CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Com 0002118	mission Filers) 36	2 Total pages filed:138
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
	OFFICEHOLDER	The Honorable	Richard E. Pe	ena		
	NAME					Date Received
						ELECTRONICALLY FILED
		NICKNAME	LAST		SUFFIX	01/15/2025
			Raymond			
L						
4	CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP	T/SUITE#; CI	IY;	ZIP CODE	Date Hand-delivered or Date Postmarked
	MAILING	PO Box 450349				Dessist #
	ADDRESS					Receipt # Amount
	Change of Address	Laredo, TX 78045				
						Date Processed
						Date Imaged
5	CAMPAIGN	MS / MRS / MR	FIRST		MI	
	TREASURER NAME		Eva			
		NICKNAME	LAST		SUFFIX	
			Raymond		30111X	
			Raymonu			
6	CAMPAIGN	STREET ADDRESS (NO P	O BOX PLEASE);	A	PT / SUITE #; CITY	; STATE; ZIP CODE
	TREASURER ADDRESS	11024 Winburn Drive				
	(Residence or Business)	Laredo, TX 78045				
7	CAMPAIGN	AREA CODE PHO	ONE NUMBER	EXTENSION		
	TREASURER	(956) 286-9500				
	PHONE	(330) 200 3300				
8	REPORT					
ľ	TYPE	X January 15	30th day before		Runoff	15th day after campaign treasurer
			Sour day below			appointment (officeholder only)
		July 15	8th day before	election	Exceeded modified	Final Report (Attach C/OH-FR)
					reporting limit	
9	PERIOD	Month Day Year			Month Day	Year
ľ	COVERED	07/01/2024		HROUGH	12/31/20	
		01101/2024			12/01/20	27
110	ELECTION	ELECTION DATE			ELECTION TYPE	
		Month Day Year		Primary	Runoff	Other
		11/05/2024		General	Special	
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	T (if known)
	OFFICE	State Representative Dis	strict 12 Wohh			ntative District 42
		State Representative Dis			State Represer	lialive District 42
L						
1						
1			60.	TO PAGE 2	,	
L						
Fo	rms provided by Te	xas Ethics Commission	www.et	thics.state.tx.	.us	Version V4.1.0.48da51f7

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2** 2 of 138

13 C / OH NAME	Raymond, Richard E	Pena (The Honorable)	14 Filer ID (00021186	Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	ditures made by political co out the candidate's or office ation only if they receive not	holder's knowledge or						
Additional Pages	COMMITTEE TYPE	TEE TYPE COMMITTEE NAME						
	GENERAL	Representative Richard Pena Raymond Future of Texas Fund						
		COMMITTEE ADDRESS						
	X SPECIFIC	PO Box 450349						
		Laredo, TX 78045						
		COMMITTEE CAMPAIGN TREASURER NAME						
		Raymond, Richard						
		COMMITTEE CAMPAIGN TREASURER ADD	RESS					
		11024 Winburn Drive						
		Laredo, TX 78045						
16 CONTRIBUTION TOTALS		L IZED POLITICAL CONTRIBUTIONS (OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	ANS)	\$ 1,002,324.00				
EXPENDITURE TOTALS		\$ 14,919.33						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 168,816.74				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	E LAST DAY OF THE	\$ 1,145,303.90				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	AS OF THE LAST DAY	\$ 0.00				
17 AFFIDAVIT		l swear, or affirm, under per true and correct and include under Title 15, Election Coc	es all information required to					
		The Honora	ble Richard E. Pena Ra	ymond				
		Signatur	e of Candidate or Officehold	der				
AFFIX NO	TARY STAMP / SEAL AB	DVE						
Sworn to and subso	cribed before me. bv the s	aid	, this the	day				
		ertify which, witness my hand and seal of office.						
Signature of offic	cer administering	Printed name of officer administering	Title of officer	administering oath				
L Forme provided by To	vac Ethics Commission	www.ethics.state.tv.us		Version V/1 1 0 /18da51f7				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 138

18 FILER NAME Raymond, R	Richard E. Pena (The Honorable)	19 Filer ID 00021186	(Ethics Commissi	on Filers)
20 SCHEDULE S	SUBTOTALS		SUBTOTAL	AMOUNT
NAME OF SC	CHEDULE			Amoenti
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	987,382.00
2. X S	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	14,942.00
3. 🗌 S	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. 🗌 S	SCHEDULE E: LOANS		\$	
5. X S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	126,551.24
6. 🗌 S	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. 🗌 S	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. X S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	39,702.50
9. X S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,563.00
10. 🗌 S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11. 🔲 S	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIC	DNS	\$	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	10,300.00

	The Instru	ction Guide explains how to complete	this fo	rm.	1	Total pages Schedule A1: Sch: 1/68 Rpt: 4/138	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
[ichard E. Pena (The Honorable)			Ū	00021186	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	12/12/2024	4-G Investments, LLC					\$10,000.00
		6 Contributor address; City; State; Zip Code					
		Laredo, TX 78045					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
F	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	11/13/2024	A&M Political Action Committee					\$1,000.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78768					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
⊨	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	12/09/2024	ACT for Texas Classroom Teachers Asso					\$2,000.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78767					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	10/31/2024	AT&T Texas PAC					\$1,000.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
F	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	12/05/2024	Ahlberg, Trevor L					\$2,500.00
		Contributor address; City; State; Zip Code					
		Irving, TX 75038					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	CEO			Cottonwood Financial			
⊢			I				

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/68 Rpt: 5/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Raymond, R	Richard E. Pena (The Honorable)	ļ		00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/25/2024	Alaniz, Hector A.				\$250.00
	I	6 Contributor address; City; State; Zip Code				
	I					
		Laredo, TX 78041				
8			9 Employer (See Instructions)			
	realtor/owne	r	REMAX Real Estate Ser	rvi	ces	
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/30/2024	Alonzo-Villarreal, Elizabeth				\$100.00
	1	Contributor address; City; State; Zip Code				
	I					
	I					
	<u> </u>	Laredo, TX 78041		Ĺ		
	Principal occu CEO	ipation / Job title (See Instructions)	Employer (See Instructions))		
		<u> </u>	NeighborWorks Laredo	—		
	Date	Full name of contributor volt-of-state PAC (ID#: C)		Amount of Contribution (\$)	
	09/11/2024	Altria Group Inc PAC				\$1,000.00
	I	Contributor address; City; State; Zip Code	ļ			
	I					
	I	Washington, DC 20001	ļ			
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	ل ۱		
	·		p.=,=. (==== ,	,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	11/05/2024	American Council of Engineering Companies Co				\$500.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
L			I			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/04/2024	American Electric Power Committee - Texas - Co	ommittee for Responsible			\$3,000.00
	1	Contributor address; City; State; Zip Code				
	I					
	I					
\vdash		Washington, DC 20004		Ļ		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))		
		J	ı			

1110 111011-0	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/68 Rpt: 6/138	
2 FILER NAME			3 Filer ID (Ethics Commission	n Filers)
	chard E. Pena (The Honorable)		00021186	
4 Date 11/18/2024	 5 Full name of contributor out-of-state PAC (ID#:_ American Pharmacy Inc GPAC 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$)	\$1,000.00
Principal occur	Corpus Christi, TX 78401 pation / Job title (See Instructions)	9 Employer (See Instructions)		
ο Μιτισμάι ουσαγ				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/29/2024	Americans For Citizen Voting PAC			\$2,500.00
	Contributor address; City; State; Zip Code			
	Woodbridge, VA 22913			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/21/2024	Ancira Strategic Partners LLP			\$500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)		
Principal occur Date			Amount of Contribution (\$)	
	pation / Job title (See Instructions)			\$500.00
Date	Full name of contributor out-of-state PAC (ID#:			\$500.00
Date 10/02/2024	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Angel Care Provider Services LLC Contributor address; City; State; Zip Code Laredo, TX 78046)	Amount of Contribution (\$)	\$500.00
Date 10/02/2024	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Angel Care Provider Services LLC Contributor address; City; State; Zip Code 		Amount of Contribution (\$)	\$500.00
Date 10/02/2024	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Angel Care Provider Services LLC Contributor address; City; State; Zip Code Laredo, TX 78046)	Amount of Contribution (\$)	\$500.00
Date 10/02/2024 Principal occur	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Angel Care Provider Services LLC Contributor address; City; State; Zip Code Laredo, TX 78046 Dation / Job title (See Instructions))	Amount of Contribution (\$)	\$500.00
Date 10/02/2024 Principal occur Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Angel Care Provider Services LLC Contributor address; City; State; Zip Code Laredo, TX 78046 Dation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
Date 10/02/2024 Principal occur Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Angel Care Provider Services LLC Contributor address; City; State; Zip Code Laredo, TX 78046 Dation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Aranda, Javier R)	Amount of Contribution (\$)	
Date 10/02/2024 Principal occur Date 12/13/2024	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Angel Care Provider Services LLC Contributor address; City; State; Zip Code Laredo, TX 78046 Dation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Aranda, Javier R Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 4/68 Rpt: 7/138
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		ichard E. Pena (The Honorable)		00021186
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	12/09/2024	Archer, Christian		\$10,000.00
		6 Contributor address; City; State; Zip Code		
		San Antonio, TX 78212-3409		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)
	consultant		self	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/06/2024	Arenaz, Pablo	/	\$2,500.00
		Contributor address, City, State, Zip Code		
		Laredo, TX 78041		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions) ;)
	President		Texas A & M Internation	
				-
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/24/2024	Associated Builders & Contractors of TX PAC		\$1,000.00
		Contributor address; City; State; Zip Code		
		Austin, TX 78767		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/23/2024	Associated General Contractors of Texas PAC		\$1,500.00
		Contributor address; City; State; Zip Code		
		Austin, TX 78768		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/26/2024	Atmos Energy Corporation PAC	······································	\$1,500.00
		Contributor address; City; State; Zip Code		
		Contributor address, ony, State, Zip Code		
		Dallas, TX 75240		
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	l;)
				7

-	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 5/68 Rpt: 8/138	
2 [FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Richard E. Pena (The Honorable)			00021186	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4 [Date	5 Full name of contributor Out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
-	10/08/2024	Austin Firefighters Association PPAC				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		Austin, TX 78752		Ĺ		
8 1	^o rincipal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
[Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
-	10/22/2024	Avalos, Francisco				\$1,000.00
		Contributor address; City; State; Zip Code		1		
	<u> </u>	San Antonio, TX 78229		Ĺ		
	•	ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	attorney		self	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
-	11/08/2024	BEN-HUR Enterprises, Ltd				\$5,000.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78044				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ال</u>		
				')		
[Date	Full name of contributor out-of-state PAC (ID#:_	·)	Γ	Amount of Contribution (\$)	
	12/11/2024	Barajas, Juan de Jesus				\$500.00
		Contributor address; City; State; Zip Code		1		
		Landa TV 20041 0100				
	Dringing oog	Laredo, TX 78041-9108 Ipation / Job title (See Instructions)	Employer (Cool Instructions			
	Principal occu real estate ir		Employer (See Instructions self	5)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀርብ በብ
	09/16/2024	Barragan, Mario				\$50.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78041				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L		
		External Affairs	AT&T	.,		
1						-

The Instruction Guide explains how to complete this form. 3 2 FILER NAME 3 Raymond, Richard E. Pena (The Honorable) 3	Total pages Schedule A1: Sch: 6/68 Rpt: 9/138 Filer ID (Ethics Commission Filers) 00021186
Raymond, Richard E. Pena (The Honorable) 4 Date 5 Full name of contributor Out-of-state PAC (ID#:) 7 10/08/2024 Barraza, Blake 7	
Raymond, Richard E. Pena (The Honorable) 4 Date 5 Full name of contributor Out-of-state PAC (ID#:) 7 10/08/2024 Barraza, Blake 7	
10/08/2024 Barraza, Blake	00021100
	Amount of Contribution (\$)
	\$250.00
6 Contributor address; City; State; Zip Code	
Laredo, TX 78045	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
physician United Medical Center	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/24/2024 Bemporad, Raphael	\$25.00
Contributor address; City; State; Zip Code	
New York, NY 11231	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Marketing BBMG	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/24/2024 Bemporad, Raphael	\$25.00
Contributor address; City; State; Zip Code	
New York, NY 11231	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	<u> </u>
Marketing BBMG	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/24/2024 Bemporad, Raphael	\$25.00
Contributor address; City; State; Zip Code	
New York, NY 11231	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Marketing BBMG	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	\$25.00
10/24/2024 Bemporad, Raphael	
10/24/2024 Bemporad, Raphael Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code New York, NY 11231	
Contributor address; City; State; Zip Code	

Γ	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/68 Rpt: 10/138	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
		Richard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/24/2024	Bemporad, Raphael				\$25.00
		6 Contributor address; City; State; Zip Code		1		
Ļ	<u></u>	New York, NY 11231	1	Ļ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Marketing		BBMG	,		
	Date)	Ţ	Amount of Contribution (\$)	
	10/11/2024	Benavides , Arturo Tomas				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Laredo, TX 78041				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	rancher		self			
\square	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Benavides , Luis M. (Dr.)				\$1,000.00
		Contributor address; City; State; Zip Code		"		
		Laredo, TX 78041				
		upation / Job title (See Instructions)	Employer (See Instructions			
	physician		Laredo Premier Healthca	care		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/11/2024	Berlanga, Hugo				\$1,000.00
		Contributor address; City; State; Zip Code		"		
		Corpus Christi, TX 78404				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	governmenta	al affairs	self			
	Date	Full name of contributor out-of-state PAC (ID#:)	/	Amount of Contribution (\$)	
	11/21/2024	Blake, Gary R. (Mr.)				\$25,000.00
		Contributor address; City; State; Zip Code		"		
		Fort Worth, TX 76109				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions			
	president		Creative Solutions in He	ealth	care, Inc.	

