING I TING PERIOD	LOANS AS OF THE LAST DAY	\$ 0.00		
<b>17</b> AFFIDAVIT			nder penalty of perjury, that the acc l includes all information required t ion Code.			
		Т	ne Honorable Luz Elena D. Ch	ара		
		S	Signature of Candidate or Officehol	der		
AFFIX NO	TARY STAMP / SEAL ABO	DVE				
Sworn to and subso	day					
of	, 20, to ce	rtify which, witness my hand and seal o	f office.			
Signature of office	cer administering oath	Printed name of officer administeri	ing oath Title of office	r administering oath		

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

### FORM JC/OH COVER SHEET PG 3

					3 of 42
<b>18</b> FIL	ER NAM	AE .	19 Filer ID	(Ethi	cs Commission Filers)
Ch	napa, Lu	uz Elena D. (The Honorable)	00067895		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
147	WIL OI				
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	52,257.94
2.	X	\$	8,553.12		
3.		\$			
4.		\$			
5.	Х	\$	246,231.91		
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 F TO FILER	\$		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 1/21 Rpt: 4/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 10/05/2024	<ul><li>5 Full name of contributor Allen, Leticia (Ms.)</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$) \$100.00
		San Antonio, TX 78257				
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
	N/A			Allen, Stein & Durbin		
12	! If contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	10/16/2024	Amberson, Mary Margar Contributor address; City; 9 San Antonio, TX 78209				\$50.00
	Contributor's I			Contributor's Job Title		
Contributor's Principal Occupation  Author				Author		
		employer/law firm		Law firm of contributor's sp	าดบร	se (if any)
	Self-employe	• •				, ,,
	If contributor is	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	10/10/2024	Beach, Doug (Mr.)				\$100.00
		Contributor address; City; S San Antonio, TX 78209	State; Zip Code			
	Contributor's F	rincipal Occupation		Contributor's Job Title	_	
	Executive Di	rector		Executive Director		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	NAMI San A	ntonio				
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this t	form.	1		es Schedule A(J)1 1 Rpt: 5/42	L:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Chapa, Luz	Elena D. (The Honorable)				0006789	95	
4	10/16/2024 Bessler, Tim (Mr.)		out-of-state PAC (ID#:	,	7	Amount o	f Contribution (\$)	\$104.48
		San Antonio, TX 78209						
8	Contributor's	Principal Occupation		9 Contributor's Job Title				
	Education			Administrator				
10	Contributor's St. Mary's U	employer/law firm niversity		11 Law firm of contributor's s	pou	se (if any)		
12		s a child, law firm of parent(s) (i	f any)					
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount o	of Contribution (\$)	
10/22/2024		Boyan, Elise (Mrs.)					(+)	\$5,000.00
		Contributor address; City;	State: 7in Code					+0,000.00
		Contributor address, City,	State, Zip Code					
		San Antonio, TX 78209						
		Principal Occupation		Contributor's Job Title				
	Retired			Retired				
		employer/law firm		Law firm of contributor's s	pou	se (if any)		
	N/A							
	If contributor i	s a child, law firm of parent(s) (i	if any)					
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount o	of Contribution (\$)	
	10/03/2024	Brown, Jean (Ms.)	<b>_</b>				, ,	\$1,000.00
		Contributor address; City;	State: Zip Code					
		San Antonio, TX 78205						
	Contributor's	Principal Occupation		Contributor's Job Title				
	Attorney			Attorney				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)		
	Jean Brown	Law						
	If contributor i	s a child, law firm of parent(s) (	f any)					

MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A	A(J)1
The Instru	ction Guide explains ho	w to complete this f	orm.	1	Total pages Schedule A(J)1 Sch: 3/21 Rpt: 6/42	<u> </u>
2 FILER NAME				3	Filer ID (Ethics Commission	n Filers)
Chapa, Luz	Elena D. (The Honorable)			(	00067895	
4 Date 10/10/2024			)	7	Amount of Contribution (\$)	\$300.00
	Natalia, TX 78059					
8 Contributor's I Retired	Principal Occupation		9 Contributor's Job Title Retired			
10 Contributor's o	employer/law firm		11 Law firm of contributor's s	pouse	e (if any)	
12 If contributor i	s a child, law firm of parent(s) (if	any)				
Date	Full name of contributor	out-of-state PAC (ID#:_	``	$\overline{}$	Amount of Contribution (\$)	
10/05/2024	Coker, Judy (Ms.)	U out-or-state PAC (ID#		'	Amount of Contribution (\$)	\$50.00
	Contributor address; City; S	State; Zip Code				******
	San Antonio, TX 78209					
Contributor's I	Principal Occupation		Contributor's Job Title			
Engineer			Senior Engineering Ass	socia	te	
	employer/law firm		Law firm of contributor's s	pouse	e (if any)	
San Antonio	Water Systems					
If contributor i	s a child, law firm of parent(s) (if	any)				
Date	Full name of contributor	out-of-state PAC (ID#:_		T	Amount of Contribution (\$)	
10/02/2024	Colessides, Alexandra (N	Ms.)				\$2,500.00
	Contributor address; City; \$ Laredo, TX 78045	State; Zip Code				
Contributor's I	I Principal Occupation		Contributor's Job Title			
Retired	, ,		Retired			
Contributor's	employer/law firm		Law firm of contributor's s	pouse	e (if any)	
N/A						
If contributor i	s a child, law firm of parent(s) (if	any)				

