CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00082357 22 Date Received COMMITTEE #PROJECTREDTX **ELECTRONICALLY FILED** NAME 11/01/2024 TREASURER Hamilton, Patrick (Mr.) NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation Dissolution report 30th day before election Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Year Month Day Year Day Date Imaged **COVERED THROUGH** 09/27/2024 10/26/2024 **EXPLANATION OF CORRECTION** #PROJECTREDTX is amending the 8-day pre-general report originally filed October 28, 2024. The report is being amended to correct the description of an expenditure and office sought of a candidate supported by a direct campaign expenditure which were reported incorrectly due to a clerical, administrative error. None of the totals on the cover sheet have been changed. The original report was filed in good faith with no intent to mislead the public or the Texas Ethics Commission. AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Mr. Patrick Hamilton Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said _____, this the _____ day _____, 20_____, to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00082357 3 COMMITTEE NAME **OFFICE USE ONLY** #PROJECTREDTX Date Received **ELECTRONICALLY FILED** 11/01/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 10 N Caddo St. #108 Date Hand-delivered or Date Postmarked Change of Address Cleburne, TX 76033 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Patrick NAME NICKNAME LAST **SUFFIX** Hamilton STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 10 Caddo St. #108 STREET **ADDRESS** (Residence or Business) Cleburne, TX 76033 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 341027 MAILING **ADDRESS** Austin, TX 78734 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 615-2353 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 09/27/2024 10/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
#PROJECTREDTX			00082357	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	145,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	274,031.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	453,358.90
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u>'</u>		·	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Patric	k Hamilton	
		Signature of Ca	mpaign Treasu	irer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tl	nis the	day
		which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of office	cer administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

		_	4 of 22
17 COMMITTEE NAME #PROJECTREDTX		18 Filer ID 00082357	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X SCHEDULE A1: MON	ETARY POLITICAL CONTRIBUTIONS		\$ 145,000.00
2. SCHEDULE A2: NON	-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLED	GED CONTRIBUTIONS		\$
4. SCHEDULE C1: MON ORGANIZATION	ETARY CONTRIBUTIONS FROM CORPORATION OR L	ABOR	\$
5. SCHEDULE C2: NON LABOR ORGANIZATIO	-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORF DN	PORATION OR	\$
6. SCHEDULE C3: MON	ETARY SUPPORT FROM CORPORATION OR LABOR (ORGANIZATION	\$
7. SCHEDULE C4: NON ORGANIZATION	-MONETARY SUPPORT FROM CORPORATION OR LA	BOR	\$
8. SCHEDULE D: PLED	GED CONTRIBUTIONS FROM CORPORATION OR LAB	OR ORGANIZATION	\$
9. SCHEDULE E: LOAN	5		\$
10. X SCHEDULE F1: POLI	TICAL EXPENDITURES FROM POLITICAL CONTRIBUT	TIONS	\$ 274,031.49
11. SCHEDULE F2: UNPA	AID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PUR	CHASE OF INVESTMENTS FROM POLITICAL CONTRIE	BUTIONS	\$
13. SCHEDULE F4: EXPE	ENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-PO	DLITICAL EXPENDITURES FROM POLITICAL CONTRIE	BUTIONS	\$
15. SCHEDULE K: INTER TO FILER	EST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIO	ONS RETURNED	\$