	The Instru	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/68 Rpt: 11/138	
2	FILER NAME				3	Filer ID (Ethics Commissi	on Filers)
		Richard E. Pena (The Honorable))			00021186	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/27/2024	Boggio, Daniel L.					\$7,500.00
		6 Contributor address; City; State			1		
Ļ	Drizoinal agai	Houston, TX 77046		Employer (Cap Instructions			
8	Principal occu architect	pation / Job title (See Instructions)		9 Employer (See Instructions self	5)		
╘							
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	±10,000,00
	10/28/2024	Border Health PAC					\$10,000.00
		Contributor address; City; State	e; Zip Code				
		McAllen, TX 78504					
—	Principal occu	Ipation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ג)		
		, , , , , , , , , , , , , , , , , , ,			,		
╞─	Date	Full name of contributor	out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	10/29/2024	Brock, Mark		/		Amount of Continuation (+)	\$1,000.00
	10,11.1	Contributor address; City; State					+=,
			5, Zip 0000				
		College Station, TX 77845					
		ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	real estate			self			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/10/2024	Brotherhood of Locomotive	-				\$500.00
		Contributor address; City; State					
┡	Drizoinal agai	Decatur, TX 76234		Employer (Cap Instructions			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
╞		□ □			1		
	Date 09/27/2024	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	0312112024		Zin Codo				φ2,300.00
		Contributor address; City; State	e; Zip Code				
		Houston, TX 77024					
⊢	Principal occu	I upation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ة)		
	developer/ge	eneral contractor		The Brownstone Group,	In	С.	
⊢			1				

Th	ne Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 9/68 Rpt: 12/138
2 FIL	LER NAME			3 Filer ID (Ethics Commission Filers)
Ra	aymond, R	ichard E. Pena (The Honorable)		00021186
4 Dat	ate	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/	9/25/2024	Brown, Jed		\$5,000.00
	1	6 Contributor address; City; State; Zip Code		
		Houston, TX 77057		
8 Pri	incipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>
	ontractor		The Brownstone Group	
Dat	ate	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09	9/25/2024	Brown, Wil		\$2,500.00
	I	Contributor address; City; State; Zip Code		
Dri	incipal occu	Houston, TX 77057 pation / Job title (See Instructions)	Employer (See Instructions	
	incipal occu eveloper	pation / Job title (See instructions)	Employer (See Instructions The Brownstone Group	
	-			1
Dat 08	ate 3/22/2024	Full name of contributor out-of-state PAC (ID#: Brumback, Mark (Mr.))	Amount of Contribution (\$) \$15,000.00
00,	12212027			φ13,000.00
		Contributor address; City; State; Zip Code		
	I	Plano, TX 75024		
		pation / Job title (See Instructions)	Employer (See Instructions	3)
sm	nall busine	ss owner	SSS International	
Dat		Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/	0/29/2024	Brumback, Mark (Mr.)		\$15,000.00
	I	Contributor address; City; State; Zip Code		
		Plano, TX 75024		
Pri	incipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)
	nall busine		SSS International	,
Dat	ate	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/	L/21/2024	CFK Living Trust		\$9,750.00
	I	Contributor address; City; State; Zip Code		
		Houston TV 77024 7124		
Dri	incipal occu	Houston, TX 77024-7124	Employer (Soo Instructions	
PIII	псіраї осси	pation / Job title (See Instructions)	Employer (See Instructions	<i>i</i>)

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	The Instru	ction Guide explains how to complete	this f	orm.	1	Total pages Schedule A1: Sch: 10/68 Rpt: 13/138	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
- _		ichard E. Pena (The Honorable)			-	00021186	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:_)	7	Amount of Contribution (\$)	
	11/01/2024	CKF Living Trust					\$9,750.00
		6 Contributor address; City; State; Zip Code					
		Houston, TX 77024					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date		AC (ID#:_)		Amount of Contribution (\$)	
	11/21/2024						\$750.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78701					
-	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>۱</u>		
	Ριποιραί σουα)		
	Data					Amount of Contribution (\$)	
	Date 09/25/2024	Full name of contributor out-of-state PA	AC (ID#:_)		Amount of Contribution (\$)	\$1,000.00
	0912012024						Φ1,000.00
		Contributor address; City; State; Zip Code					
		Laredo, TX 78045					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Physician			Chess Med Group			
	Date	Full name of contributor out-of-state PA	AC (ID#:_)		Amount of Contribution (\$)	
	12/12/2024	Capital Voice Consulting					\$1,000.00
		Contributor address; City; State; Zip Code					
		Irving, TX 75061					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state PA	AC (ID#:_)		Amount of Contribution (\$)	
	12/14/2024	Casasnovas, James					\$1,000.00
		Contributor address; City; State; Zip Code					
		Pharr, TX 78577					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	construction			self	,		

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 11/68 Rpt: 14/138	
2	FILER NAME			3 Filer ID (Ethics Commission F	ilers)
		ichard E. Pena (The Honorable)		00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
	09/14/2024	Castillo, Juan		5	\$100.00
		6 Contributor address; City; State; Zip Code		•	
		Laredo, TX 78745			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
	CFO		Texas A&M Internationa	al University	
⊨	Date	Full name of contributor X out-of-state PAC (ID#: C	00148031	Amount of Contribution (\$)	
	08/23/2024	Caterpillar Employees Political Action Committee			.,000.00
	00/20/2021		5		.,000.00
		Contributor address; City; State; Zip Code			
		Peoria, IL 61629			
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	Fincipal occu			(3)	
╘					
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	12/13/2024	Cavazos, Guillermo			\$500.00
		Contributor address; City; State; Zip Code			
		Laredo, TX 78045			
		pation / Job title (See Instructions)	Employer (See Instructions	IS)	
	architect		Cavazos Architects		
	Date	Full name of contributor X out-of-state PAC (ID#: C) (00397851	Amount of Contribution (\$)	
	09/19/2024	Centene Corporation Political Action Committee			\$750.00
		Contributor address; City; State; Zip Code			
		St Louis, MO 63105			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date	Full name of contributor X out-of-state PAC (ID#: C)	Amount of Contribution (\$)	
	12/01/2024	CenterPoint Energy Inc. Texas Political Action C	committee	\$2	,500.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77210			
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	-				
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	The Instru	ction Guide explains how to comp	olete this fo	orm.	1	Total pages Schedule A1: Sch: 12/68 Rpt: 15/138	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
-		ichard E. Pena (The Honorable)			C	00021186	Ji i iioio,
4	Date	5 Full name of contributor 🗌 out-of-st	tate PAC (ID#:)	7	Amount of Contribution (\$)	
	11/20/2024	Charter Schools Now PAC					\$1,000.00
		6 Contributor address; City; State; Zip Coc	de				
		Austin, TX 78767					
8	Principal occu	pation / Job title (See Instructions)	1	9 Employer (See Instructions)		
F	Date	Full name of contributor 🔲 out-of-st	tate PAC (ID#:)		Amount of Contribution (\$)	
	09/26/2024	Clay, Ryan (Mr.)					\$250.00
		Austin, TX 78701					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	attorney			self			
╞	Date	Full name of contributor X out-of-st	tate PAC (ID#: <u>C</u>			Amount of Contribution (\$)	
	10/08/2024	Comcast Corporation & NBCUnivers				· · · · · · · · · · · · · · · · · · ·	\$1,000.00
		Contributor address; City; State; Zip Coc					
			uc				
		Philadelphia, PA 19103					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
F	Date	Full name of contributor out-of-st	tate PAC (ID#:)		Amount of Contribution (\$)	
	11/21/2024	Congress Avenue Partners PAC					\$1,000.00
		Contributor address; City; State; Zip Coc	de				-
		Austin, TX 78701					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
⊨	Date	Full name of contributor out-of-st	tate PAC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Connolly, T J	·····			• •	\$500.00
		Contributor address; City; State; Zip Coc	de				
			uc				
		San Antonio, TX 78209					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	CEO			Connolly Communicatio	n S	strategies, LLC	
⊢			I				

SCHEDULE A	1\
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 13/68 Rpt: 16/138
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	lichard E. Pena (The Honorable)		00021186
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/11/2024	Connor, Geoffrey		\$100.00
	6 Contributor address; City; State; Zip Code		1
	Bastrop, TX 78602	-	
	pation / Job title (See Instructions)	9 Employer (See Instructions	
attorney		Geoffrey S. Connor, PLI	LC
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/11/2024	Cruz, Juan Jose (Mr.)		\$1,200.00
	Contributor address; City; State; Zip Code		1
	Laredo, TX 78045		
	pation / Job title (See Instructions)	Employer (See Instructions	
Attorney		J. Cruz & Associates, LL	LC
Date	Full name of contributor 🔲 out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/05/2024	Davenport, Dean		\$5,000.00
	Contributor address; City; State; Zip Code		1
	Catarina, TX 78836	<u> </u>	
	ipation / Job title (See Instructions)	Employer (See Instructions	s)
water indust	ry	Weco West	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/06/2024	De Anda, Javier (Mr.)		\$5,000.00
	Contributor address; City; State; Zip Code]
	Landa TV 70044		
Drinsing Loopu	Laredo, TX 78044		<u> </u>
-	ipation / Job title (See Instructions)	Employer (See Instructions B.P. Newman Investmer	,
partner			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/23/2024	Deanda, Hector		\$1,000.00
	Contributor address; City; State; Zip Code		
	Larada TV 70041		
D in single age	Laredo, TX 78041		
	ipation / Job title (See Instructions)	Employer (See Instructions	5)
logistics		self	

	The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 14/68 Rpt: 17/138	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
-		ichard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/13/2024	Deason, Doug				\$1,500.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75229				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	investor		DCS			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/26/2024	Delgado, Jorge				\$1,500.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78041				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	insurance		Delgado Insurance			
	Date	Full name of contributor X out-of-state PAC (ID#:	C00211318)		Amount of Contribution (\$)	
	12/06/2024	Deloitte Political Action Committee				\$1,000.00
		Contributor address; City; State; Zip Code				·
		Washington, DC 20044				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor X out-of-state PAC (ID#:_	C00782292)		Amount of Contribution (\$)	
	10/04/2024	DentaQuest Political Action Committee Texas				\$1,000.00
		Contributor address; City; State; Zip Code				
		Boston, MA 02129				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/15/2024	Dilworth Jr., Blackstone (Mr.)				\$10,000.00
		Contributor address; City; State; Zip Code				
		Sandia, TX 76383				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	owner/develo		Dillworth Development			
┢─		<u></u>				

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 15/68 Rpt: 18/138
2	2 FILER NAME			3	Filer ID (Ethics Commission Filers)
		ichard E. Pena (The Honorable)			00021186
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)
	12/03/2024	Dilworth Jr., Blackstone (Mr.)			\$30,000.00
		6 Contributor address; City; State; Zip Code		1	
		Sandia, TX 76383			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	owner/devel	oper	Dillworth Development		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)
	10/30/2024	Dominguez, Arturo	/		\$350.00
				ł	
		Contributor address, City, State, Zip Code			
		Laredo, TX 78041			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	customs bro	ker	self		
⊨	Date	Full name of contributor X out-of-state PAC (ID#:	C00363879)	Г	Amount of Contribution (\$)
	11/05/2024	ENPAC Texas	,		\$1,000.00
		Contributor address; City; State; Zip Code		ł	
		Austin, TX 78701			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
F	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	10/02/2024	Earl, David			\$15,000.00
		Contributor address; City; State; Zip Code		1	
		Helotes, TX 78023			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	attorney		Earl and Associates, PC	2	
F	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	12/05/2024	Earl, David			\$15,000.00
		Contributor address; City; State; Zip Code		1	
1		Helotes, TX 78023			
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
I	attorney		Earl and Associates, PC	2	
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/68 Rpt: 19/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_		tichard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/30/2024	Efficient Soccer Training				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		San Antonio, TX 78216				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date	Full name of contributor X out-of-state PAC (ID#: C)	Γ	Amount of Contribution (\$)	
	09/27/2024	Elevance Health PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		1				
		Washington, DC 20004				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
			1			
	Date	Full name of contributor	00082792)	Γ	Amount of Contribution (\$)	
	08/06/2024	Eli Lilly and Company Political Action Committee			• •	\$1,500.00
		Contributor address; City; State; Zip Code				
		1				
		Indianapolis, IN 46285				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
		ļ	I			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/29/2024	Emami Development LLC				\$2,500.00
		Contributor address; City; State; Zip Code				
		1				
		Laredo, TX 78045				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor X out-of-state PAC (ID#: C	.00097568)		Amount of Contribution (\$)	
	09/18/2024	Employees of RTX Corporation PAC				\$750.00
		Contributor address; City; State; Zip Code				
		1				
		1				
		Arlington, VA 22209				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))		
			l			
1						

The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 17/68 Rpt: 20/138	
2 FILER NAME	3	Filer ID (Ethics Commissio	on Filers)
Raymond, Richard E. Pena (The Honorable)		00021186	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
11/08/2024 Esquivel Arredondo, Carmen A			\$500.00
6 Contributor address; City; State; Zip Code			
Laredo, TX 78045			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction	ns)		
Date Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
10/02/2024 Falic, Simon (Mr.)			\$2,500.00
Contributor address; City; State; Zip Code			
Hollywood, FL 33024			
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)		
Chairman Duty Free America Inc.	:.		
Date Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
12/11/2024 Fernandez, Oscar		/ uncount of 22111111111 (\$300.00
Contributor address; City; State; Zip Code			· · · · ·
Laredo, TX 78045-8119			
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)		
customs broker OF Group			
Date Full name of contributor out-of-state PAC (ID#:)	$\overline{}$	Amount of Contribution (\$)	
09/05/2024 Fiesta Primary Home Care, LLC		/ uncant of contact and (.)	\$1,001.00
Contributor address; City; State; Zip Code			Ψ±,002.22
Contributor address, City, State, Zip Code			
Laredo, TX 78041			
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)		
	,		
Date Full name of contributor out-of-state PAC (ID#:)	$\overline{}$	Amount of Contribution (\$)	
09/06/2024 Flores, Enrique "Henry"		Allount of Contribution (*)	\$1,000.00
			Ψ1,000.00
Contributor address; City; State; Zip Code			
Austin TX 78735			
Austin, TX 78735	26)		
Principal occupation / Job title (See Instructions) Employer (See Instruction			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/68 Rpt: 21/138	
2	FILER NAME			2	Filer ID (Ethics Commissio	on Filers)
		ichard E. Pena (The Honorable)			00021186	511111013)
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/26/2024	Flores, Juan Jose				\$2,500.00
		6 Contributor address; City; State; Zip Code		1		
		Laredo, TX 78041				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	president		JJ Flores Roofing			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	11/21/2024	Focused Advocacy Political Action Committee (F			(1)	\$2,500.00
	11/21/2021	Contributor address; City; State; Zip Code	,,	•		<i>\$2,000.00</i>
		Contributor address, City, State, Zip Code				
		Austin, TX 78701				
⊢	Dringing ogg	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Philipal Occu		Employer (See Instructions	5)		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/18/2024	Foley & Lardner LLP Texas Campaign Fund				\$1,000.00
		Contributor address; City; State; Zip Code		1		
L		Dallas, TX 75201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2024	GM Group Enterprises, LLC				\$500.00
		Contributor address; City; State; Zip Code		1		
		Laredo, TX 78043				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
⊨	Date	Full name of contributor X out-of-state PAC (ID#: C	00440453	Г	Amount of Contribution (\$)	
	11/18/2024	Gainwell Holding Corp PAC (Gainwell PAC)	/		(1)	\$2,000.00
		Contributor address; City; State; Zip Code		•		+=,000100
		Contributor address, City, State, Zip Code				
		Conway, AR 72034				
-	Principal accu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	r nncipal occu)		