MONE	ETARY POLITICAL	CONTRIBUTIO	DNS		SCHEDULE A	A(J)1
The Inst	truction Guide explains ho	ow to complete this f	form.		ages Schedule A(J)1 /21 Rpt: 7/42	:
2 FILER NA	ME			3 Filer ID	(Ethics Commission	on Filers)
Chapa, L	uz Elena D. (The Honorable)			00067	895	
4 Date 10/04/202	4 Date 10/04/2024 5 Full name of contributor out-of-si Cottle, Joshua (Mr.)  6 Contributor address; City; State; Zip Contributor address		)	<b>7</b> Amoun	t of Contribution (\$)	\$500.00
	San Antonio, TX 78205					
8 Contributo	r's Principal Occupation		9 Contributor's Job Title			
Attorney			Attorney			
	r's employer/law firm		11 Law firm of contributor's s	pouse (if any	/)	
	Resendez P.C.					
12 If contribut	or is a child, law firm of parent(s) (	if any)				
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amoun	t of Contribution (\$)	
09/29/20	Cuellar, Cindy (Ms.)	_				\$300.00
	Contributor address; City;	State; Zip Code				
	San Antonio, TX 78201					
Contributo	r's Principal Occupation		Contributor's Job Title	<u> </u>		
Retired			Retired			
Contributo	r's employer/law firm		Law firm of contributor's s	pouse (if any	/)	
N/A						
If contribut	or is a child, law firm of parent(s) (	if any)				
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amoun	t of Contribution (\$)	
10/02/20	Escoto, Madeline (Ms.)					\$250.00
	Contributor address; City;	State; Zip Code				
	Laredo, TX 78045					
Contributo	r's Principal Occupation		Contributor's Job Title			
Attorney			Attorney			
	r's employer/law firm		Law firm of contributor's s	pouse (if any	/)	
Law Offic	es of Madeline Escoto					
If contribut	or is a child, law firm of parent(s) (	if any)				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	s form.	1	es Schedule A(J)1: 1 Rpt: 8/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)		3 Filer ID 0006789	(Ethics Commission Filers)
4	Date 10/05/2024	<ul> <li>Full name of contributor</li></ul>	#:)		f Contribution (\$) \$150.00
		San Antonio, TX 78240			
8		Principal Occupation	9 Contributor's Job Title		
10	Retired	employer/law firm	Retired  11 Law firm of contributor's sp	nouse (if any)	
10	N/A	employemaw iiimi	11 Law IIIII of Contributor 3 Sp	oouse (II arry)	
12	2 If contributor is	s a child, law firm of parent(s) (if any)	-1		
	Date	Full name of contributor  uut-of-state PAC (ID	#:)	Amount o	f Contribution (\$)
	10/05/2024	Flood Herdeg, Maggie (Ms.)  Contributor address; City; State; Zip Code			\$200.00
_	Contributor's	San Antonio, TX 78209 Principal Occupation	Contributor's Job Title		
	Designer	-ппсіраї Оссираціон	Designer		
-		employer/law firm	Law firm of contributor's sp	oouse (if any)	
	Self-employe	ed			
	If contributor is	s a child, law firm of parent(s) (if any)	•		
	Date	Full name of contributor out-of-state PAC (ID	#:)	Amount o	f Contribution (\$)
	10/02/2024	Ford, Sandra Laurel (Ms.)  Contributor address; City; State; Zip Code  San Antonio, TX 78209			\$1,000.00
	Contributor's F	Principal Occupation	Contributor's Job Title		
	Attorney	Timopal Cocapation	Of Counsel		
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)	
	Carabin Sha	w			
	If contributor is	s a child, law firm of parent(s) (if any)	•		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 6/21 Rpt: 9/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 10/02/2024	<ul><li>5 Full name of contributor Garcia &amp; Escoto PLLC</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$300.00
		Laredo, TX 78045				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	10/16/2024	Garcia, Roland (Mr.)  Contributor address; City;	<u> </u>			\$1,000.00
		Houston, TX 77042				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Greenberg T					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	10/16/2024	Garza, Linda (Ms.)	_			\$500.00
		Contributor address; City;  Austin, TX 78731	State; Zip Code			
$\vdash$	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			General Counsel		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Siete Family	Foods				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/21 Rpt: 10/42	
2	FILER NAME	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895	
4	Date 10/23/2024	Full name of contributor     Gill, Christopher (Mr.)     Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00	
		San Antonio, TX 78209					
8		Principal Occupation		9 Contributor's Job Title			
_	Developer			Owner			
10	Pitchstone V	employer/law firm Vaters		11 Law firm of contributor's sp	oous	se (If any)	
12		s a child, law firm of parent(s) (if	any)	<u> </u>			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	10/02/2024	Gilliand Jr., Lukin (Mr.)  Contributor address; City;  San Antonio, TX 78209	State; Zip Code			\$260.73	
_	Contributor's I	Principal Occupation		Contributor's Job Title			
	Investor	incipal occupation		Investor			
	Contributor's e	employer/law firm		Law firm of contributor's spouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if	any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	10/05/2024	Glast, Kathryn (Ms.)  Contributor address; City;  San Antonio, TX 78248	State; Zip Code			\$250.00	
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>		
	Homemaker	, ,		Homemaker			
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	N/A						
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains hov	v to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 8/21 Rpt: 11/42	
2	FILER NAME	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895	
4	Date 10/05/2024	Full name of contributor     Glast, Leah (Ms.)     Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00	
		San Antonio, TX 67255					
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired			
10		employer/law firm		11 Law firm of contributor's sp	oou	se (if any)	
12		s a child, law firm of parent(s) (if	any)				
	Date 10/06/2024	Full name of contributor Gonima, Francisco (Mr.) Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$) \$260.73	
	Contributorio	San Antonio, TX 78212		Contributor's Job Title			
· · ·			Coach				
	Contributor's e	employer/law firm onima Executive Coaching s a child, law firm of parent(s) (if	any)	Law firm of contributor's spouse (if any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	10/01/2024	González, Erika (Ms.)  Contributor address; City; S  San Antonio, TX 78212	<u> </u>			\$1,041.98	
	Contributor's F	Principal Occupation		Contributor's Job Title	•		
	Physician			Physician			
	Contributor's 6	employer/law firm ergy		Law firm of contributor's sp	oou	se (if any)	
		s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 9/21 Rpt: 12/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 10/02/2024	5 Full name of contributor Hale, Kristina Laurel (Ms 6 Contributor address; City;			7	Amount of Contribution (\$) \$250.00
		Laredo, TX 78045				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's 6 State of Tex	employer/law firm as		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)
	10/17/2024	Hartline Barger LLP  Contributor address; City;	State; Zip Code			\$1,000.00
		Dallas, TX 75231				
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	10/02/2024	Haynes II, Richard (Mr.)  Contributor address; City;	State; Zip Code			\$1,000.00
	Cantuila staula I	Laredo, TX 78045		Contributoulo Job Title		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Trevino Hay	nes, PLLC		Trevino Haynes, PLLC		
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains how	to complete this fo	orm.	1		es Schedule A(J)1 21 Rpt: 13/42	l:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Chapa, Luz	Elena D. (The Honorable)				0006789	95	
	Date 10/05/2024	<ul><li>5 Full name of contributor Hermann, David (Mr.)</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:_		7	Amount o	f Contribution (\$)	\$500.00
		San Antonio, TX 78213						
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
	Real Estate			Business Owner				
	Contributor's of Columbia Re	employer/law firm ealty		11 Law firm of contributor's s	pou	se (if any)		
12	If contributor i	s a child, law firm of parent(s) (if a	ny)					
_	Doto	Full name of contributor			T	Amount o	f Contribution (¢)	
	Date 10/03/2024	Full name of contributor	out-of-state PAC (ID#:_	)		Amount o	f Contribution (\$)	\$1,041.98
	10/03/2024	Herrera, Jr., Frank (Mr.)  Contributor address; City; Sta						Ф1,041.90
		San Antonio, TX 78232						
		Principal Occupation		Contributor's Job Title				
_	Attorney			Attorney				
		employer/law firm		Law firm of contributor's s	pou	se (if any)		
	Herrera Law							
	If contributor i	s a child, law firm of parent(s) (if a	ny)					
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	T	Amount o	f Contribution (\$)	
	10/07/2024	Hill Country Chapter Texa	s Democratic Women					\$400.00
		Contributor address; City; Sta	ate; Zip Code		-			
		Kerrville, TX 78028						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)		
	If contributor i	s a child, law firm of parent(s) (if a	ny)					