MONE	TARY POLITICAL (CONTRIBUTIO	JNS		SCHEDU	LE A1
The Instr	uction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 5/22	
2 FILER NAMI				3	Filer ID (Ethics Commission 00082357	on Filers)
4 Date 10/09/2024	5 Full name of contributor Escudero, Edward 6 Contributor address; City; S			7	Amount of Contribution (\$)	\$15,000.00
	El Paso, TX 79905					
8 Principal occ President/C	cupation / Job title (See Instruction CEO	s)	9 Employer (See Instruction High Desert Capital	s)		
Date 10/23/2024	Full name of contributor Foster, Paul Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50,000.00
Principal occ	El Paso, TX 79901 cupation / Job title (See Instruction	s)	Employer (See Instruction	s)		
Chairman	(000	-,	Electric Reliability Cour			
Date 10/08/2024	Full name of contributor Francis, L. Frederick Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5,000.00
	El Paso, TX 79901					
Principal occ Chairman/0	cupation / Job title (See Instruction CEO	s)	Employer (See Instruction Weststar Bank	s)		
Date 10/17/2024	l .		C00337394)		Amount of Contribution (\$)	\$25,000.00
Principal occ	cupation / Job title (See Instruction	s)	Employer (See Instruction	<u> </u> s)		
Date 10/04/2024		out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50,000.00
	EL Daco TV 70012			1		
Principal occ	El Paso, TX 79913 cupation / Job title (See Instruction	s)	Employer (See Instruction	s)		

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		
	<u> </u>	_
1 Total pages Schedule F1:		
Sch: 1/17 Rpt: 6/22	#PROJECTREDTX 00082357	
4 Date	5 Payee name	
10/03/2024	Apple	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$0.99	1 Apple Park Way	
X Expenditure from corporate funds	Cupertino, CA 95014	
8 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	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	1	
Date	Payee name	_
10/16/2024	Cameron County Republican Party	
Amount (\$)	Payee address; City; State; Zip Code	_
\$1,500.00	465 E 7th St	
Ψ1,300.00	403 E 7th 3t	
Expenditure from	Durange illa TV 70500	
corporate funds	Brownsville, TX 78520	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Political Committee	
	Donation to Party Administrative Account	
Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
<u>'</u>		
Date	Payee name	
10/15/2024	Donna Garcia Davidson	
Amount (\$)	Payee address; City; State; Zip Code	
\$9,800.00	PO Box 12131	
X Expenditure from corporate funds	Austin, TX 78711	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Legal Services Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Legal Consulting Services	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	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 (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
Sch: 2/17 Rpt: 7/22	#PROJECTREDTX		00082357
4 Date	5 Payee name		•
10/09/2024	Frontier Bank		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$20.00	5600 Burnet Rd		
Expenditure from corporate funds	Austin, TX 78756		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Bank Fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	<u>I</u> ıght	Office held
D-1-			
Date	Payee name		
10/23/2024	Frontier Bank		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$20.00	5600 Burnet Rd		
Expenditure from corporate funds	Austin, TX 78756		
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 Bank Fee
			balk ree
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	l ight	Office held
Data	Pausa nama		
Date 10/08/2024	Payee name Gary Seven		
	-		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$200.00	1108 Lavaca St #110-708		
X Expenditure from corporate funds	Austin, TX 78701		
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.
Z. ZIDIIOKE			Check if Austin, TX, officeholder living expense
			Translation
0 1. 6	0 51 10 5 1 1	<u> </u>	Off.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
5			

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

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commis Sch: 3/17 Rpt: 8/22 #PROJECTREDTX 00082357	sion Filers)
	,
00002337	
4 Date 5 Payee name	
10/15/2024 Gary Seven	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$3,200.00 1108 Lavaca St #110-708	
Expenditure from corporate funds Austin, TX 78701	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE Consulting Expense Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
PAC Management	
17.0 Management	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Data	
Date Payee name	
10/15/2024 Gary Seven	
Amount (\$) Payee address; City; State; Zip Code	
\$4,000.00 1108 Lavaca St #110-708	
Expenditure from corporate funds Austin, TX 78701	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Office Overhead/Pental Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE Office Overhead/Kental Expense Check if Austin, TX, officeholder living expense	
Rent	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
experialitare to benefit Groff	
Date Payee name	
10/15/2024 Gary Seven	
Amount (\$) Payee address; City; State; Zip Code	
\$200.00 1108 Lavaca St #110-708	
Expenditure from corporate funds Austin, TX 78701	
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 Translation	
Translation	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
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