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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 19/68 Rpt: 22/138	
2	FILER NAME			3	Filer ID (Ethics Commissi	ion Filers)
[Richard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/04/2024	Galo, Anna (Ms.)				\$2,500.00
		6 Contributor address; City; State; Zip Code		1		
		Laredo, TX 78041				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	rancher		self employed			
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	10/25/2024	Gamboa, Alan				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Laredo, TX 78040				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	owner		Metro by T-Mobile			
	Date	Full name of contributor out-of-state PAC (ID#:_	· :)	Γ	Amount of Contribution (\$)	
	10/08/2024	Garcia, Daniel Hector				\$10,000.00
		Contributor address; City; State; Zip Code		1		
		Laredo, TX 78045				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	managemen	nt consulting professional services	self			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/30/2024	Garcia, Oscar				\$500.00
		Contributor address; City; State; Zip Code		1		
		Brownsville, TX 78521				
	•	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	regional vice	president	Broaddus Companies			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/10/2024	Garrett, Jon				\$5,000.00
		Contributor address; City; State; Zip Code		1		
		Waxahachie, TX 75165				
Γ		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	CEO		Apex Site Services			

	The Instru	ction Guide explains how to compl	ete this fo	rm.	1	Total pages Schedule A1: Sch: 20/68 Rpt: 23/138	
2	FILER NAME				3	Filer ID (Ethics Commissi	on Filers)
	Raymond, R	ichard E. Pena (The Honorable)				00021186	,
4	Date	5 Full name of contributor out-of-stat	te PAC (ID#:)	7	Amount of Contribution (\$)	
	12/06/2024	Garza, Alfonso					\$250.00
		6 Contributor address; City; State; Zip Code					
		Dallas, TX 75238					
8	Principal occu	pation / Job title (See Instructions)	!	9 Employer (See Instructions	;)		
F	Date	Full name of contributor out-of-stat	te PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Garza, Ana					\$500.00
		Contributor address; City; State; Zip Code					
		McAllen, TX 78504					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	general cour	isel		Wyatt Ranches			
	Date	Full name of contributor out-of-sta	te PAC (ID#:)		Amount of Contribution (\$)	
	12/11/2024	Garza, Armando Quintero					\$500.00
		Contributor address; City; State; Zip Code	Э				
		San Antonio, TX 78209					
	•	pation / Job title (See Instructions)		Employer (See Instructions)		
	president			ALFA of Laredo			
	Date	Full name of contributor out-of-stat	te PAC (ID#:)		Amount of Contribution (\$)	
	11/11/2024	Garza, Francisco					\$5,000.00
		Contributor address; City; State; Zip Code	9				
		San Antonio, TX 78261	r				
	•	pation / Job title (See Instructions)		Employer (See Instructions)		
	developer			self			
	Date		te PAC (ID#:)		Amount of Contribution (\$)	
	08/14/2024	Garza, Glenda					\$10,000.00
		Contributor address; City; State; Zip Code	e				
L	<u> </u>	Harlingen, TX 78550	i		Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions			
	vice preside	11		DataLogic Software, Inc			

The Ins	truction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 21/68 Rpt: 24/138
2 FILER NA	ME		3 Filer ID (Ethics Commission Filers)
	d, Richard E. Pena (The Honorable)		00021186
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
10/29/20			\$250.00
	6 Contributor address; City; State; Zip Code		
	San Antonio, TX 78258		
8 Principal admin m	occupation / Job title (See Instructions) gmt	9 Employer (See Instructions CPS Energy	3)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/09/20			\$5,000.00
	Mission, TX 78574	i	
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	
owner		Concrete Asphalt Pipe A	Aggregates Company
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/14/20			\$5,000.00
	Contributor address; City; State; Zip Code		
	Mission, TX 78574		
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	8)
owner		Concrete Asphalt Pipe A	Aggregates Company
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/29/20			\$10,000.00
	Contributor address; City; State; Zip Code		
	Laredo, TX 78045		
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	5)
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/13/20			\$500.00
	Contributor address; City; State; Zip Code		
	Laredo, TX 78045		
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	5)

The Instru	uction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 22/68 Rpt: 25/138	
2 FILER NAME			3 Filer ID (Ethics Commissi	on Filers)
	– Richard E. Pena (The Honorable)		00021186	0111 11010)
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
12/12/2024				\$200.00
	6 Contributor address; City; State; Zip Code			
·	Laredo, TX 78041	1		
	cupation / Job title (See Instructions)	9 Employer (See Instructions		
general dire		Super Transport Interna	itional LLC	
Date)	Amount of Contribution (\$)	
12/05/2024				\$1,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>	
governmen		Don Gilbert Consulting)	
Date			Amount of Contribution (\$)	
Dale 11/07/2024)		\$2,000.00
				Ψ2,000.00
	Collinibutor address, City, State, Zip Code			
	McAllen, TX 78504			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/01/2024				\$500.00
	Contributor address; City; State; Zip Code			
	Madlian TV 70E04			
Drincipal occ	McAllen, TX 78504 cupation / Job title (See Instructions)	Employer (See Instructions		
CEO		ERO Architects	5)	
	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (f)	
Date 09/11/2024)	Amount of Contribution (\$)	\$1,000.00
0311112027	Contributor address; City; State: Zip Code			φ1,000.00
	Collinuutor address, City, State, Zip Code			
	Laredo, TX 78041			
Principal occ	supation / Job title (See Instructions)	Employer (See Instructions	5)	
attorney		self		
allomey		sen		

	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 23/68 Rpt: 26/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		Richard E. Pena (The Honorable)		ľ_	00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/12/2024	Gonzales, Roy				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Laredo, TX 78041				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> ن)		
	teacher		Harmony School			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/02/2024	Gonzalez Druker Law Firm, PLLC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78040	-			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
	09/16/2024	Gonzalez, Abraham				\$7,500.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78041				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	GM		Quantum Corporation			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/23/2024	Gonzalez, Dora				\$1,500.00
		Contributor address; City; State; Zip Code				
	Dringing ogg	Brownsville, TX 78520		Ĺ		
	property owr	upation / Job title (See Instructions)	Employer (See Instructions self employed	5)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	#1 000 00
	12/13/2024	Gonzalez, Gerado				\$1,000.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78045				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	上 5)		
	executive	•	G & G Laredo Franchise		vestments Inc	

The Ir	nstru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 24/68 Rpt: 27/138	
2 FILER I	NAME			3	Filer ID (Ethics Commissio	on Filers)
		Richard E. Pena (The Honorable)		ľ	00021186	
4 Date		5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/12/2	2024	Gonzalez, Jorge				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		Laredo, TX 78045				
8 Principa	al occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
insuan	ice ag	ent	Falconsure Insurance			
Date		Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/22/2	2024	Gray, Angela J.				\$1,250.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77302				
Principa	al occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
homen	maker		n/a			
Date		Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
11/26/2	2024	Greenberg Traurig, P. A. Political Action Commi				\$750.00
		Contributor address; City; State; Zip Code				
		Albany, NY 12207	.			
Principa	al occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Date		Full name of contributor out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
10/25/2	2024	Greer, James Alan				\$1,500.00
		Contributor address; City; State; Zip Code]		
		Despete TV 76262				
Dringing	21.0201	Roanoke, TX 76262		<u> </u>		
		upation / Job title (See Instructions)	Employer (See Instructions Oncor Energy Delivery	S)		
manag	Jemen			-		
Date		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/14/2	2024	Griffin, John				\$500.00
		Contributor address; City; State; Zip Code				
		Victoria, TX 77901				
Princin:		upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
attorne			self	5)		
	зу 		3011			
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 25/68 Rpt: 28/138	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	lichard E. Pena (The Honorable)		00021186	<i></i> ,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/26/2024	Gulf States Toyota Inc. State PAC			\$500.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77077			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/18/2024	Gutierrez, Baldemar			\$1,000.00
	Contributor address; City; State; Zip Code			
	Alice, TX 78332			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
attorney		Gutierrez Law Firm		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/19/2024	Gutierrez, Jorge			\$500.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78045		、	
	pation / Job title (See Instructions)	Employer (See Instructions)	
transportatio		GT Transport Inc		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/08/2024	Gutierrez, Robert P.			\$5,000.00
	Contributor address; City; State; Zip Code			
	San Antonio, TX 78231			
	pation / Job title (See Instructions)	Employer (See Instructions)	
owner		Armadillo Construction		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/05/2024	Guzman Law Firm PLLC			\$1,000.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78040			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/68 Rpt: 29/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Richard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/08/2024	HILLCO PAC				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
	Date	Full name of contributor X out-of-state PAC (ID#: C	200386029C00)	Γ	Amount of Contribution (\$)	
	12/11/2024	HNTB Holdings Ltd PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Kansas City, MO 64105				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
			I			
	Date	Full name of contributor out-of-state PAC (ID#:) !	Γ	Amount of Contribution (\$)	
	08/22/2024	HS Law PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/14/2024	Haddad, Roberto A.				\$250.00
		Contributor address; City; State; Zip Code				
		McAllen, TX 78501				
		upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	attorney		DHR Health			
	Date	Full name of contributor X out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/20/2024	Halliburton Company Political Action Committee				\$1,000.00
		Contributor address; City; State; Zip Code	1			
		Houston, TX 77032				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	,)		
			I			
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/68 Rpt: 30/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Richard E. Pena (The Honorable)			00021186	· ·
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/22/2024	Harris, John				\$1,250.00
		6 Contributor address; City; State; Zip Code				
		Conroe, TX 77302				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	real estate d	leveloper	T-Rex Management Inc.			
	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Hatch, John (Mr.)				\$1,000.00
		Buda, TX 78610				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	owner	,	Texas Petition Strategies	S		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/13/2024	Hatch, Rebecca				\$1,000.00
		Contributor address; City; State; Zip Code	,			
		Buda, TX 78610				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	owner		Texas Petition Strategies	S		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/17/2024	Haynes, Minnie Dora				\$1,000.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78045				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	rancher		Colorado Ranch			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2024	Henry, Matthew C				\$1,500.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75218				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	senior vice p	Jresident	Oncor			

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 28/68 Rpt: 31/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		lichard E. Pena (The Honorable)			00021186	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	
	12/14/2024	Hernandez, Jason				\$1,250.00
	I	6 Contributor address; City; State; Zip Code		"		
Ļ	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Dickinson, TX 77539		Ĺ		
8	Principal occu VP	ipation / Job title (See Instructions)	9 Employer (See Instructions BMS Companies	S)		
			BMS Companies	—		
	Date		:)		Amount of Contribution (\$)	
	09/13/2024					\$1,000.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78045				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	president		WBCA Laredo	5)		
╞				—	Array at a Contribution (¢)	
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	<u>ቀ1 000 00</u>
	11/08/2024					\$1,000.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78045				
⊢	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	us)		
	general direc	ctor	Super Transport Interna	atior	nal LLC	
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)	
	11/20/2024	Hernandez Gaytan, Angel D				\$1,000.00
	I					
		Laredo, TX 78045				
	•	pation / Job title (See Instructions)	Employer (See Instructions			
	general direc	tor	Super Transport Interna	atior	nal LLC	
	Date	Full name of contributor out-of-state PAC (ID#:		T	Amount of Contribution (\$)	
	11/08/2024	Hernandez Gaytan, Victor M				\$500.00
	I	Contributor address; City; State; Zip Code		"		
		Laredo, TX 78045	-			
		ipation / Job title (See Instructions)	Employer (See Instructions			
	general direc	tor	Super Transport Interna	atior	nal LLC	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 29/68 Rpt: 32/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Raymond, R	tichard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2024	Hinojosa, Luis				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		1				
		Laredo, TX 78041				
8	Principal occu president	ipation / Job title (See Instructions)	9 Employer (See Instructions) Uni-Trade LLC)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/13/2024	Hinojosa, Roseanna				\$500.00
		Contributor address; City; State; Zip Code				
		1				
┢	D i sinchean	Laredo, TX 78041		Ĺ		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	.)		
-	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/15/2024	Houston Fire Fighters Political Action Fund				\$2,500.00
		Contributor address; City; State; Zip Code				
		1				
		Houston, TX 77009]			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/10/2024	Howland, Douglas				\$1,250.00
		Contributor address; City; State; Zip Code				
		1				
		Laredo, TX 78041				
	-	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
L	not employe		not employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	*=00.00
	10/02/2024	Huitt-Zollars Texas, Inc Texas PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75240				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	L;)		
		· · · · · · · · · · · · · · · · · · ·				
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MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 30/68 Rpt: 33/138 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Raymond, Richard E. Pena (The Honorable) 00021186 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/09/2024 Independent Automobile Dealers PAC - INDEPAC \$500.00 6 Contributor address; City; State; Zip Code Austin, TX 78750 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/19/2024 Independent Bankers Assoc. of Texas Political Action Committee \$500.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/24/2024 \$500.00 Juarusti, Gerardo Gonzalez Contributor address; City; State; Zip Code Laredo, TX 78045 Principal occupation / Job title (See Instructions) Employer (See Instructions) real estate investor self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/28/2024 \$500.00 Juno Point Consulting Company Contributor address; City; State; Zip Code Celina, TX 75009 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ \$1,000.00 10/22/2024 Kazen, Meurer & Perez, L.L.P. Contributor address; City; State; Zip Code Laredo, TX 78042 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 31/68 Rpt: 34/138
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
[ichard E. Pena (The Honorable)		00021186
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	11/21/2024	Khaledi, Shahram		\$5,000.00
		6 Contributor address; City; State; Zip Code		
		Laredo, TX 78045		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
	CEO		SKG LLC	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/15/2024	Kickapoo Traditional Tribe of Texas		\$7,500.00
		Contributor address; City; State; Zip Code		
		F F		
		Eagle Pass, TX 78852		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	12/09/2024	Killam Development, Ltd.		\$15,000.00
		Contributor address; City; State; Zip Code		
		Laredo, TX 78042		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	12/07/2024	King, John		\$5,000.00
		Contributor address; City; State; Zip Code		
		Arlington, TX 76016		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	business ow	ner	Nutritional Products of T	Texas, Inc
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/29/2024	Kraus, Kurt		\$10,000.00
		Contributor address; City; State; Zip Code		
		Laredo, TX 78045		
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	۱ ۶)
	developer	· · ·	self employed	
⊢				