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 11/21 Rpt: 14/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00067895
4	Date 10/15/2024	<ul> <li>5 Full name of contributor Huffman, Luz Elena (Ms.)</li> <li>6 Contributor address; City; States</li> <li>San Antonio, TX 78216</li> </ul>	out-of-state PAC (ID#:_ ate; Zip Code		7 Amount of Contribution (\$) \$2,500.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	
•	Retired	····o.pai o coapation		Retired	
10	Contributor's o	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if a	ny)	<u> </u>	
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	10/07/2024	Joe Rubio Law Firm  Contributor address; City; Sta	<u> </u>		\$500.00
		Laredo, TX 78040		<u> </u>	
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	ny)	L	
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	09/27/2024	Jose J Ruiz & Associates  Contributor address; City; Sta	ate; Zip Code		\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 12/21 Rpt: 15/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 10/10/2024	<ul><li>5 Full name of contributor Kauffman, Albert (Mr.)</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$104.48
		San Antonio, TX 78201				
8		Principal Occupation		9 Contributor's Job Title		
	Education			Professor		
10	10 Contributor's employer/law firm St. Mary's University School of Law				oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	10/02/2024	Killam, David (Mr.)  Contributor address; City;	<u> </u>			\$5,000.00
		Laredo, TX 78042				
		Principal Occupation		Contributor's Job Title		
	Business De			Managing Partner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Killam Oil Co		: )			
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	10/05/2024	Kott, Martha (Ms.)	_			\$250.00
		Contributor address; City; San Antonio, TX 78209	State; Zip Code			
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Martha Kott,	Attorney at Law				
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL CO	ONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how t	o complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 13/21 Rpt: 16/42
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)			00067895
4	Date 10/17/2024	Full name of contributor     Kwok, Robert (Mr.)     Contributor address; City; State	out-of-state PAC (ID#:_ e; Zip Code		7 Amount of Contribution (\$) \$2,604.48
		Houston, TX 77024			
8	Contributor's	I Principal Occupation		9 Contributor's Job Title	1
	Partner			Attorney	
10	10 Contributor's employer/law firm  Kwok Daniel  11 Law firm of contributor's s			pouse (if any)	
12		s a child, law firm of parent(s) (if any	/)		
	Data	L Full name of contributor	7		Amount of Contribution (ft)
Date Full name of contributor out-of-state PAC (ID#:		)	Amount of Contribution (\$) \$300.00		
	10/03/2024	Contributor address; City; State			\$300.00
		Laredo, TX 78045			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any	/)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	10/02/2024	Law Offices of Donato D. Ra	_	· · · · · · · · · · · · · · · · · · ·	\$2,000.00
		Contributor address; City; State	e; Zip Code		
		Laredo, TX 78041		T	
	Contributor's	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any	/)	<u> </u>	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 14/21 Rpt: 17/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 10/03/2024	<ul><li>5 Full name of contributor Leon, Rosemary (Ms.)</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$521.15
		San Antonio, TX 78209				
8		Principal Occupation		9 Contributor's Job Title		
L	Retired Retired					
10	10 Contributor's employer/law firm  N/A  11 Law firm of contributor's s				oous	se (if any)
12		s a child, law firm of parent(s) (if	any)			
		T			_	
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	10/03/2024	Liles White PLLC  Contributor address; City; \$	State; Zip Code			\$2,500.00
		Corpus Christi, TX 7840	1			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	10/05/2024	Lockhart, Cathleen (Ms.)	)			\$250.00
		Contributor address; City; S San Antonio, TX 78232	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Lockhart La					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 15/21 Rpt: 18/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 10/08/2024	Full name of contributor     Lopez, Orlando (Mr.)     Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$521.15
		San Antonio, TX 78212				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firm  Lopez Scott, L.L.C.				oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	I		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	10/04/2024 Lyons, Sean (Mr.)  Contributor address; City; State; Zip Code				\$1,000.00	
		San Antonio, TX 78204				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Lyons & Lyo					
	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)
	10/16/2024	Medina, David (Mr.)	_			\$500.00
		Contributor address; City; s  Houston, TX 77030	State; Zip Code			
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Nelson Mulli	ns				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 16/21 Rpt: 19/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 09/30/2024	<ul><li>5 Full name of contributor Miller, Kevin (Mr.)</li><li>6 Contributor address; City; \$</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$521.15
		San Antonio, TX 78230				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firm Miller & Bicklein, PC  11 Law firm of contributor's specified by the spec			ous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	10/02/2024	Notzon, Yvonne (Ms.)  Contributor address; City; \$	State; Zip Code		•	\$500.00
	0	Laredo, TX 78045		Occasionate de Leb Tide		
	Business Co	Principal Occupation		Contributor's Job Title Office Manager		
_		employer/law firm		Law firm of contributor's sp	0119	co (if any)
	The Notzon	• •		The Notzon Law Firm	,ou.	se (ii diiy)
		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	10/02/2024	Patel, Tarak (Mr.)  Contributor address; City; 9  San Antonio, TX 78258	State; Zip Code		•	\$250.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Physician			Pediatric Pulmonologist		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Texas Pedia	tric Specialties and Family S	leep Center			
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	v to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 17/21 Rpt: 20/42
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067895
4	Date 10/17/2024	<ul><li>5 Full name of contributor Perry, Amy (Ms.)</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$500.00
		Shavano Park, TX 78231				
8		Principal Occupation		9 Contributor's Job Title		
L	Retired Retired					
10	10 Contributor's employer/law firm N/A			oous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	10/15/2024 Person, Mohrer, Morales, Boddy, Garcia & Gutierrez, PLLC  Contributor address; City; State; Zip Code			\$1,000.00		
		San Antonio, TX 78217		T		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	<u></u>		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	10/02/2024	Rubio, Julia (Ms.)  Contributor address; City; S  Laredo, TX 78040	itate; Zip Code		<del>.</del>	\$250.00
	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Rubio Law F					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONT	RIBUTIC	DNS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to con	nplete this f	orm.	1	ages Schedule A(J)1: 8/21 Rpt: 21/42	
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)			3 Filer ID 00067	(Ethics Commissio	n Filers)
4	Date 10/05/2024	<ul> <li>5 Full name of contributor  out-of Sakai, Kathleen (Ms.)</li> <li>6 Contributor address; City; State; Zip C</li> <li>San Antonio, TX 78209</li> </ul>	f-state PAC (ID#:_ Code		<b>7</b> Amoun	t of Contribution (\$)	\$100.00
g	Contributor's I	Principal Occupation		9 Contributor's Job Title			
Ü	Retired	molpai Occupation		Retired			
10	10 Contributor's employer/law firm  N/A  11 Law firm of contributor's specified by the second				oouse (if any	·)	
12		s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of	f-state PAC (ID#:_	1	Amoun	t of Contribution (\$)	
	10/06/2024	Schultz, Robert (Mr.)  Contributor address; City; State; Zip C				t of Contribution (\$)	\$100.00
	0	San Antonio, TX 78205		I a			
	Entrepreneu	Principal Occupation		Contributor's Job Title Entrepreneur			
		employer/law firm		Law firm of contributor's sp	ouso (if any	Λ	
	RRS Venture			Law IIIII of Contributor 3 3p	ouse (ii ariy	)	
		s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of	f-state PAC (ID#:_	)	Amoun	t of Contribution (\$)	
	10/02/2024	Soto, Elisamar (Ms.)  Contributor address; City; State; Zip C  Laredo, TX 78040	Code				\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	ouse (if any	<b>'</b> )	
		f Elisamar Soto					
	If contributor i	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL CO	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to	o complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 19/21 Rpt: 22/42
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Chapa, Luz	Elena D. (The Honorable)			00067895
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
	09/30/2024	Stewart, Kenneth (Mr.)	_		\$21.15
		6 Contributor address; City; State	e; Zip Code		
_		Bandera, TX 78003		<u> </u>	
8		Principal Occupation		9 Contributor's Job Title	
	Healthcare Staff nurse				
10	10 Contributor's employer/law firm  11 Law firm of contributor's s			11 Law firm of contributor's sp	oouse (if any)
		gional Medical Center	<u>,                                      </u>		
12	If contributor i	s a child, law firm of parent(s) (if any	")		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/10/2024 Stone, Catherine  Contributor address; City; State; Zip Code			\$250.00		
			1		
			-,		
		Helotes, TX 78203			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney	-Tilicipal Occupation		Attorney	
		ampleyer/less firm		-	acuse (if any)
	Langley & B	employer/law firm		Law firm of contributor's sp	Jouse (ii aliy)
			<u> </u>		
	ii contributor i	s a child, law firm of parent(s) (if any	)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	10/02/2024	The Bexar County Justice P			\$2,500.00
		Contributor address; City; State	e; Zip Code		1
		,	., ,		
		San Antonio, TX 78232			
	Contributor's	rincipal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any	·)		