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: 4/17 Rpt: 9/22	#PROJECTREDTX 00082357
4 Date	5 Payee name
10/16/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$37.31	2801 E Commerce Center PI
Expenditure from	
x corporate funds	Tuscon, AZ 85707
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
	Software
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Data	
Date 10/01/2024	Payee name Murphy Nasica
Amount (\$) \$9,178.39	Payee address; City; State; Zip Code PO Box 1648
ψ9,170.39	FO BOX 1040
Expenditure from corporate funds	Austin, TX 78767
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
	Graphics/Pushcards: In-kind Contribution to Alberto
	Olivares Campaign
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/01/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$134.86	PO Box 1648
Expenditure from corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Graphics/Pushcards: In-kind Contribution to Chuck Vieh Campaign
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 comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/17 Rpt: 10/22	#PROJECTREDTX	00082357
4 Date	5 Payee name	•
10/01/2024	Murphy Nasica	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$250.00	PO Box 1648	
Expenditure from corporate funds	Austin, TX 78767	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Graphics/Pushcards: In-kind Contribution to Kevin Conner Campaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	office held
<u> </u>		
Date	Payee name	
10/08/2024	Murphy Nasica	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	PO Box 1648	
Expenditure from		
corporate funds	Austin, TX 78767	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Radio Advertising
		radio / avoidoning
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	H Ramiez, Pancho PECOS CO	D. COMMISSIONER
Date	Payee name	
10/08/2024	Murphy Nasica	
Amount (\$)	Payee address; City; State; Zip Code	
\$15,000.00	PO Box 1648	
, — , , , , , , , , , , , , , , , , , ,		
Expenditure from corporate funds	Austin, TX 78767	
PURPOSE		D) Description
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Radio Advertising: In-kind Contribution to Guy Baker
		Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ot Office held
experiorare to benefit C/O	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Codif. Card Baymont

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 co	omplete	e this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 6/17 Rpt: 11/22	#PROJECTREDTX		00082357
4 Date	5 Payee name		I
10/15/2024	Murphy Nasica		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$350.00	PO Box 1648		
Expenditure from corporate funds	Austin, TX 78767		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) r	Description
OF	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE			Check if Austin, TX, officeholder living expense
			Graphics: In-kind Contribution to Cher Montalvo Campaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held
<u> </u>			
Date	Payee name		
10/15/2024	Murphy Nasica		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$239.30	PO Box 1648		
Expenditure from			
corporate funds	Austin, TX 78767		
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 Graphics: In-kind Contribution to Cher Montalvo
			Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u> </u>	Office held
expenditure to benefit C/O		J	
Date	Payee name		
10/15/2024	Murphy Nasica		
Amount (\$)	Payee address; City; State; Zip Ci	odo.	
\$350.00	PO Box 1648	oue	
Ψ000.00	1 0 Box 1040		
Expenditure from corporate funds	Austin, TX 78767		
<u>'</u>		(a) -	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(a) [Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	1 1	Check if Austin, TX, officeholder living expense
			Graphics: In-kind Contribution to Paul Anders
			Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
expenditure to benefit C/O	1		