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 32/68 Rpt: 35/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Raymond, R	Richard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/10/2024	LaMantia, Steve (Mr.)				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		1				
		Laredo, TX 78045				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Owner		L&F Distributors, LLC	_		
	Date)	Γ	Amount of Contribution (\$)	
	10/16/2024	Lara, Sergio				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Landa TV 70040				
	Dringing oog	Laredo, TX 78040	Employer (Cool Instructions	Ļ		
	director gene	ipation / Job title (See Instructions)	Employer (See Instructions Group MS)		
⊨	_		<u> </u>	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷c coo oo
	12/02/2024	Laredo Fire-PAC				\$2,000.00
		Contributor address; City; State; Zip Code				
		1				
		Laredo, TX 78041				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L;)		
	·			,		
╞═	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	10/24/2024	Laredo Ready Mix Ltd				\$5,000.00
		Contributor address; City; State; Zip Code				
		1				
		Laredo, TX 78044				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	10/15/2024	Laredo Smoke Shop				\$1,000.00
		Contributor address; City; State; Zip Code	1			
		1				
		1				
		Laredo, TX 78041		Ĺ		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
L						

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 33/68 Rpt: 36/138	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
Raymond, R	Richard E. Pena (The Honorable)		00021186	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
10/01/2024	Laredo Warehouse Ltd			\$2,500.00
	6 Contributor address; City; State; Zip Code		1	
	Laredo, TX 78042			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	3)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/13/2024	Laurel, Fernando L.			\$2,000.00
	Contributor address; City; State; Zip Code		1	
	Larada TV 7004E			
Dringinal occu	Laredo, TX 78045	Employer (Soo Instructions	<u> </u>	
real estate ir	upation / Job title (See Instructions)	Employer (See Instructions) self	3)	
			1	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	ቀር ባር በር
12/14/2024	Laurel, Oscar (Mr.)			\$500.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78045			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> ج)	
businessma		self employed	<i>'</i>)	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
10/21/2024	Laurel, Roberto Jaime	/		\$1,500.00
	Contributor address; City; State; Zip Code			¥=,==: -
	Laredo, TX 78041			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	s)	
insurance aç	gent	Laurel Insurance Co.		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/04/2024	Law Office of Emilio Davila, Jr			\$500.00
	Contributor address; City; State; Zip Code		1	
	Laredo, TX 78040			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	3)	

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	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 34/68 Rpt: 37/138	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
		Richard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/14/2024	Ledesma, Rick (Mr.)	1		:	\$10,000.00
	ł	6 Contributor address; City; State; Zip Code		1		
	ļ		,			
	ļ		,			
	ļ	San Antonio, TX 78216	,			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	CEO		DataLogic Software, Inc	С		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)	
	12/14/2024	Lesko, James	/ I			\$250.00
				·		Ψ=00.00
	ļ		,			
	ļ		,			
	ł	Round Rock, TX 78664	1			
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	engineer		owner - AgH2O Holding			
╞				јз, <u>-</u> т 		
	Date	—)		Amount of Contribution (\$)	±050.00
	12/12/2024	Leslie Media				\$250.00
	ł	Contributor address; City; State; Zip Code	1			
	ļ		,			
	ł		1			
		Irving, TX 75061	, 			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)	
	10/03/2024	Lewis Resource LLC	1			\$5,000.00
	ł	Contributor address; City; State; Zip Code		1		
	ļ		,			
	ł		1			
	ļ	San Antonio, TX 78216	,			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Т	Amount of Contribution (\$)	
	11/28/2024	Leyendecker, Richard M	/			\$1,000.00
	 , -	Contributor address; City; State; Zip Code		·		¥=,
	ł	Continuutor address, City, State, Zip Code	1			
	1					
	ļ	Laredo, TX 78041	,			
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	developer		Leyendecker Constructions			
	uevelopei					

The Instruction Guide explains how to complete this form.			
	1	Total pages Schedule A1: Sch: 35/68 Rpt: 38/138	
2 FILER NAME	3	Filer ID (Ethics Commission	nn Filers)
Raymond, Richard E. Pena (The Honorable)	ľ	00021186	
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/19/2024 Linebarger Goggan Blair & Sampson, LLP			\$1,000.00
6 Contributor address; City; State; Zip Code	·····		
AAustin, TX 78760			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction)	ons)		
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/11/2024 Linebarger Goggan Blair & Sampson, LLP			\$1,000.00
Contributor address; City; State; Zip Code			
AAustin, TX 78760			
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)		
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/13/2024 Longoria, Alejandro			\$2,500.00
Contributor address; City; State; Zip Code	1		
Laredo, TX 78045			
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)		
owner AML Properties Ltd			
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/13/2024 Lozano, Sergio			\$500.00
Contributor address; City; State; Zip Code			
Contributor address, City, State, Zip Code			
Contributor address, City, State, Zip Code			
Laredo, TX 78040			
Laredo, TX 78040 Principal occupation / Job title (See Instructions) Employer (See Instruction)	ons)		
Laredo, TX 78040	ions)		
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self Date Full name of contributor out-of-state PAC (ID#:)	ions)	Amount of Contribution (\$)	
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self	ions)	Amount of Contribution (\$)	\$7,500.00
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self Date Full name of contributor out-of-state PAC (ID#:)	ions)	Amount of Contribution (\$)	\$7,500.00
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self Date Full name of contributor out-of-state PAC (ID#:) MS Restaurant, LLC	ions)	Amount of Contribution (\$)	\$7,500.00
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self Date Full name of contributor out-of-state PAC (ID#:) MS Restaurant, LLC 08/12/2024 MS Restaurant, LLC Contributor address; City; State; Zip Code	ions)	Amount of Contribution (\$)	\$7,500.00
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self Date Full name of contributor out-of-state PAC (ID#:) 08/12/2024 MS Restaurant, LLC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$7,500.00
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self Date Full name of contributor out-of-state PAC (ID#:) MS Restaurant, LLC 08/12/2024 MS Restaurant, LLC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$7,500.00
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self Date Full name of contributor out-of-state PAC (ID#:) 08/12/2024 MS Restaurant, LLC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$7,500.00
Laredo, TX 78040 Principal occupation / Job title (See Instructions) attorney Employer (See Instructions) self Date Full name of contributor out-of-state PAC (ID#:) 08/12/2024 MS Restaurant, LLC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$7,500.00

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 36/68 Rpt: 39/138	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	Richard E. Pena (The Honorable)		00021186	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/05/2024	Macdonald, Douglas			\$5,000.00
	6 Contributor address; City; State; Zip Code			
	Laredo, TX 78045	1 · · · / 2 · · · · · · · · · · · · · · ·		
	upation / Job title (See Instructions)	9 Employer (See Instructions		
president		Texas Community Bank		
Date	<u> </u>)	Amount of Contribution (\$)	
12/11/2024				\$500.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78045			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Επιτυμαί στου)	
Data		<u> </u>	Amount of Contribution (\$)	
Date 08/14/2024	Full name of contributor out-of-state PAC (ID#: Magnolia Primary Care)	Amount of Contribution (\$)	\$5,000.00
00/14/2024				\$0,000.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78046			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor X out-of-state PAC (ID#:	C00040568)	Amount of Contribution (\$)	
09/12/2024	Marathon Oil Company Employees PAC (MEPA			\$1,000.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77024			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/22/2024	Marroquin, Rodrigo Alberto			\$5,000.00
	Contributor address; City; State; Zip Code			
	Larada TV 7904E			
Dringingligge	Laredo, TX 78045		\ \	
-	upation / Job title (See Instructions)	Employer (See Instructions	3)	
CEO		Zaro Transportation		

The Instruction	Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 37/68 Rpt: 40/138
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	d E. Pena (The Honorable)		00021186
4 Date 5 Fi	ull name of contributor 🛛 🗌 out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
12/11/2024 M	lartens, Charles L.		\$200.00
6 C	ontributor address; City; State; Zip Code		
	aredo, TX 78041		
	/ Job title (See Instructions)	9 Employer (See Instructions	() ()
landman		self	7
Date Fi	ull name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/09/2024 M	lartinez, Abigail		\$1,000.00
C	ontributor address; City; State; Zip Code		
Li	aredo, TX 78045		
Principal occupation	/ Job title (See Instructions)	Employer (See Instructions	s)
transportation		Hebron Trucking	
Date Fi	ull name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/02/2024 M	lartinez, Edgar		\$5,000.00
С	ontributor address; City; State; Zip Code		
	arada TX 79041		
	aredo, TX 78041 / Job title (See Instructions)	Employer (Cap Instructions	
logistics		Employer (See Instructions Cargoquin)
-			
)	Amount of Contribution (\$)
	lartinez, Edgar		\$5,000.00
	ontributor address; City; State; Zip Code		
Li	aredo, TX 78041		
Principal occupation	/ Job title (See Instructions)	Employer (See Instructions	;)
logistics		Cargoquin	
Date Fi	ull name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/11/2024 M	lartinez, Edgar		\$10,000.00
C	ontributor address; City; State; Zip Code		
	aredo, TX 78041		
	/ Job title (See Instructions)	Employer (See Instructions	
logistics		Cargoquin	

<u> </u>						
	 The Instru	ction Guide explains how to complete this f	örm.	1	Total pages Schedule A1: Sch: 38/68 Rpt: 41/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Richard E. Pena (The Honorable)			00021186	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/04/2024	Martinez, Marte				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		Laredo, TX 78041	1			
8		upation / Job title (See Instructions)	9 Employer (See Instructions		<u>^</u>	
	Physician		Marte A Martinez, MD P			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2024					\$250.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78045				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	د) ا		
	lawyer		Law Office of Silverio M		inez, PC	
-	-	Full name of contributor out-of-state PAC (ID#:		 T		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#: Matocha, Kevin Joseph)		Amount of Contribution (\$)	\$2,500.00
	10/20/202-	· · · · · · · · · · · · · · · · · · ·				Ψ2,300.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77057				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	CEO		Stone Henge Companie	es L	_LC	
	Date	Full name of contributor X out-of-state PAC (ID#:	C00108035)	Τ	Amount of Contribution (\$)	
	10/04/2024	McKesson Corporation Employees Political Fun	ıd			\$1,000.00
		Contributor address; City; State; Zip Code				
	Dringing ogg	San Francisco, CA 94104				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	S)		
⊨			<u> </u>	.		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#: Medina, Jose R)		Amount of Contribution (\$)	\$500.00
	10/02/2024					\$200.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78045				
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	 s)		
	real estate d		self			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 39/68 Rpt: 42/138
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ichard E. Pena (The Honorable)		00021186
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/12/2024	Millwee, Billy		\$500.00
	6 Contributor address; City; State; Zip Code		
Dringingloccu	Driftwood, TX 78619	Employer (Soo Instructions	
healthcare c	ipation / Job title (See Instructions) consultant	9 Employer (See Instructions self	5)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/04/2024			\$500.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78701		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions) 5)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/23/2024	Molina, Hector		\$500.00
	Contributor address; City; State; Zip Code		
<u>,</u>	Laredo, TX 78041		
	Ipation / Job title (See Instructions)	Employer (See Instructions	3)
international		Palos Garza	· · · · · · · · · · · · · · · · · · ·
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/01/2024	Montemayor, George		\$5,000.00
	Contributor address; City; State; Zip Code		
	Laredo, TX 78041		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions) 5)
	consultant/advisor	Three GDM Manageme	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/13/2024	Montemayor, George		\$2,500.00
	Contributor address; City; State; Zip Code		
	Laredo, TX 78041		
	ipation / Job title (See Instructions)	Employer (See Instructions	
accountant/o	consultant/advisor	Three GDM Manageme	nt Group

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 40/68 Rpt: 43/138	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	Richard E. Pena (The Honorable)		00021186	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/29/2024	Mora Ph.D, David Saul (Dr.)			\$2,500.00
	6 Contributor address; City; State; Zip Code			
	Laredo, TX 78043			
	upation / Job title (See Instructions)	9 Employer (See Instructions	5)	
optometrist		Mora Eye Clinic		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/06/2024	Morgan, Tyler			\$5,000.00
	Contributor address; City; State; Zip Code			
	Mission, TX 78572			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	
president		Siempre Grocery		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/22/2024	Mounetou, Juan Eduardo			\$5,000.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78045			
-	upation / Job title (See Instructions)	Employer (See Instructions		
owner		Mounetou Andres-Mone	e LLC	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/10/2024	Muller, Albert			\$2,000.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78045	-		
-	upation / Job title (See Instructions)	Employer (See Instructions	5)	
owner		La Bota Ranch		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/12/2024	Narvaez Jr., Gilbert			\$1,000.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78041			
-	upation / Job title (See Instructions)	Employer (See Instructions	5)	
vice preside	nt	Falcon Bank		

SCHEDULE	A1
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The	Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 41/68 Rpt: 44/138	
2 FILEF	R NAME			3	Filer ID (Ethics Commissio	on Filers)
		ichard E. Pena (The Honorable)			00021186	•
4 Date		5 Full name of contributor X out-of-state PAC (ID#:	С00064774)	7	Amount of Contribution (\$)	
10/32	1/2024	NextEra Energy PAC				\$1,500.00
		6 Contributor address; City; State; Zip Code				
		Juno Beach , FL 33408				
8 Princi	ipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
Date		Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/23	3/2024	Nook Children's Boutique, LLC				\$1,500.00
		Contributor address; City; State; Zip Code				
	- ,	Laredo, TX 78041	1 / <u>a</u>	Ļ		
Princi	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
				—		
Date		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/02	2/2024	Nye, Erle A.				\$5,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75225				
Princi	inal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	ident		Oncor	''		
Date		Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	1/2024	Oberhoff, Donica D.	/		Allount of Continention (+)	\$500.00
± 0,	1,202.	Contributor address; City; State; Zip Code				<i>4000.02</i>
		Contributor address, City, State, Eip Code				
		San Antonio, TX 78258				
Princi	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
Теха	as legisla	ative director	Acadian Ambulance			
Date		Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/23	3/2024	Ochoa, Jose (Mr.)				\$2,500.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78256				
Princi	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
resta	aurant o	wner	self			
				;)		
1						