MON	IETARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The In	struction Guide explains ho	w to complete this	form.	1 Total pages Schedule A(J)1: Sch: 20/21 Rpt: 23/42
2 FILER N	AME			3 Filer ID (Ethics Commission Filers)
Chapa,	Luz Elena D. (The Honorable)			00067895
4 Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/05/2	024 The Rosenblatt Law Fire	n, P.C.		\$1,500.00
	6 Contributor address; City;	State; Zip Code		
	San Antonio, TX 78248			
8 Contribu	tor's Principal Occupation		9 Contributor's Job Title	
10 Contribu	tor's employer/law firm		11 Law firm of contributor's sp	oouse (if any)
12 If contrib	outor is a child, law firm of parent(s) (i	f any)		
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/02/2024 The Vela Firm		\$250.00		
	Contributor address; City;  Laredo, TX 78041	State, Zip Code		
Contribu	tor's Principal Occupation		Contributor's Job Title	<u> </u>
Contribu	tor's employer/law firm		Law firm of contributor's sp	pouse (if any)
If contrib	outor is a child, law firm of parent(s) (i	f any)		
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/03/2	024 Toscano, Andrew (Mr.)			\$5,000.00
	Contributor address; City;	State; Zip Code		
	San Antonio, TX 78201			
	tor's Principal Occupation		Contributor's Job Title	
Attorne			Attorney	
	tor's employer/law firm		Law firm of contributor's sp	oouse (if any)
	oscano, Inc.			
if contrib	outor is a child, law firm of parent(s) (i	r any)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how	v to complete this f	orm.	1	ges Schedule A(J)1 /21 Rpt: 24/42	Ŀ
2	FILER NAME Chapa, Luz	Elena D. (The Honorable)				(Ethics Commissi	on Filers)
4	Date 10/03/2024	Zeller, Allison (Ms.)  6 Contributor address; City; State; Zip Code		7 Amount o	of Contribution (\$)	\$104.48	
		San Antonio, TX 78209					
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	•		
	Homemaker			Homemaker			
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	pouse (if any)		
12		s a child, law firm of parent(s) (if a	anv)				
	continuator	o a o ma, iam mm or parom(o) (ii o	,,				
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount o	of Contribution (\$)	
	10/05/2024	Zinn, Lee (Ms.)	<b>_</b>				\$100.00
		Contributor address; City; St	tate; Zip Code		"		
		San Antonio, TX 78230					
		Principal Occupation		Contributor's Job Title			
	Retired			Retired			
		employer/law firm		Law firm of contributor's sp	pouse (if any)		
	Retired						
	If contributor is	s a child, law firm of parent(s) (if a	any)				
_							