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	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 7/17 Rpt: 12/22	#PROJECTREDTX 00082357
-	
	5 Payee name
10/15/2024	Murphy Nasica
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	PO Box 1648
- "	
Expenditure from corporate funds	Austin, TX 78767
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LAFLINDITUKE	Check if Austin, TX, officeholder living expense
	Graphics: In-kind Contribution to Sarah Stogner
	Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/15/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$92.06	PO Box 1648
Expenditure from corporate funds	Austin, TX 78767
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
	Texting Service: In-kind Contribution to Adelina Trigo Campaign
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	v
Date	Payee name
10/15/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$873.90	PO Box 1648
ψ013.30	1 0 DOX 10 10
Expenditure from corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LAI LINDITURE	Check if Austin, TX, officeholder living expense
	Texting Service: In-kind Contribution to Al Flores Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this fo	orm.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 8/17 Rpt: 13/22	#PROJECTREDTX			00082357	
4 Date	5 Payee name		<u> </u>		
10/15/2024	Murphy Nasica				
6 Amount (\$)	7 Payee address; City; State; Zip Co	de			
\$2,630.18	PO Box 1648				
— Formandikum fanna					
Expenditure from corporate funds	Austin, TX 78767				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descript	tion		
OF EXPENDITURE	Advertising Expense				plete Schedule T.
		ш		officeholder living	ntribution to Alberto
			es Campai		icibation to Alberto
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght		Office he	eld
expenditure to benefit C/O					
Date	Payee name				
10/15/2024	Murphy Nasica				
Amount (\$)	Payee address; City; State; Zip Co	de			
\$332.33	PO Box 1648				
Expenditure from corporate funds	Austin, TX 78767				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Descript			
EXPENDITURE	Advertising Expense	<u> </u>		de of Texas. Com officeholder living	plete Schedule T.
					ntribution to Aleida Luera
		Campa			
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght		Office he	eld
expenditure to benefit C/O	-				
Date	Payee name				
10/15/2024	Murphy Nasica				
Amount (\$)	Payee address; City; State; Zip Co	de			
\$899.03	PO Box 1648				
Expenditure from corporate funds	Austin, TX 78767				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descript	tion		
OF EXPENDITURE	Advertising Expense	<u> </u>			plete Schedule T.
EXI ENDITORE		ш		officeholder living	• •
			y Service. Ivo Campa		ntribution to Cher
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht		Office he	əld
expenditure to benefit C/O		a		Cilioc III	···

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: 9/17 Rpt: 14/22	#PROJECTREDTX 00082357
4 Date	5 Payee name
10/15/2024	Murphy Nasica
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,677.55	PO Box 1648
Expenditure from corporate funds	Austin, TX 78767
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 Texting Service: In-kind Contribution to Guy Baker
	Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/15/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$3,714.81	PO Box 1648
40,12.102	. 6 26. 26 .6
Expenditure from corporate funds	Austin, TX 78767
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 Texting Service: In-kind Contribution to Maricar
	Chattler Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/15/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$3,755.14	PO Box 1648
ψο,100.14	1 0 20/ 10-10
Expenditure from corporate funds	Austin, TX 78767
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 Texting Service: In-kind Contribution to Norman
	Esquivel Campaign
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 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						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 10/17 Rpt: 15/22	#PROJECTREDTX 00082357					
4 Date	5 Payee name					
10/15/2024	Murphy Nasica					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$313.02	PO Box 1648					
Expenditure from corporate funds	Austin, TX 78767					
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 Texting Service: In-kind Contribution to Pancho					
	Ramirez Campaign					
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
10/15/2024	Murphy Nasica					
Amount (\$)	Payee address; City; State; Zip Code					
\$83.00	PO Box 1648					
Expenditure from						
corporate funds	Austin, TX 78767					
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					
	Texting Service: In-kind Contribution to Paul Anders					
	Campaign					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Date	Payee name					
10/15/2024	Murphy Nasica					
Amount (\$)	Payee address; City; State; Zip Code					
\$101.44	PO Box 1648					
Expenditure from corporate funds	Austin, TX 78767					
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					
	Texting Service: In-kind Contribution to Roberto					
	Lopez Campaign					
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
<u></u>						