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 42/68 Rpt: 45/138	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
Raymond, F	Richard E. Pena (The Honorable)		00021186	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/24/2024	Oehmig, Alice C.			\$5,000.00
	6 Contributor address; City; State; Zip Code			
	Chattanooga, TN 37402			
8 Principal occu owner	upation / Job title (See Instructions)	9 Employer (See Instructions Blue Creek Whitetails	;)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/24/2024				\$5,000.00
	Contributor address; City; State; Zip Code			
	Chattanooga, TN 37402			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
senior partn	,	Krestrel Capital	<i>i)</i>	
		· · · · · · · · · · · · · · · · · · ·	Amount of Contribution (\$)	
Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Oliveira, David)	Amount of Contribution (\$)	\$500.00
	Contributor address; City; State; Zip Code			ψυυυ.υυ
	McAllen, TX 78504			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
attorney		self	,	
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/22/2024	Olson Jr., Lyndon L.			\$5,000.00
	Contributor address; City; State; Zip Code			
	Waco, TX 76710			
-	upation / Job title (See Instructions)	Employer (See Instructions	;)	
retired		retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/09/2024				\$1,500.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78041			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 43/68 Rpt: 46/138	
2 FILER NAME			3 Filer ID (Ethics Commissio	n Filers)
Raymond, F	Richard E. Pena (The Honorable)		00021186	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/11/2024				\$500.00
	6 Contributor address; City; State; Zip Code			
	Richardson, TX 75082			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
owner		Rio Cutzamala Restaura	ant	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/13/2024				\$250.00
	Contributor address; City; State; Zip Code			
D i visal ser	Mico, TX 78056		、	
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	****
10/30/2024	~ 		т Т	\$40,000.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78045			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	L;)	
Date	Full name of contributor X out-of-state PAC (ID#:	C00035519)	Amount of Contribution (\$)	
10/02/2024	PNC PAC			\$1,000.00
	Contributor address; City; State; Zip Code			
	Washington, DC 20006			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/24/2024				\$500.00
	Contributor address; City; State; Zip Code			
	Albuquerque, TX 87158			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	;)	
	•			
		<u> </u>		
1				

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 44/68 Rpt: 47/138	
2	2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		ichard E. Pena (The Honorable)			00021186	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/01/2024	Palacios, Rosanne				\$250.00
	1	6 Contributor address; City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1		
		Laredo, TX 78041				
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	Administratio	חנ 	Texas A&M Internationa	al		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/24/2024	Patmo Concrete LLC				\$5,000.00
	ł	Contributor address; City; State; Zip Code		1		
	1					
		Laredo, TX 78045				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	10/30/2024	Peg Energy LLC			· · · · · · · · · · · · · · · · · · ·	\$1,000.00
				\mathbf{I}		- ,
		Contributor address, City, State, Zip Code				
		Laredo, TX 78041				
\vdash	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	•	· · ·				
⊢	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	10/23/2024	Perez, Osiel	/		Allount of Contribution (*)	\$250.00
	10/20/2027			•		Ψ200.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78041				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	self employe		OP Computer Business		olutions. Inc	
╞			·	- T		
	Date 11/22/2024	Full name of contributor out-of-state PAC (ID#:_ Perez Jr., Roberto)		Amount of Contribution (\$)	\$5,000.00
	11/22/2024			•		ΦΟ,000.00
		Contributor address; City; State; Zip Code				
	1	Laredo, TX 78045				
┝	Dringingl occu		Employer (See Instructions	<u> </u>		
	president	pation / Job title (See Instructions)	Employer (See Instructions Forza Transport Service			
	president			35		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 45/68 Rpt: 48/138
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Raymond, R	Richard E. Pena (The Honorable)		00021186
4	Date	5 Full name of contributor X out-of-state PAC (ID#	#: <u>C00016683C00</u>)	7 Amount of Contribution (\$)
	10/15/2024	Pfizer Inc. PAC		\$1,500.00
		6 Contributor address; City; State; Zip Code		
_	<u></u>	New York, NY 10017		
3	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	10/02/2024	PharmPAC		\$1,000.00
		Contributor address; City; State; Zip Code		
		Austin, TX 78757		
	Drincinal occi	ipation / Job title (See Instructions)	Employer (See Instructions)	SV
	Ρπιομαί στου)
=	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	08/20/2024	Pina, Humberto (Mr.)		\$5,000.00
		Contributor address; City; State; Zip Code		
		Laurada TV 7004E		
	Dringing oog	Laredo, TX 78045		
	owner	ipation / Job title (See Instructions)	Employer (See Instructions) Pina Forwarding	•)
				Amount of Contribution (\$)
	Date 12/14/2024	Full name of contributor Out-of-state PAC (ID#	#:)	Amount of Contribution (\$) \$1,000.00
	12/14/2024			φ1,000.00
		Contributor address; City; State; Zip Code		
		Laredo, TX 78045		
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)
	physician		self	
=	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	08/29/2024	Pinnacle Mines Investments, LLC		\$10,000.00
		Contributor address; City; State; Zip Code		
		Laredo, TX 78045		
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> ;)

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 46/68 Rpt: 49/138
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
2		Richard E. Pena (The Honorable)		00021186
4	Date	· · ·		7 Amount of Contribution (\$)
4				
	10/09/2024	Political Action Comm of The Independent Insura		\$500.00
		6 Contributor address; City; State; Zip Code		
		Austin, TX 78768		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))
—	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/02/2024	Political Action Committee of Winstead PC - Stat		\$500.00
		Contributor address; City; State; Zip Code		
		Dallas, TX 75201		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	(;
			I	
=	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	11/25/2024	Populus Financial Group, Inc. Texas PAC		\$1,000.00
		Contributor address; City; State; Zip Code		
		Irving, TX 75062		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
		ļ	I	
_	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/09/2024	Provider Coalition for Care		\$3,000.00
		Lewisville, TX 75057		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)
			I	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	12/05/2024	Puig, Jacob		\$1,000.00
		Contributor address; City; State; Zip Code		
		Laredo, TX 78041-6472		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)
	CEO		Laredo Sports Medicine	Clinic
<u> </u>			·	

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 47/68 Rpt: 50/138	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	ichard E. Pena (The Honorable)		00021186	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
10/08/2024	RB Tech Ridge LLC			\$5,000.00
	6 Contributor address; City; State; Zip Code			
	New York, NY 10019			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/14/2024	Ramirez, Ed			\$750.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78040			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
investor		self		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/17/2024	Ramirez, Rene (Mr.)			\$1,000.00
	Contributor address; City; State; Zip Code			
	Edinburg, TX 78539			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
President		Pathfinder Public Affairs		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/30/2024	Ramos Jr., Donato D.			\$1,000.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78041			
	pation / Job title (See Instructions)	Employer (See Instructions		
attorney		Law Offices Of Donato I	D. Ramos P.L.L.C.	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/10/2024	Rancho Viejo Cattle Co.			\$2,500.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78041			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	

_	The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 48/68 Rpt: 51/138
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
_		ichard E. Pena (The Honorable)		00021186
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
	12/09/2024	Red Rock Texas Political Action Committee		\$750.00
		6 Contributor address; City; State; Zip Code		
_		Austin, TX 78701		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/02/2024	Reed, Kevin		\$500.00
		Contributor address; City; State; Zip Code		
	<u> </u>	Laredo, TX 78043		Į
		pation / Job title (See Instructions)	Employer (See Instructions Kevin Reed	5)
	pilot		Keviii Keeu	1
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/13/2024	Representative Richard Pena Raymond Future	of Texas Fund	\$50,000.00
		Contributor address; City; State; Zip Code		
		Laredo, TX 78045		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
	·			,
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	12/13/2024	Reyes, Irasema		\$1,000.00
		Contributor address; City; State; Zip Code		
		Laredo, TX 78043		<u> </u>
	Administrato	pation / Job title (See Instructions)	Employer (See Instructions	
	auministrator		South Laredo Family Cli	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/18/2024	Richmo Holdings Ltd		\$1,500.00
		Contributor address; City; State; Zip Code		
		Laredo, TX 78045		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	- I	· · · · · · · · · · · · · · · · · · ·		,

The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 49/68 Rpt: 52/138		
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		Richard E. Pena (The Honorabl	le)			00021186	-
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/10/2024	Robert T. Dickson Revoca	able Trust				\$5,050.00
	ļ	6 Contributor address; City; St	tate; Zip Code				
			· .				
		Midland, TX 79707					
8	Principal occu	upation / Job title (See Instructions	;)	9 Employer (See Instructions	;)		
				I			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/05/2024	Rocha, Roger C.					\$5,000.00
	1	Contributor address; City; St	tate; Zip Code				
	ļ						
		Laredo, TX 78040					
		upation / Job title (See Instructions	i)	Employer (See Instructions			
	healthcare e	mployee		Rocha Primary Care, LL	.C		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/31/2024	Roderick C. Lopez PC					\$1,000.00
	ļ	Contributor address; City; St	ate; Zip Code				
	ļ						
		Laredo, TX 78041					
	Principal occu	upation / Job title (See Instructions	,)	Employer (See Instructions	;)		
					_		
Γ	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/06/2024	Rodriguez, Miguel A.					\$2,000.00
	ļ	Contributor address; City; St	ate; Zip Code				
	ļ						
		Laredo, TX 78045	1		Ļ		
		upation / Job title (See Instructions	·)	Employer (See Instructions)		
	Chief of Polic	эе 		City of Laredo	_		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/03/2024	Rodriguez Jr., Raymundo					\$1,500.00
	ļ	Contributor address; City; St	ate; Zip Code				
		Laredo, TX 77044			L		
		upation / Job title (See Instructions)	,)	Employer (See Instructions			
	owner]	Laredo Electric Consulti	ng		

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 50/68 Rpt: 53/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Raymond, R	lichard E. Pena (The Honorable)		ĺ	00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/10/2024	Roger Dickson Trust				\$2,475.00
		6 Contributor address; City; State; Zip Code				
		1				
		Midland, TX 79707				
B	Principal occu		9 Employer (See Instructions)		
	-		• •			
-	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/11/2024	Rural Friends Of Texas Electric Cooperatives				\$2,500.00
		Contributor address; City; State; Zip Code				
		1		ĺ		
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	·			,		
-	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/07/2024	Ryan Texas PAC				\$7,500.00
		Contributor address; City; State; Zip Code				
		1		ĺ		
		Dallas, TX 75240		ĺ		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	()		
	·		• • •	,		
-	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/30/2024	Ryerkerk, Lori J				\$500.00
		Contributor address; City; State; Zip Code				
		Winnie, TX 77665				
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	CEO & presi	dent	Celanese Corporation			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/10/2024	S.A.M.'s Engineering Solutions, PLLC				\$1,500.00
		Contributor address; City; State; Zip Code				
		1		ĺ		
		Laredo, TX 78041				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	·					
		E				

The Instru	ction Guide explains how to complete this f		Total pages Schedule A1: Sch: 51/68 Rpt: 54/138		
2 FILER NAME			_	Filer ID (Ethics Commissio	on Filers)
	Richard E. Pena (The Honorable)			00021186	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
08/16/2024	STI Equipment Leasing, Ltd				\$2,500.00
	6 Contributor address; City; State; Zip Code		1		
	Laredo, TX 78045				
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		_
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
11/08/2024	STI Equipment Leasing, Ltd				\$2,000.00
	Contributor address; City; State; Zip Code		1		
	Laredo, TX 78045				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
08/16/2024	STI Logistics LLC				\$5,000.00
	Contributor address; City; State; Zip Code		1		
	Laredo, TX 78045		Ļ		
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
11/08/2024	STI Logistics LLC				\$1,500.00
	Contributor address; City; State; Zip Code		1		
	Laredo, TX 78045		Ĺ		
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/02/2024	Sames, Evelyn				\$2,500.00
	Contributor address; City; State; Zip Code				
	Laredo, TX 78041		Ĺ		
-	upation / Job title (See Instructions)	Employer (See Instructions			
owner		Sames Ford Dealership)		

	The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 52/68 Rpt: 55/138		
2	2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
-		ichard E. Pena (The Honorable)		00021186	Jii i iio.o,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
	09/27/2024	Sampson Public Affairs LLC			\$500.00
		6 Contributor address; City; State; Zip Code			
Ļ		Austin, TX 78749			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s) 	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	09/07/2024	Sanchez, Gerardo			\$5,000.00
		Contributor address; City; State; Zip Code			
		Laredo, TX 78041			
		pation / Job title (See Instructions)	Employer (See Instructions		
	accountant		Sanchez Financial Cons	1	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	·=
	12/10/2024	Sanchez, Gerardo			\$5,000.00
		Contributor address; City; State; Zip Code			
		Laredo, TX 78041			
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 3)	
	accountant	•	Sanchez Financial Cons		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	12/14/2024	Sanchez, Sergio			\$100.00
		Contributor address; City; State; Zip Code			
		Laredo, TX 78046			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	owner		Task Force Security LLC	C	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	10/28/2024	Schatte, Andrew A.			\$2,500.00
		Contributor address; City; State; Zip Code			
\vdash	T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Houston, TX 77005	1 <u>/</u> 2 lastautien		
		pation / Job title (See Instructions)	Employer (See Instructions	5)	
	executive		Americus Holdings, Ltd		

	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 53/68 Rpt: 56/138	
2	2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)	
ľ		ichard E. Pena (The Honorable)				00021186	51111013)
4	Date	5 Full name of contributor out	t-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/10/2024	Scott Dickson Trust					\$2,475.00
		6 Contributor address; City; State; Zip	code				
		Midland, TX 79707					
8	Principal occu	pation / Job title (See Instructions)	2	9 Employer (See Instructions	5)		
╞	Date	Full name of contributor	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2024	Setliff, Michael					\$2,000.00
		Contributor address; City; State; Zip	o Code				
		Laredo, TX 78045					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	chiropractor			Crown Chiropractic			
	Date	Full name of contributor	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Shrum, Matthew					\$250.00
		Contributor address; City; State; Zip	o Code				
		Austin, TX 78746	r				
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	lawyer			self			
	Date		t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/28/2024	Smith, Alice E					\$2,500.00
		Contributor address; City; State; Zip	o Code				
		Cypress, TX 77429					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> נו		
	realtor			REMAX	<i>''</i>		
⊨	Date	Full name of contributor	t of state BAC (ID#:)		Amount of Contribution (\$)	
	10/03/2024	Smith, Robert (Mr.)	t-of-state PAC (ID#:)			\$2,500.00
	10/00/2021	Contributor address; City; State; Zip	n Code				Ψ2,000.00
		Continuation address, Gity, State, $\Delta \mu$	Coue				
		Dallas, TX 75230					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	I;)		
	President/CE	EO		Accident & Injury Pain C	en	ters, Inc.	
⊢			I				