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	uction Guide explains how to complete this f	orm.	1 Total pages Scl Sch: 1/2 Rpt:		
	PILER NAME Chapa, Luz Elena D. (The Honorable)			s Commission Filers)	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date 10/02/2024	5 Date 10/02/2024 6 Full name of contributor out-of-state PAC (ID#:) Escoto, Madeline (Ms.) 7 Contributor address; City; State; Zip Code  Laredo, TX 78045			9 In-kind contribution description I Fundraiser expenses	
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON		nstructions)	
Attorney	principal occupation (FOR JUDICIAL)  employer/law firm (FOR JUDICIAL)	<ul><li>13 Contributor's job title</li><li>Attorney</li><li>15 Law firm of contributor</li></ul>		(See instructions)	
	s of Madeline Escoto	25 Eaw IIIII of Contribute	or a spouse (ir urry) (	i ok dobionkej	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	l			
Date 10/02/2024	Full name of contributor out-of-state PAC (ID#: Gonzalez, Arturo (Mr.)  Contributor address; City; State; Zip Code	)		In-kind contribution description Constant contact email blast	
	San Antonio, TX 78259		Check if travel of	I I outside of Texas. Complete Schedule T.	
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ii	nstructions)	
Contributor's Attorney	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions) Attorney			
	employer/law firm (FOR JUDICIAL) onzalez P.C.	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date  10/02/2024  Full name of contributor out-of-state PAC (ID#:  Gonzalez, Arturo (Mr.)  Contributor address; City; State; Zip Code		)		In-kind contribution description Fedex Campaign Flyer Copies	
Principal occi	San Antonio, TX 78259  upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		outside of Texas. Complete Schedule T.	
Contributor's Attorney	principal occupation (FOR JUDICIAL)	Contributor's job title Attorney	(FOR JUDICIAL)	(See instructions)	
	employer/law firm (FOR JUDICIAL) onzalez P.C.	Law firm of contributo	or's spouse (if any) (	FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	uction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 2/2 Rpt: 26/42	
2 FILER NAME	E		3 Filer ID (Ethics Commission Filers)	
Chapa, Luz	z Elena D. (The Honorable)		00067895	
4 TOTAL OI	F UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description	
10/08/2024	1		\$6,150.00 Lamar Outdoor Billboards	
	7 Contributor address; City; State; Zip Code			
	San Antonio, TX 78259		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON		
	, , , , , , , , , , , , , , , , , , , ,	,	, ,	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
Attorney		Attorney		
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)	
Arturo J. G	onzalez P.C.			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution	
10/11/2024	Gonzalez, Arturo (Mr.)		contribution (\$) description \$564.30   Meet and greet luncheon	
	Contributor address; City; State; Zip Code		I	
			<u> </u>	
	San Antonio, TX 78259	- / /505 NOV	Check if travel outside of Texas. Complete Schedule T.	
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Attorney		Attorney		
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)	
Arturo J. G	onzalez P.C.			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution	
10/02/2024	<u>—</u>	,	contribution (\$) description	
	Contributor address; City; State; Zip Code		\$1,449.76   Fundraiser expenses	
			į	
	San Antonio, TX 78209		Check if travel outside of Texas. Complete Schedule T.	
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)	
Contributor's	s principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Attorney		Contributor's job title (FOR JUDICIAL) (See instructions)  Of Counsel		
	s employer/law firm (FOR JUDICIAL)		or's spouse (if any) (FOR JUDICIAL)	
Carabin Sh	·			
	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	l		
22	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )			