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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 co	mplet	te this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 11/17 Rpt: 16/22	#PROJECTREDTX		00082357
4 Date	5 Payee name		·
10/15/2024	Murphy Nasica		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$3,714.81	PO Box 1648		
- Evpanditura from			
Expenditure from corporate funds	Austin, TX 78767		
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 Texting Service: In-kind Contribution to Roger
			Hernandez Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıaht	Office held
expenditure to benefit C/O		9	
Date	Payee name		
10/15/2024	Murphy Nasica		
Amount (\$)	Payee address; City; State; Zip Co	nde	
\$294.32	PO Box 1648	, , ,	
725			
Expenditure from corporate funds	Austin, TX 78767		
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
		!	Texting Service: In-kind Contribution to Wanda
			Cuellar Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office held
expenditure to benefit C/O	Н		
Date	Payee name		
10/24/2024	Murphy Nasica		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$3,000.00	PO Box 1648		
F			
Expenditure from corporate funds	Austin, TX 78767		
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 Radio Advertising: In-kind Contribution to Guy Baker
			Campaign
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	l ıaht	Office held
expenditure to benefit C/O		J	255 11014

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 Committee

Fees Offic Food/Beverage Expense Poll Gift/Awards/Memorials Expense Prin Legal Services Sala

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

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: 12/17 Rpt: 17/22	#PROJECTREDTX 00082357
4 Date	5 Payee name
10/08/2024	Protect and Serve PAC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$39,000.00	PO Box 622
— Formanditura franc	
Expenditure from corporate funds	Austin, TX 78767
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2024	Protect and Serve PAC
Amount (\$)	Payee address; City; State; Zip Code
\$51,000.00	PO Box 622
Expenditure from corporate funds	Austin, TX 78767
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Contribution
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/24/2024	Protect and Serve PAC
Amount (\$)	Payee address; City; State; Zip Code
\$62,000.00	PO Box 622
Expenditure from corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Continuation
Complete CMLV if alian-	Condidate/Officeholder name Office cought
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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 13/17 Rpt: 18/22	#PROJECTREDTX 00082357
4 Date	5 Payee name
10/08/2024	Raven Public Affairs
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$9,178.39	PO Box 793
- "	
Expenditure from corporate funds	Austin, TX 78767
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
	Graphics/Pushcards: In-kind Contribution to Alberto Olivares Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/08/2024	Raven Public Affairs
Amount (\$)	Payee address; City; State; Zip Code
\$10,041.06	PO Box 793
— Forestitus from	
Expenditure from corporate funds	Austin, TX 78767
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
	Graphics/Pushcards: In-kind Contribution to Norman Esquivel Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/08/2024	Raven Public Affairs
Amount (\$)	Payee address; City; State; Zip Code
\$10,041.06	PO Box 793
Expenditure from corporate funds	Austin, TX 78767
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.
D. LIBITORE	Check if Austin, TX, officeholder living expense
	Graphics/Pushcards: In-kind Contribution to Norman Esquivel Campaign
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/Officenolder/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: 14/17 Rpt: 19/22	#PROJECTREDTX 00082357							
4 Date	5 Payee name							
10/08/2024	Raven Public Affairs							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$8,242.65	PO Box 793							
Expenditure from corporate funds	Austin, TX 78767							
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 Graphics/Pushcards: In-kind Contribution to Guy							
	Baker Campaign							
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OI								
Date	Payee name							
10/08/2024	Raven Public Affairs							
Amount (\$)	Payee address; City; State; Zip Code							
\$8,642.29	PO Box 793							
— Formanditure from								
Expenditure from corporate funds	Austin, TX 78767							
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.							
EXPENDITORE	Check if Austin, TX, officeholder living expense							
	Graphics/Pushcards: In-kind Contribution to Guy Baker Campaign							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
experientare to benefit ever								
Date	Payee name							
10/01/2024	Ross Fischer Law							
Amount (\$)	Payee address; City; State; Zip Code							
\$400.00	430 Old Fitzhugh, No. 7							
X Expenditure from corporate funds	Dripping Springs, TX 78620							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.							
EXI ENDITORE	Check if Austin, TX, officeholder living expense							
	Legal Consulting Services							
One make the ONE Wife diagram	Outstide to 10 ff and held an arrange of the second to							
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) Event Expense Fees Advertising Expense Accounting/Banking