				_		
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 54/68 Rpt: 57/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Richard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/03/2024	South Texas Specialties				\$1,500.00
		6 Contributor address; City; State; Zip Code				
		1				
		Laredo, TX 78041				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:_	· :)	Γ	Amount of Contribution (\$)	
	11/05/2024	Southern Glazer's PAC of Texas				\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	10/23/2024	Surface, Christopher K				\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Bryan, TX 77802				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	vice preside	nt of operations	Manericus Holdings			
F	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	
	12/02/2024	TALAPAC				\$1,500.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78759				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
F	Date	Full name of contributor out-of-state PAC (ID#:) !	Γ	Amount of Contribution (\$)	
	10/30/2024	TDB Properties Ltd				\$5,000.00
		Contributor address; City; State; Zip Code				
		1				
		Laredo, TX 78045				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
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SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 55/68 Rpt: 58/138	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
Raymond, Ri	ichard E. Pena (The Honorable)			00021186	
4 Date 09/25/2024	5 Full name of contributor X out-of-state PAC (ID#: <u>C</u> TSVC, Inc Political Action Committee (Terracon		7	Amount of Contribution (\$)	\$2,000.00
	6 Contributor address; City; State; Zip Code				
	Olathe, KS 66061				
B Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
09/24/2024	Tenaska Employees Texas PAC				\$500.00
	Contributor address; City; State; Zip Code				
	Omaha, NE 68154		Ĺ		
Principal occuj	pation / Job title (See Instructions)	Employer (See Instructions	S)		
Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
10/03/2024	Teran, Jose				\$5,000.00
	Tomball, TX 77377				
	pation / Job title (See Instructions)	Employer (See Instructions	s)		
civil engineer		LDJ Engineering LLC			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
11/20/2024	Texans for Lawsuit Reform PAC				\$1,000.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701				
Principal occuj	pation / Job title (See Instructions)	Employer (See Instructions	S)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/29/2024	Texans for Reasonable Solutions				\$1,000.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78741				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 56/68 Rpt: 59/138	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	Richard E. Pena (The Honorable)		00021186	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/17/2024	Texas Agricultural Aviation Association - Ag-Air			\$250.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/26/2024	Texas Apartment Association PAC			\$750.00
	Austin, TX 78701			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	i)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
08/13/2024	Texas Association for Homecare & Hospice - Sta			\$1,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78759			
Principal occu	apation / Job title (See Instructions)	Employer (See Instructions)	<u></u>	
- Шора осса			<i>י</i> ן	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/29/2024	Texas Automobile Dealers Assn. PAC			\$2,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Princinal occu	Jupation / Job title (See Instructions)	Employer (See Instructions)	<u></u>	
г шора осса			7	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/10/2024	Texas Building Branch Associated General Cont	tractors PAC		\$2,000.00
	Contributor address; City; State; Zip Code			
	Austin TV 70701			
Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions)		
Principal occu		Employer (See Instructions)	<i>i)</i>	

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 57/68 Rpt: 60/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Richard E. Pena (The Honorable)		-	00021186	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/15/2024	Texas Chiropractic Association Political Action C	Committee			\$2,000.00
		6 Contributor address; City; State; Zip Code				
		Augustica TV 20201				
8	Principal occi	Austin, TX 78701 upation / Job title (See Instructions)	9 Employer (See Instructions)	<u> </u>		
U	r moipai occa			' '		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/08/2024	Texas Dairymen PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78711				
	Principal occi	Austin, TX 78711 upation / Job title (See Instructions)	Employer (See Instructions)			
	Finopa occa			ソ		
—	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/09/2024	Texas Deer Association PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78703				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ר</u>		
	Timopa coc.			' '		
—	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/21/2024	Texas Funeral Directors Assn. PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78741				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	ل ټ)		
		· · · · · · · · · · · · · · · · · · ·		· 		
_	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/20/2024	Texas Health Care Assoc PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	上 5)		

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 58/68 Rpt: 61/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
2		ichard E. Pena (The Honorable)		J	00021186	JIT IICI3)
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/25/2024	Texas Land Title Assn. PAC				\$1,500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78703				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/03/2024	Texas Manufactured Housing Assoc., Inc. PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78731				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/19/2024	Texas Medical Association Political Action Com				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin TX 79701				
	Dringing ago	Austin, TX 78701	Employer (Cap Instructions	<u> </u>		
	Finicipai occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/01/2024	Texas Mortgage Bankers PAC				\$1,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor Dut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/02/2024	Texas Optometric PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin TV 70705				
	Duin ain al a ann	Austin, TX 78705	Enveloper (Oper hoster time	<u> </u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

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The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 59/68 Rpt: 62/138	
2 FILER NAME				Filer ID (Ethics Commissio	on Filers)
	lichard E. Pena (The Honorable)		1	00021186	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/05/2024	Texas Realtors Political Action Committee				\$2,500.00
	6 Contributor address; City; State; Zip Code		1		
	Austin, TX 78768				
B Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
Date	Full name of contributor out-of-state PAC (ID#:)	$\overline{\Box}$	Amount of Contribution (\$)	
10/25/2024	Texas Restaurant Association Political Action Co				\$1,500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78767				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	 3)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
07/17/2024	Texas Sands PAC				\$4,500.00
	Contributor address; City; State; Zip Code		1		
	Austin, TX 78701				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	⊥ 3)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/01/2024	Texas Sands PAC				\$4,500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	 3)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/23/2024	Texas Society of Certified Public Accountants PA	AC			\$1,000.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75254				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> 3)		
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The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Sche Sch: 60/68 Rpt		
2 FILER NAME			3 Filer ID (Ethics		on Filers)
Raymond, R	ichard E. Pena (The Honorable)		00021186		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contri	bution (\$)	
10/18/2024	Texas State Association of Fire Fighters				\$1,000.00
	6 Contributor address; City; State; Zip Code				
	Austin, TX 78701				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contri	ibution (\$)	
11/18/2024	Texas State Teachers Association PAC				\$500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78759				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contri	bution (\$)	
09/09/2024	Texas Statewide Telephone Cooperative PAC				\$500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contri	bution (\$)	
09/27/2024	Texas Trial Lawyers Association PAC				\$2,500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78767				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contri	ibution (\$)	
11/19/2024	Texas Trial Lawyers Association PAC				\$2,500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78767				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		

				1	Total pages Schedule A1:	
	The Instru	ction Guide explains how to complete this fo	orm.		Sch: 61/68 Rpt: 64/138	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	-	lichard E. Pena (The Honorable)		L	00021186	
4		5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	
	08/27/2024	The Chickasaw Nation (unincorporated Indian tri				\$2,500.00
		6 Contributor address; City; State; Zip Code				
		Little Rock, AR 72201				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
			<u> </u>	_		
	Date	Full name of contributor X out-of-state PAC (ID#: C)		Amount of Contribution (\$)	
	10/04/2024	The Home Depot Political Action Committee				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Washington, DC 20004				
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions)	.)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/28/2024	The US Oncology Network PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		The Meedlands TV 77200				
	Dringing oog	The Woodlands, TX 77380	Employer (See Instructions			
	Pilicipai occu	ipation / Job title (See Instructions)	Employer (See Instructions)	J		
	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>		Amount of Contribution (\$)	
	09/05/2024	Top Site Civil Group LLC	,		· · · · · · · · · · · · · · · · · · ·	\$2,500.00
		1				
		Laredo, TX 78041]			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))		
-	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	_	Amount of Contribution (\$)	
	12/09/2024	Full name of contributor out-of-state PAC (ID#: Touchstone Political Action Committee	/			\$1,500.00
	12/00/202 .	Contributor address; City; State; Zip Code				Ψ1,000.00
		1				
		San Antonio, TX 78209				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		

	The Instru	ction Guide explains how	to complete this f	orm.		Total pages Schedule A1: Sch: 62/68 Rpt: 65/138	
2	FILER NAME				_	Filer ID (Ethics Commissi	on Filers)
		ichard E. Pena (The Honorabl	le)			00021186	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/20/2024	Tredway, C J					\$500.00
	ļ	6 Contributor address; City; Sta	tate; Zip Code		"		
	1						
Ļ	Drivelaeu	Austin, TX 78701	<u></u>		Ĺ		
8	Principal occu	pation / Job title (See Instructions))	9 Employer (See Instructions	S)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/08/2024	Tredway, C J	—				\$500.00
		Contributor address; City; Sta			"		
	ļ						
		Austin, TX 78701					
		pation / Job title (See Instructions))	Employer (See Instructions	s)		
	consultant			self			
	Date	Full name of contributor	out-of-state PAC (ID#:)	'	Amount of Contribution (\$)	
	10/23/2024	Trevino, Daniel					\$150.00
		Contributor address; City; Sta	ate; Zip Code				
	1	Laredo, TX 78045					
_	Principal occu	pation / Job title (See Instructions)	<u>ي</u>	Employer (See Instructions	<u> </u>		
		, , , , , , , , , , , , , , , , , , ,	,		-,		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/30/2024	Trevino, Roberto L. (Mr.)					\$20,000.00
	,	Contributor address; City; Sta			·		
	1						
		Laredo, TX 78045					
		pation / Job title (See Instructions))	Employer (See Instructions			
	president			Southern Sanitation Ser	rvice	s, Inc.	
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ţ	Amount of Contribution (\$)	
	11/21/2024	Trevino, Roberto L. (Mr.)					\$20,000.00
	ļ	Contributor address; City; Sta	ate; Zip Code]		
	ļ						
		Larada TV 70045					
┝	Dringing occu	Laredo, TX 78045		Employer (See Instructions	<u> </u>		
	president	pation / Job title (See Instructions))	Employer (See Instructions Southern Sanitation Ser		e Inc	
┝	president			Southern Summation Ser	TVICC	S, IIIC.	

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 63/68 Rpt: 66/138	
2	2 FILER NAME			3	Filer ID (Ethics Commiss	ion Filers)
	Raymond, R	ichard E. Pena (The Honorable)			00021186	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:_	C00164145)	7	Amount of Contribution (\$)	
	12/05/2024	USAA Employees Political Action Committee				\$750.00
		6 Contributor address; City; State; Zip Code		·		
		San Antonio, TX 78288-0453				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
_	Date	Full name of contributor X out-of-state PAC (ID#:	C00010470)	Γ	Amount of Contribution (\$)	
	09/05/2024	Union Pacific Corp. Fund For Effective Governme			(1)	\$2,000.00
		Contributor address; City; State; Zip Code				+_,000.000
		Contributor address, City, State, Zip Code				
		Washington, DC 20005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
				- /		
	Date	Full name of contributor X out-of-state PAC (ID#:	C00274/31	Γ	Amount of Contribution (\$)	
	09/18/2024	UnitedHealth Group Incorporated PAC (United				\$1,000.00
					φ1,000.00	
		Contributor address; City; State; Zip Code				
		Minnetonka, MN 55343				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
		,		-,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/06/2024	Vasquez Jr., Victor M.)			\$10,000.00
	05/00/2024					φ10,000.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78041				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	self	,	Vix Medical Equipment			
_	Data	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	Date)			\$10,000.00
	09/09/2024 Vaswani, Priya				\$10,000.00	
		Contributor address; City; State; Zip Code				
		Laredo, TX 78041				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	co-owner		About Time, Inc.	.,		
⊢						

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 64/68 Rpt: 67/138	
2	FILER NAME	FILER NAME			Filer ID (Ethics Commissio	on Filers)
		lichard E. Pena (The Honorable)			00021186	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5.00
	10/20/2024	Vawerg, Fatima				
		6 Contributor address; City; State; Zip Code		1		
		Hampton, AL 10080				
8	Princinal occu		9 Employer (See Instructions	<u>ار</u>		
C	1 1110/000 2202			"		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/13/2024	Vela, Maria Del Refugio				\$100.00
		Contributor address; City; State; Zip Code		1		
		Laredo, TX 78041		Ĺ		
	owner and o	ipation / Job title (See Instructions)	Employer (See Instructions Jett Bowl North	5)		
		·		—		
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	*500.00
	09/27/2024	Verizon Communications Inc Good Government	Club - Texas			\$500.00
	Contributor address; City; State; Zip Code					
		Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/02/2024	Vesowate, Joseph				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Austin TV 70717				
	Dringing occ	Austin, TX 78717 Ipation / Job title (See Instructions)	Employer (See Instructions			
		nsultant/healthcare organizations	self	5)		
	Date				Amount of Contribution (\$)	
	11/06/2024					\$500.00
	11/00/202 .	Contributor address; City; State; Zip Code		•		Ψ000.00
		Austin, TX 78754				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> 3)		

The Instruct	tion Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 65/68 Rpt: 68/138		
2 FILER NAME	FILER NAME			on Filers)
	hard E. Pena (The Honorable)		00021186	
4 Date 5	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/13/2024	Vicinaiz, Victor (Mr.)			\$500.00
6	G Contributor address; City; State; Zip Code			
	Palmhurst, TX 78573			
8 Principal occupa		9 Employer (See Instructions	<u> </u>	
attorney		self	, 	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/22/2024	Vielma, Pablo			\$200.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78041	· · · · · · · · · · · · · · · · · · ·		
	ation / Job title (See Instructions)	Employer (See Instructions		
co owner		Communications Service		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/05/2024	Villarreal, Carlos R.			\$501.00
	Contributor address; City; State; Zip Code			
	Laredo, TX 78040			
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
retired	,	not employed	,	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
10/31/2024	Villarreal, Manuel		,	\$2,500.00
	Contributor address; City; State; Zip Code			•
	New Braunfels, TX 78130			
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions		
owner		Taco Palenque New Bra	aunfels	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/12/2024	Villarreal, Massey			\$500.00
	Contributor address; City; State; Zip Code			
	Current and TV 77/70			
Dringing ogupr	Sugar Land, TX 77479	Employer (Cool Instructions	A	
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions PTG	5)	