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com 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		
Ļ			_
1	Total pages Schedule F1: Sch: 1/16 Rpt: 27/42	2 FILER NAME Chapa, Luz Elena D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067895	
4	Date 10/02/2024	5 Payee name 7-Eleven/ Chevron	
_			_
6	Amount (\$) \$84.56	7 Payee address; City; State; Zip Code 1202 NE Loop 410  San Antonio, TX 78209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense  24.5 gallons gas	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	10/22/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$200.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/17/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$104.48	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
		Ground data processing rec	
	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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide 6	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/16 Rpt: 28/42		Elena D. (The Hono	orable)				00067895	
4	Date	<b>5</b> Payee name							
L	10/17/2024	Anedot, Inc	·						
6	Amount (\$)	<b>7</b> Payee addre	ss; City;	State; Zip C	ode				
	\$20.30	1340 Poydr	as Street						
		Suite 1770							
		New Orlear	ıs, LA 70112						
8	PURPOSE		ee Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting,	Banking/			ш		de of Texas. Com officeholder living	
						Credit card p			g expense
								g	
9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office so	ught			Office he	eld
_	Date	Payee name							
	10/16/2024	Anedot, Inc							
-	Amount (\$)	Payee addre		State; Zip C	ode				
	\$40.30	1340 Poydr	•	State, E.P. C	000				
	4 10.00	Suite 1770	ao on oor						
			ıs, LA 70112						
	PURPOSE				(h)	Description			
	OF	Accounting	ee Categories listed at the top	of this schedule)	(6)	Description  Check if travel of	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE	Accounting	Danking			<b>=</b>		officeholder living	
						Credit card pr	roc	essing fee	
	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office so	ught			Office he	eld
	Date	Payee name							
	10/16/2024	Anedot, Inc							
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$4.48	1340 Poydr	as Street						
		Suite 1770							
		1	ıs, LA 70112						
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting		· · · · · · · · ·		Check if travel		de of Texas. Com	
	LAI LADITORL							officeholder living	g expense
						Credit card p	ıuc	essing lee	
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office so	<u>l</u> ught			Office he	eld
	expenditure to benefit C/OI			222 00	J				

### SCHEDULE F1

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

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

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: 3/16 Rpt: 29/42	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	10/16/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit card processing fee
		Credit card processing ree
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/16/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit card processing fee
		Credit card processing rec
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/10/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.48	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit cord proceeding for
		Credit card processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
L		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 4/16 Rpt: 30/42	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	10/10/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit card processing fee
		Credit card processing rec
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/10/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit card processing fee
		Credit card processing rec
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/08/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.15	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit cord proceeding for
		Credit card processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		_
_	Sch: 5/16 Rpt: 31/42	Chapa, Luz Elena D. (The Honorable)	
4	Date	5 Payee name	
	10/06/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.73	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE		_
0	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	п	
	Date	Payee name	
	10/06/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Credit card processing fee	
		Ordan dard processing fee	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	experialitare to benefit e/or		
	Date	Payee name	
L	10/05/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	_/	Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
			_