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/17 Rpt: 20/22	#PROJECTREDTX 00082357
4	Date	5 Payee name
	10/15/2024	Surfshark
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$13.99	16192 Coastal Hwy
Χ		Lews, DE 19958
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	10/15/2024	Texas Trade Graphics
	Amount (\$)	Payee address; City; State; Zip Code
	\$413.00	2935 Irving Suite 201
	Expenditure from corporate funds	Dallas, TX 75247
	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 Signs: In-kind Contribution to Princess Gonzalez Campaign
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/15/2024	Texas Trade Graphics
	Amount (\$) \$462.60	Payee address; City; State; Zip Code 2935 Irving Suite 201
	Expenditure from corporate funds	Dallas, TX 75247
	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 Signs: In-kind Contribution to Rogelio Hernandez Campaign
	Complete ONLY if direct expenditure to benefit C/OF	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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.	OTTLEN (etite) a category flot listed above)						
1 Total pages Schedule F1:		,	3 Filer ID (Ethics Commission F	-ilers)					
Sch: 16/17 Rpt: 21/22	#PROJECTREDTX		00082357	,					
4 Date	5 Payee name								
10/14/2024	UPS								
6 Amount (\$)	7 Payee address; City; State; Zip Co	7 Payee address; City; State; Zip Code							
\$84.41	1108 Lavaca St. #110								
X Expenditure from corporate funds	Austin, TX 78701								
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description							
OF EXPENDITURE	Office Overhead/Rental Expense	l <u>–</u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense						
		Shipping	, 17, Unicertaider living expense						
		Gppg							
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	<u> </u> aht	Office held						
expenditure to benefit C/OI		igrit	Office field						
Date	Payee name								
10/15/2024	de la Rosa, Ernest								
Amount (\$)	Payee address; City; State; Zip Co	ode							
\$766.53	11340 Alamo Ranch Pkwy #316								
Expenditure from									
corporate funds	San Antonio, TX 78256								
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description							
OF EXPENDITURE	Advertising Expense								
EXPENDITORE		🗀	, TX, officeholder living expense						
		Mailers							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	· ·	Office held						
experientare to benefit ever	Gonzalez, Juan LA SALL	E CO COMMISSI	ONER						
Date	Payee name								
10/15/2024	de la Rosa, Ernest								
Amount (\$)	Payee address; City; State; Zip Co	ode							
\$766.53	11340 Alamo Ranch Pkwy #316								
Expenditure from corporate funds	San Antonio, TX 78256								
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description							
OF	Advertising Expense		outside of Texas. Complete Schedule T.						
EXPENDITURE	3 1	Check if Austin	, TX, officeholder living expense						
		Mailers							
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight	Office held						
expenditure to benefit C/OI	Rodriguez, Miguel LA SALL	E COUNTY SHE	RIFF						

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 Salarice/Magas/Contract Labor

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ı - I Coı	nmittee Le	ft/Awards/Memorials gal Services he Instruction Gu					Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME					T ₃	Filer ID	(Ethics Commission Filers)	┪
	Sch: 17/17 Rpt: 22/22	_	#PROJECTR	EDTX					00082357	,	
4	Date	5	Payee name								П
	10/15/2024		de la Rosa, E	rnest							
6	Amount (\$)	7	Payee address	; City;	State;	Zip Co	de				
	\$766.54		11340 Alamo	Ranch Pkwy #	#316						
<u> </u> _	Expenditure from										
L	corporate funds		San Antonio,								
8	PURPOSE OF	(a)		Categories listed at th	e top of this sch	edule)	(b) Description				
	EXPENDITURE		Advertising E	xpense			<u> </u>		ide of Texas. Com , officeholder living		
							Mailers	III, I A	., onicendidei iivini	y expense	
							Mailers				
Ļ	Operation ONE VIII II	<u> </u>		la a lal a se se		N(f)			6‴ :	-1.4	4
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	enoider name		Office sou		,	Office he	eia	
L		· 1	Kay, Myrna		L	A SALL	E COUNTY TAX	•			