### SCHEDULE F1

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

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

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: 6/16 Rpt: 32/42	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	10/05/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit cord proceeding for
		Credit card processing fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	10/04/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	-	Credit cord proceeding for
		Credit card processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/03/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.98	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Credit card processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense 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		sted above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Co.	mmission Filers)
	Sch: 7/16 Rpt: 33/42	Chapa, Luz Elena D. (The Honorable) 00067895	
4	Date	5 Payee name	
	10/03/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$40.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	· Т.
		Credit card processing fee	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_	Date	Payee name	
	10/03/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	• Т.
		Credit card processing fee	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/03/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.48	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule	т.
		Credit card processing fee	
		Credit data processing fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	

#### SCHEDULE F1

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

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

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		
_	T	· · · · · · · · · · · · · · · · · · ·	_
1	Total pages Schedule F1: Sch: 8/16 Rpt: 34/42	2 FILER NAME Chapa, Luz Elena D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067895	
4	Date 10/03/2024	5 Payee name Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
ľ	\$21.15	1340 Poydras Street	
	7==:=0	Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE		_
°	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	10/02/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Credit card processing fee	
		Ground data processing for	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held  H	
	Date	Payee name	=
	10/02/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.73	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	EXI ENDITORE	Cradit cord processing for	
		Credit card processing fee	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_

### SCHEDULE F1

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

Travel Out Travel Out act Labor OTHER (e

	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: 9/16 Rpt: 35/42	Chapa, Luz Elena D. (The Honorable) 00067895	
4	Date	5 Payee name	
	10/01/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$41.98	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
Ļ	DUDDOCE		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_
	Date	Payee name	
	09/30/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.15	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
-	Date	Payee name	_
	09/30/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1.15	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Credit cord processing for	
		Credit card processing fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
$\vdash$			

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -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: 10/16 Rpt: 36/42	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	10/09/2024	CSG, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,537.09	212 W. Laurel
		San Antonio, TX 78212
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
		Print expense/Postcards
_	Commission ONII V if dispost	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/24/2024	CSG, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,894.08	212 W. Laurel
		San Antonio, TX 78212
	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  Digital/ Advertising
		Digital Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davisa nama
	10/17/2024	Payee name CSG, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$131,752.00	212 W. Laurel
		San Antonio, TX 78212
	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/ Direct Mail
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
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#### 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/16 Rpt: 37/42	Chapa, Luz Elena D. (The Honorable) 00067895
4	Date	5 Payee name
	10/09/2024	CSG, Inc.
6	Amount (\$) \$93,248.00	7 Payee address; City; State; Zip Code 212 W. Laurel
		San Antonio, TX 78212
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Advertising/ Digital
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/17/2024	CSG, Inc.
	Amount (\$) \$1,275.00	Payee address; City; State; Zip Code 212 W. Laurel San Antonio, TX 78212
	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Printing/Pushcards
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/24/2024	CSG, Inc.
	Amount (\$) \$714.45	Payee address; City; State; Zip Code 212 W. Laurel
		San Antonio, TX 78212
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Print Expense/ Pushcards
	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Means/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet 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: 12/16 Rpt: 38/42	Chapa, Luz Elena D. (The Honorable) 00067895										
4	Date	5 Payee name										
	10/15/2024	Dollar Tree										
6	Amount (\$)	7 Payee address; City; State; Zip Code										
\$10.83 7142 San Pedro Ave												
		San Antonio, TX 78216										
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description										
	OF EXPENDITURE	Office supplies Check if travel outside of Texas. Complete Schedule T.										
	EXPENDITORE	Check if Austin, TX, officeholder living expense										
		Misc. office supplies										
_												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held										
	Date	Payee name										
	10/14/2024	HEB										
	Amount (\$)	Payee address; City; State; Zip Code										
	\$29.20	1520 Austin Hwy										
		San Antonio, TX 78218										
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description										
	OF EXPENDITURE	Mailing Expense Check if travel outside of Texas. Complete Schedule T.										
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense										
		Stamps										
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held										
	expenditure to benefit C/OI											
	<u> </u>											
	Date	Payee name  JVC Media										
	10/07/2024											
	Amount (\$)	Payee address; City; State; Zip Code										
	\$481.98	3106 Fall Crest Dr										
		San Antonio, TX 78247										
	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  T-shirt printing										
		1 Since printing										
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held										
	expenditure to benefit C/OI	<b>o</b>										

#### SCHEDULE F1

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

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

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: 13/16 Rpt: 39/42	Chapa, Luz Elena D. (The Honorable) 00067895									
4	Date	5 Payee name									
	10/08/2024	Jamarillo, Leonard (Mr.)									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$1,552.00	330 West Baetz Blvd									
		San Antonio, TX 78221									
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									
		Sign Installation									
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/OI										
	Date	Payee name									
	10/01/2024	Office Max									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$28.34	255 E Basse Rd #1510									
		San Antonio, TX 78209									
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE	Office Supplies Check if travel outside of Texas. Complete Schedule T.									
		Check if Austin, TX, officeholder living expense  Envelopes									
		Livelopes									
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/OI										
	Date	Payee name									
	10/08/2024	Rubsamen, Anne (Ms.)									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$2,000.00	154 Cave Lane									
		San Antonio, TX 78209									
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.									
	_/	Check if Austin, TX, officeholder living expense  Campaign support									
		Campaign support									
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/OI										

#### SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.							Travel Out of District OTHER (enter a category not listed above)					
Ļ	<b>T 5.</b>	1-	EU EE		Caon Guide	CAPIGIIIS	11000 10 00	iiipie	ac uns ioiii.	1-	<b>-</b> 11 :-		(Ed.) - C	>
1	Total pages Schedule F1:	2								3			(Ethics Commission Filer	rs)
	Sch: 14/16 Rpt: 40/42		Chapa, Luz	Elena D	(The Hon	orable)					000678	95		
4	Date	5	Payee name											
	10/22/2024		USPS											
6	Amount (\$)	7	Payee addre	ss; Cit	y;	State;	; Zip Co	de						
	\$15.68		9211 Broad	way										
			San Antonio	o, TX 782	17									
8	PURPOSE	(a)	Category (S			n of this sch	edule)	(b)	Description					
	OF EXPENDITURE	Ĭ.,	Mailing exp		o.cu at the top	p 31 1113 3011	oddio,			outsi	de of Texas.	Com	plete Schedule T.	
	EXPENDITURE		5 19	= ='					Check if Austin	ı, TX,	officeholder	living	expense	
									Stamps					
9	Complete ONLY if direct		Candidate/Offi	ceholder r	ame	C	Office sou	ght			Offic	e he	eld	
	expenditure to benefit C/OI	Н												
	Date		Payee name	_							_			
	10/22/2024		USPS											
	Amount (\$)	Г	Payee addre	ss; Cit	y;	State;	; Zip Co	de						
	\$14.56		1948 Austin	1 Hwy										
				ý										
			San Antonio	o, TX 782	18									
	PURPOSE OF	(a)	Category (S	ee Categories	listed at the top	p of this sch	edule)	(b)	Description					
	EXPENDITURE		Mailing exp	ense					<b>=</b>				plete Schedule T.	
									Check if Austin Stamps	ı, 1 X,	, onicenolaer	ııvıng	ј ехрепѕе	
									σιαιτιμο					
_	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder r	lame		Office sou	aht			Offic	e he	-iq	
	expenditure to benefit C/OI		Janaidato/OIII	oonoluci I	ianic		211100 30U	Air			Onic	, , , , , ,		
⊨	Date		Dayon name											
			Payee name											
	10/18/2024		USPS											
	Amount (\$)		Payee addre		y;	State;	; Zip Co	de						
	\$14.00		1107 Austin	1 Hwy										
L		L	San Antonio	o, TX 782	18									
	PURPOSE	(a)	Category (S	ee Categories	listed at the top	p of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Mailing exp	ense					<u></u>				plete Schedule T.	
	<b></b>								Check if Austin	ı, TX,	officeholder	living	expense	
									Stamps					
	Complete ONLY if alice of	Ц	Candidate /Off	oobold - "	iome.		Office as:	ab+			Off.	no b -	ald.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offi	cenolaer r	iame	C	Office sou	ynt			Offic	e ne	eiu	
	, , , , , , , , , , , , , , , , , , , ,													

#### 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 Total pages Schedule F1:	
Sch: 15/16 Rpt: 41/42	Chapa, Luz Elena D. (The Honorable)  00067895
4 Date	5 Payee name
10/16/2024	USPS
6 Amount (\$) \$224.00	7 Payee address; City; State; Zip Code 10410 Perrin beitl Rd San Antonio, TX 78284
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Mailing expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Stamps
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/16/2024	USPS
Amount (\$)	Payee address; City; State; Zip Code
\$112.00	10250 John Saunders Rd
DUD-20-	San Antonio, TX 78248
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Mailing expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Stamps
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/16/2024	USPS
Amount (\$) \$168.00	Payee address; City; State; Zip Code 10410 Perrin Beitel Rd
	San Antonio, TX 78248
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Mailing expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Stamps
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

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	/ - Il Comn	nittee	Gift/Awards Legal Servi	rage Expense s/Memorials Ex ces ruction Guid			ense ages/C	ontract Labor		Travel in Distric Travel Out of D OTHER (enter	istrict	not listed above)
1	Total pages Schedule F1:	2 F	ILER NAME	Ξ						3	Filer ID	(Ethics	Commission Filers)
	Sch: 16/16 Rpt: 42/42		Chapa, Luz	: Elena D	). (The Ho	norable)					00067895		
4	Date		Payee name										
	10/16/2024	L	JSPS										
6	Amount (\$)	<b>7</b> P	Payee addre	ss; C	ity;	State;	Zip Cod	le					
	\$56.00	1	.107 Austir	า Hwy									
		S	San Antonio	o, TX 78	209								
8	PURPOSE	(a) C	Category (S	ee Categorie	es listed at the	top of this sch	edule) (	(b) [	escription				
	OF EXPENDITURE		∕lailing exp					Ę	_		ide of Texas. Co		dule T.
								Ļ	J Check if Austi Stamps	n, IX,	, officeholder livir	ig expense	
								•	παιτιρο				
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offi	iceholder	name	C	Office soug	ht			Office h	eld	