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 66/68 Rpt: 69/138		
2	FILER NAME				2	Filer ID (Ethics Commissio	n Filers)
Ĺ		E Richard E. Pena (The Honorable)			3	00021186	511111613)
4	Date	5 Full name of contributor X out-of-state PA	AC (ID#: <u>C</u>)	7	Amount of Contribution (\$)	
	09/12/2024	Vistra Employee Political Action Committe	ee of Vi	stra Energy			\$1,000.00
		6 Contributor address; City; State; Zip Code					
		Irving, TX 75039					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date	Full name of contributor 🔲 out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Walker, Kandy					\$2,500.00
		Contributor address; City; State; Zip Code					
		San Antonio, TX 78257					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	real estate			self			
	Date	Full name of contributor X out-of-state PA	AC (ID#: <u>C</u>	.00093054)		Amount of Contribution (\$)	
	09/11/2024	Walmart Inc PAC For Responsible Gover					\$1,000.00
		Contributor address; City; State; Zip Code					
	Bentonville , AR 72716						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor 🔲 out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	11/04/2024	Watkins, Nathan					\$1,500.00
		Contributor address; City; State; Zip Code					
		Carriere, MS 39426					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Managing Pa	artner		Portion Capital			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	09/18/2024	Watson, Deborah C. (Ms.)					\$2,500.00
	Contributor address; City; State; Zip Code						
L	Laredo, TX 78045						
	Principal occupation / Job title (See Instructions) Employer (See Instruction)			
	Retired n/a			n/a			
I I							

				_		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 67/68 Rpt: 70/138	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
_		Richard E. Pena (The Honorable)			00021186	
4	Date	te 5 Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	
	11/21/2024	Wholesale Beer Distributors of Texas PAC				\$1,000.00
	I	6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Wyatt Ranches of Texas LLC				\$50,000.00
	I	Contributor address; City; State; Zip Code				
		Realitos, TX 78376				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Yarza, Antonio				\$1,000.00
	I	Contributor address; City; State; Zip Code				
		Laredo, TX 78045-8164				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	president		Cuadro Enterprise, LLC			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2024	Zachry Corporation Political Action Committee				\$500.00
	I	Contributor address; City; State; Zip Code				
		San Antonio, TX 78265				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/22/2024	Zaro Transportation				\$5,000.00
	I	Contributor address; City; State; Zip Code				
		Laredo, TX 78045				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
4						

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 68/68 Rpt: 71/138 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Raymond, Richard E. Pena (The Honorable) 00021186 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 10/24/2024 \$500.00 Zertuche Construction Texas, LLC 6 Contributor address; City; State; Zip Code Laredo, TX 78041 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

			1 Total pages Schedule A2:				
The Instru	iction Guide explains how to complete this f	Sch: 1/1 Rpt: 72/138					
2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
Raymond, F	Richard E. Pena (The Honorable)	00021186					
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5 Date 10/02/2024			8 Amount of 9 In-kind contribution contribution (\$) description \$14,692.00 I food and beverages for political event.				
	Laredo, TX 78041		Check if travel outside of Texas. Complete Schedule T.				
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON					
restaurant o		Danny's Restauran					
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
16 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#: Texas Realtors Political Action Committee Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$250.00 I advertising for fundraising event				
	Austin, TX 78768		Check if travel outside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)						
1	Sch: 1/31 Rpt: 73/138	Raymond, Richard E. Pena (The Honorable)	00021186						
4	Date 12/10/2024	5 Payee name Academy Sports & Outdoors							
_									
6	Amount (\$) \$375.00	7 Payee address; City; State; Zip Code \$375.00 108 San Bernardo Ave Laredo, TX 78045							
8	PURPOSE								
ð	OF EXPENDITURE		utside of Texas. Complete Schedule T. IX, officeholder living expense Ipaign						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/28/2024	Alianza Ministerial Evangélica Hispana							
	Amount (\$) Payee address; City; State; Zip Code								
	\$500.00	1601 Clark Blvd Laredo, TX 78043							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. FX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/03/2024	Alianza Ministerial Evangélica Hispana							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 1601 Clark Blvd							
		Laredo, TX 78043							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. FX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

			EXPENDITURE CATEGOR	RIES FOR	во	X 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	rhead ense pense ages/	Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 2/31 Rpt: 74/138		Raymond, Richard E. Pena (The Honor	rable)				00021186			
4	Date	5	Payee name								
	10/18/2024		Border Tejano Democrats	Border Tejano Democrats							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de						
	\$1,000.00	\$1,000.00 5410 Marcella Ave.									
			Laredo, TX 78040								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b)	Description					
-	OF		Contributions/Donations Made By	euule)			outsi	de of Texas. Comp	blete Schedule T.		
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee	İ	Check if Austin,	, TX,	officeholder living	expense		
						contribution					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght			Office he	ld		
	Date		Payee name								
	12/31/2024		Cheddars #2123								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$76.58 2320 NE Bob Bullock Loop										
	+										
			Laredo, TX 78045								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	EXPENDITURE		Food/Beverage Expense					de of Texas. Comp officeholder living			
						food for staff		-	capende		
	Complete ONLY if direct		Candidate/Officeholder name O)ffice sou	ght			Office he	ld		
	expenditure to benefit C/OF	H									
	Date		Payee name								
	10/22/2024		Cheddars #2123								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$104.78		2320 NE Bob Bullock Loop	-							
			Laredo, TX 78045								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	EXPENDITURE		Food/Beverage Expense					de of Texas. Comp officeholder living			
						food for volun			expense		
-	Complete ONLY if direct	Ļ	Candidate/Officeholder name O	office soug	nht			Office he	ld		
	expenditure to benefit C/OF								14		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Git/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
_	Sch: 3/31 Rpt: 75/138	Raymond, Richard E. Pena (The Honorable)	00021186							
4	Date 10/19/2024	Payee name Cheddars #2123								
6	Amount (\$) 7 Payee address; City; State; Zip Code \$101.07 2320 NE Bob Bullock Loop									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense food for volunteers										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/03/2024	CitiBank								
	Amount (\$) \$3,389.77	Payee address; City; State; Zip Code P.O. Box 44180								
		Jacksonville, FL 32231								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ayment							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/08/2024	CitiBank								
	Amount (\$) \$4,199.02	Payee address;City;State; Zip CodeP.O. Box 44180								
		Jacksonville, FL 32231								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ayment							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Offic Food/Beverage Expense Pollin Gift/Awards/Memorials Expense Print	ce Overh ing Expe ting Expe aries/Wag	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
_	Sch: 4/31 Rpt: 76/138		Raymond, Richard E. Pena (The Honorable	e)			00021186			
4	Date 09/12/2024	5	Payee name CitiBank							
6	Amount (\$) \$9,664.77	7	Payee address; City; State; Zip P.O. Box 44180 Jacksonville, FL 32231) Code	9					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense credit card payment Credit card payment							officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office	sough	nt		Office held			
	Date		Payee name							
	10/07/2024		CitiBank							
	Amount (\$) \$6,079.29		Payee address; City; State; Zip P.O. Box 44180	o Code	9					
			Jacksonville, FL 32231							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Credit Card Payment	(1		, тх,	de of Texas. Complete Schedule T. officeholder living expense Ient			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office	sough	nt		Office held			
	Date		Payee name							
	12/17/2024		CitiBank							
	Amount (\$) \$816.82		Payee address; City; State; Zip P.O. Box 44180	o Code	2					
			Jacksonville, FL 32231							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Credit Card Payment	(1		, тх,	de of Texas. Complete Schedule T. officeholder living expense nent			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office	sough	nt		Office held			

			EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains f	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2			•	3	Filer ID (Ethics Commission Filers)					
-	Sch: 5/31 Rpt: 77/138		Raymond, Richard E. Pena (The Honor	rable)		00021186						
4	Date	5	Payee name									
	11/04/2024		CitiBank									
6	Amount (\$)	7		Zip Co	le							
	\$16,852.99		P.O. Box 44180									
			1									
			Jacksonville, FL 32231									
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description							
	EXPENDITURE		Credit Card Payment				ide of Texas. Complete Schedule T. , officeholder living expense					
					credit card pa							
						.,						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O)ffice sou	Jht		Office held					
	Date		Payee name									
	12/09/2024		CitiBank									
	Amount (\$)	-	Payee address; City; State;	Zip Co	10							
	\$195.00		P.O. Box 44180									
	\$195.00		F.O. B0X 44180									
			Jacksonville, FL 32231									
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Credit Card Payment	edule)		, тх	ide of Texas. Complete Schedule T. , officeholder living expense nent					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O)ffice sou	Jht		Office held					
	Date		Payee name									
	07/01/2024		City of Austin									
	Amount (\$)		Payee address; City; State;	Zip Co	le							
	\$245.28		721 Barton Springs Rd.	•								
			Austin, TX 78704									
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description							
	EXPENDITURE		Office Overhead/Rental Expense		X Check if Austin	, тх, vat	ide of Texas. Complete Schedule T. , officeholder living expense er, electric, trash, wastewater utilities house					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	Jht		Office held					

			EXPENDITURE C	ATEGOR	RIES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen nmittee Legal Services The Instruction Guide		Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Distri	ipment & Related Expense	
1	Total pages Schedule F1:	2		•			3	Filer ID	(Ethics Commission Filers)	
-	Sch: 6/31 Rpt: 78/138		Raymond, Richard E. Pena (Th	ne Honor	rable)			00021186		
4	Date 07/30/2024	5	Payee name City of Austin							
6	Amount (\$) \$295.48	Austin, TX 78704								
 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 office holder water, electric, trash, wastewater utilit for Austin rental house 							xpense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	0	office soug	nt		Office held	1	
	Date		Payee name							
	08/27/2024		City of Austin							
	Amount (\$) \$270.05		Payee address; City; 721 Barton Springs Rd. Austin, TX 78704	State;	Zip Cod	e				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Office Overhead/Rental Expen		edule) (X Check if Austir	n, TX, Nat e			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	0	office soug	nt		Office held	ł	
	Date		Payee name							
	10/01/2024		City of Austin							
	Amount (\$) \$271.22		Payee address; City; 721 Barton Springs Rd.	State;	Zip Cod	e				
			Austin, TX 78704							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Office Overhead/Rental Expen		edule) (X Check if Austir	n, TX, Nat e			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	0	office soug	nt		Office held	1	

			EXPENDITURE CATEG	ORIES FOR	R BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explai	Office Ove Polling Ex Printing E: Salaries/W	erhea pense xpens Vages	se s/Contract Labor		Travel in District Travel Out of Distri	ipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 7/31 Rpt: 79/138		Raymond, Richard E. Pena (The Honorable)					00021186		
4	Date	5	Payee name				I			
	10/29/2024		City of Austin							
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	ode					
	\$226.45		721 Barton Springs Rd.							
		Austin, TX 78704								
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	,				de of Texas. Comple		
						—		officeholder living e		
						for Austin ren			ash, wastewater utilities	
_	-			- <i>(</i> "	<u> </u>					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office held]	
	Date		Payee name							
	12/20/2024		City of Austin							
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode					
	\$563.81		721 Barton Springs Rd.							
			Austin, TX 78704							
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Comple		
								officeholder living e		
						for Austin ren			ash, wastewater utilities	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight		t			
	expenditure to benefit C/O									
	Date		Payee name							
	11/25/2024		City of Austin							
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode					
	\$104.26		721 Barton Springs Rd.							
			Austin, TX 78704		-					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Comple officeholder living e		
									ash, wastewater utilities	
						for Austin ren			, indetorrator dunitoo	
-	Complete ONLY if direct	<u>ا</u>	Candidate/Officeholder name	Office sou	l Iaht			Office held	1	
	expenditure to benefit C/OI			2	9.10			2.1100 11010	-	
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 8/31 Rpt: 80/138	Raymond, Richard E. Pena (The Honorable)	00021186						
4	Date 10/18/2024	5 Payee name Contessa Gallery & Frame							
6	Amount (\$) \$487.13	7 Payee address; City; State; Zip Code 3705 Kerby Ln. Austin, TX 78731							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense framing of resolutions/pictures for constituents									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/02/2024	Domain Property Management							
	Amount (\$) \$3,900.00	Payee address; City; State; Zip Code 13552 US-183 A							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
			in Austin for officeholder						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/02/2024	Domain Property Management							
	Amount (\$) \$3,900.00	Payee address; City; State; Zip Code 13552 US-183 A							
		Austin, TX 78750							
	PURPOSE OF EXPENDITURE	X Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense I in Austin for officeholder						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schodulo E1:		3 Filer ID (Ethics Commission Filers)						
1	Total pages Schedule F1: Sch: 9/31 Rpt: 81/138	Raymond, Richard E. Pena (The Honorable)	00021186						
4	Date	5 Payee name							
	09/02/2024	Domain Property Management							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$3,900.00	13552 US-183 A							
		Austin, TX 78750							
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
			in Austin for officeholder						
		Ğ							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/02/2024	Domain Property Management							
	Amount (\$) Payee address; City; State; Zip Code								
	\$3,900.00 13552 US-183 A								
		Austin, TX 78750							
	PURPOSE OF EXPENDITURE	X Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense I in Austin for officeholder						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/02/2024	Domain Property Management							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$3,900.00	13552 US-183 A							
	ſ								
		Austin, TX 78750							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	utside of Texas. Complete Schedule T.						
	EXPENDITURE	X Check if Austin,	TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

			EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services	je Expense Iemorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Sabadula E1:	1		tion Guide explains in			5	Filer ID (Ethics Commission Filers)			
T	Total pages Schedule F1: Sch: 10/31 Rpt:		Raymond, Richard E.	Pena (The Honor	rable)		3	Flier ID (Etnics Commission Fliers) 00021186			
4	Date	5 (Payee name				<u> </u>				
	12/02/2024		Domain Property Man	_							
6	Amount (\$)		Payee address; City	'; State;	Zip Cod	le					
	\$3,900.00	:	13552 US-183 A								
			· _ · · 								
		Ľ	Austin, TX 78750								
8	PURPOSE OF		Category (See Categories lis		edule)	(b) Description					
	EXPENDITURE	(Office Overhead/Rent	al Expense				ide of Texas. Complete Schedule T. , officeholder living expense			
								n Austin for officeholder			
						101101110100	y				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		andidate/Officeholder na	ame O	Dffice soug	ht		Office held			
	Date		Payee name								
	08/15/2024	,	Esteban Rangel Camp	paign							
	Amount (\$)		Payee address; City	/; State;	Zip Cod	le					
	\$1,000.00		2705 Pecan St	,	•						
			Laredo, TX 78046								
	PURPOSE OF	(a) (Category (See Categories lis	isted at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Contributions/Donation					ide of Texas. Complete Schedule T. , officeholder living expense			
		`	Candidate/Officeholde	er/Political Comm	Ittee		, I л ,	, Officeholder living expense			
						Contribution					
\vdash	Complete <u>ONLY</u> if direct		andidate/Officeholder na	ame C	Office soug	ht		Office held			
	expenditure to benefit C/OF	Н			-						
╞━	Date		Payee name								
	07/03/2024	1	Gracy's Cleaning Serv	vice							
⊢	Amount (\$)	\vdash	Payee address; City	/: State;	Zip Cod	le					
	\$160.00		11508 Arrowmound P		•						
		<u> </u>	Del Valle, TX 78617								
	PURPOSE		Category (See Categories lis		edule)	(b) Description					
	OF EXPENDITURE	(Office Overhead/Rent	tal Expense				ide of Texas. Complete Schedule T.			
								, officeholder living expense es for officeholder Austin rental house			
						oleaning set.	100	S IOF OILIGEHOLDER AUSULT ETHLE HEES			
	Complete ONLY if direct		andidate/Officeholder na	ame C	Office soug			Office held			
	expenditure to benefit C/OF				11100 0005	int int		Onice field			
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			EXPENDITURE CATEG	ORIES FOR	R BC	DX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explai	Office Ove Polling Ex Printing E Salaries/V	erhea pense xpens Vages	se s/Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2	· · ·		mpro		2	Filer ID	(Ethics Commission Filers)
1	Sch: 11/31 Rpt:	2	Raymond, Richard E. Pena (The Ho	onorable)			3	00021186	
4	Date	5	Payee name						
	07/22/2024		Gracy's Cleaning Service						
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	ode				
	\$160.00		11508 Arrowmound Pass						
			Del Valle, TX 78617						
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense						plete Schedule T.
						Check if Austin			
						cleaning serv	ice		older Austin rental house
_					Ļ				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office he	eld
	Date		Payee name						
	08/02/2024		Gracy's Cleaning Service						
	Amount (\$)	┢	Payee address; City; Sta	ate; Zip Co	ode				
	\$160.00		11508 Arrowmound Pass	, <u>-</u> .p ee					
	\$100.00								
			Del Valle, TX 78617						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense						plete Schedule T.
						X Check if Austin			
						cleaning serv	ice		older Austin rental house
			Sendidata (Office helden verve	0				Office he	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	igni			Onice ne	eiu
	_	_							
	Date		Payee name						
	08/16/2024		Gracy's Cleaning Service						
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode				
	\$160.00		11508 Arrowmound Pass						
			Del Valle, TX 78617						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense	,		Check if travel			plete Schedule T.
	EXPENDITORE					Check if Austin			
						cleaning serv	vice	s for officeh	older Austin rental house
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ight			Office he	eld
	expenditure to benefit C/OI	-1							

			EXPENDITURE CATEG	ORIES FOR	R BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ove Polling Ex Printing E Salaries/V	ayme erhea pense xpens Xpens Vages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	· · ·		mpic	ete tins form.	2	Filer ID	(Ethics Commission Filers)	
L.	Sch: 12/31 Rpt:	2	Raymond, Richard E. Pena (The Ho	norable)			3	Filer ID 00021186		
4	Date	5	Payee name							
	09/25/2024		Gracy's Cleaning Service							
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	ode					
	\$160.00		11508 Arrowmound Pass							
			Del Valle, TX 78617							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE		Office Overhead/Rental Expense			Check if travel			plete Schedule T.	
									older Austin rental house	
						electring eer				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office he	eld	
	Date		Payee name							
	10/22/2024		Gracy's Cleaning Service							
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode					
	\$160.00		11508 Arrowmound Pass							
			Del Valle, TX 78617							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE		Office Overhead/Rental Expense			Check if travel			plete Schedule T.	
									older Austin rental house	
						electring eer				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	l Ight			Office he	eld	
_	Date	<u> </u>	Davias nama							
	12/16/2024		Payee name Gracy's Cleaning Service							
	Amount (\$)			ate; Zip Co	bde					
	\$160.00		11508 Arrowmound Pass							
			Del Valle, TX 78617		ī					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE		Office Overhead/Rental Expense			Check if travel			plete Schedule T.	
									older Austin rental house	
						0.0011119 0011				
	Complete ONLY if direct	Ľ	Candidate/Officeholder name	Office sou	l Iaht			Office he	əld	
	expenditure to benefit C/OI			011100 300	gin			Childe He		
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			EXPENDITURE CATEGO	ORIES FOR	RBOX	(8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Inmittee Legal Services The Instruction Guide explain:	Office Ove Polling Ex Printing Ex Salaries/W	erhead/R pense kpense /ages/Co	Reimbursement Rental Expense ontract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	· · ·				3	Filer ID	(Ethics Commission Filers)
1	Sch: 13/31 Rpt:	-	Raymond, Richard E. Pena (The Hon	orable)				00021186	()
4	Date 08/29/2024	5	Payee name Gracy's Cleaning Service						
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	de				
Ū	\$160.00								
_	DUDDOCE				(1-) -				
8	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. X Check if Austin, TX, officeholder living expense cleaning services for officeholder Austin rental house								expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght			Office he	eld
	Date		Payee name						
	09/12/2024		Gracy's Cleaning Service						
	Amount (\$)		Payee address; City; State	e; Zip Co	de				
	\$160.00		11508 Arrowmound Pass Del Valle, TX 78617						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)		Check if Austin,	TX,		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght			Office he	eld
	Date		Payee name						
	12/02/2024		Gracy's Cleaning Service						
	Amount (\$)		Payee address; City; Stat	e; Zip Co	de				
	\$160.00		11508 Arrowmound Pass						
			Del Valle, TX 78617						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)		Check if Austin,	TX,		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght			Office he	eld

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense tegal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	rheac pense pens ages	e /Contract Labor		Travel in District Travel Out of Distr	uipment & Related Expense		
1	Total pages Schedule F1:	2	· · ·				2	Filer ID	(Ethics Commission Filers)		
1	Sch: 14/31 Rpt:	2	Raymond, Richard E. Pena (The Hono	rable)			3	00021186			
4	Date	5	Payee name								
	11/06/2024		Gracy's Cleaning Service								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de						
	\$160.00		11508 Arrowmound Pass								
			Del Valle, TX 78617								
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	EXPENDITURE		Office Overhead/Rental Expense			Check if travel		de of Texas. Compl			
						_			Ider Austin rental house		
						olocal in 19 oor i					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Dffice sou	ght			Office hel	d		
	Date		Payee name								
	08/21/2024		Gracy's Cleaning Service								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$160.00		11508 Arrowmound Pass	•							
			Del Valle, TX 78617								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	EXPENDITURE		Office Overhead/Rental Expense			X Check if travel		de of Texas. Compl			
						<u> </u>			Ider Austin rental house		
						g					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Dffice sou	ght			Office hel	d		
	Date		Payee name								
	10/08/2024		HEB #186								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$207.49		2310 E. Saunders								
			Laredo, TX 78040								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	EXPENDITURE		Food/Beverage Expense					de of Texas. Compl			
						food for volur			expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office hel	d		
⊢											

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 15/31 Rpt:		Raymond, Richard E. Pena (The Honor	rable)			00021186			
4	Date 11/04/2024	5	Payee name HEB #186							
6	6 Amount (\$) \$91.89 \$91.89 Laredo, TX 78040 7 Payee address; City; State; Zip Code Laredo, TX 78040									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ıht		Office held			
	Date		Payee name							
	11/05/2024		HEB #186							
	Amount (\$)Payee address;City;State;Zip Code\$72.762310 E. Saunders									
	PURPOSE OF EXPENDITURE	(a)	Laredo, TX 78040 Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense PIS			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Iht		Office held			
	Date		Payee name							
	10/10/2024		HEB #255							
	Amount (\$) \$128.40		Payee address; City; State; 4801 San Dario	Zip Co	le					
			Laredo, TX 78041							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense PГS			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Rein Fees Office Overhead/Renta Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Salaries/Wages/Contra The Instruction Guide explains how to complete thi	al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 16/31 Rpt:	Raymond, Richard E. Pena (The Honorable)	00021186							
4	Date 10/18/2024	Payee name HEB #255								
6	6 Amount (\$) \$48.49 \$48.49 Laredo, TX 78041 7 Payee address; City; State; Zip Code Laredo, TX 78041									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/25/2024	HEB #255								
	Amount (\$)Payee address;City;State; Zip Code\$19.674801 San Dario									
	PURPOSE OF EXPENDITURE	Expense	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense for volunteers							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/17/2024	HEB #449								
	Amount (\$) \$26.00	Payee address; City; State; Zip Code 7811 McPherson Rd.								
		aredo, TX 78045								
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food for volunteers									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 17/31 Rpt:	Raymond, Richard E. Pena (The Honorable)	00021186							
4	Date 10/04/2024	Payee name HEB #449								
6	6 Amount (\$) \$158.11 \$158.11 Laredo, TX 78045 7 Payee address; City; State; Zip Code 7811 McPherson Rd. Laredo, TX 78045									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense food for volunteers										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/22/2024	HEB #95								
	Amount (\$) Payee address; City; State; Zip Code \$26.52 1911 Bob Bullock Loop									
		Laredo, TX 78045								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense teers							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/25/2024	HEB #95								
	Amount (\$) \$40.66	Payee address; City; State; Zip Code 1911 Bob Bullock Loop								
		Laredo, TX 78045								
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food for volunteers									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Event Expense Fees Food/Beverage Exper Gift/Awards/Memorial Legal Services The Instruction C	nse Is Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense pense /ages/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense
1	Total pages Schedule F1:	2	2 FILER NAME 3 F					Filer ID	(Ethics Commission Filers)	
	Sch: 18/31 Rpt:		Raymond,	Richard E. Pena	a (The Honc	orable)			00021186	
4	Date	5	Payee name					<u> </u>		
	10/25/2024		HEB Plus -	Laredo						
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de			
	\$47.15		1919 NE B	ob Bullock Loop	C					
			Laredo, TX	78045						
8	PURPOSE	(a)		See Categories listed at	the term of this ook	(a).	(b) Description			
	OF			rage Expense	the top of this son	ieaule)		outsi	ide of Texas. Comp	lete Schedule T.
	EXPENDITURE								, officeholder living	expense
							food for volur	ntee	ers	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ficeholder name		Office sou	yht		Office he	ld
	Date		Payee name							
	12/02/2024		House Der	mocratic Caucus	\$					
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de			
\$1,500.00 1400 N. Congress Ave.										
			Austin, TX	78701						
-	PURPOSE	(a)		See Categories listed at	the ten of this set		(b) Description			
	OF			ins/Donations M		leuule)		outsi	ide of Texas. Comp	lete Schedule T.
	EXPENDITURE			Officeholder/Po		nittee	Check if Austin	ı, TX,	, officeholder living	expense
							caucus dues			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ficeholder name	C	Office sou	yht		Office he	ld
	Date		Payee name	; ;						
	12/10/2024		Jimenez, L							
-	Amount (\$)	⊢	Payee addre	ess; City;	State	; Zip Co	de			
	\$286.00		1705 Corpu							
			Laredo, TX							
	PURPOSE OF	(a)		See Categories listed at	the top of this sch	nedule)	(b) Description		ide of Tourse Open	late Oak adula T
	EXPENDITURE		Event Expe	ense					ide of Texas. Comp , officeholder living	
							photography			
							le : : : : : : : : : : : : : : : : : : :			
	Complete ONLY if direct		Candidate/Of	ficeholder name	(Office sou	aht		Office he	ld
	expenditure to benefit C/OF		Janalaato, On			511100 0004	J.K.			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services The Instruction Guide expla	Office Ov Polling E Printing E Salaries/	verhea xpense Expense Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 19/31 Rpt:		Raymond, Richard E. Pena (The H	lonorable)				00021186	
4	Date	5	Payee name						
	07/25/2024		Kristin Carranza for Texas						
6	Amount (\$)	7	3	state; Zip C	ode				
	\$5,000.00 P.O. Box 831436								
_			San Antonio, TX 78283						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description	outoi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Co	mmittee				, officeholder living expense	
			candidate/onicenoide//r onitical et	Jiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		contribution			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held	
	Date		Payee name						
	08/20/2024		L.I.F.E. Downs						
	Amount (\$)		Payee address; City; S	itate; Zip C	ode				
	\$500.00		US Highway 59						
			Laredo, TX 78043		1				
	PURPOSE OF	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description	outoi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Co	ommittee				, officeholder living expense	
				, minilitiee		donation			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held	
_	Date		Device neme						
	12/17/2024		Payee name Mario Garcia Consulting						
			_	tata. Zia C					
	Amount (\$)		Payee address; City; S 731 W. 19th St.	state; Zip C	oue				
	\$550.00		731 W. 1901 St.						
			Mercedes, TX 78570						
	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description			
	OF EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T.	
	-					political cons		, officeholder living expense	
	ſ					political colls	uitti	ing (
	Complete ONUX if direct	Ľ	Candidate/Officeholder name	Office co				Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Lanunale/Onicenoider name	Office sou	uynt			Onice neiu	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 20/31 Rpt:		Raymond, Richard E. Pena (The Honor	rable)			00021186				
4	Date 09/30/2024	5	Payee name Monte Carlo								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le						
	\$2,000.00 6619 McPherson Rd										
			Laredo, TX 78041								
8	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food for campaign fundraiser 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held				
	Date		Payee name								
	09/03/2024		Promedia Designs, LLC								
	Amount (\$)	\vdash	Payee address; City; State;	Zip Co	le						
	\$500.00		208 Lipan Dr Laredo, TX 78045								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Advertising Expense	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held				
	Date		Payee name								
	09/13/2024		Quarter Mile Graphics								
	Amount (\$)	⊢	Payee address; City; State;	Zip Co	le						
	\$1,577.53		6420 Polaris Dr. #4								
			Laredo, TX 78041								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Printing Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing E Salaries/V	Expense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 21/31 Rpt:		Raymond, Richard E. Pena (The Ho	norable)			00021186				
4	Date	5									
	08/22/2024		Rodriguez, Juan (Mr.)								
6	Amount (\$)	7	-	ite; Zip Co	ode						
	\$1,000.00		1410 E. Hillside Rd, Apt N804								
			Laredo, TX 78041								
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b) Description						
	EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T. , officeholder living expense				
					officeholder						
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l ught		Office held				
	Date		Payee name								
	12/30/2024		Sam's Club - Laredo								
Amount (\$) Payee address; City; State; Zip Code											
	\$79.00 4810 San Bernardo Ave.										
			Laredo, TX 78041								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this : Transportation Equipment And Relat Expense				ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l ught		Office held				
	Date		Payee name								
	11/14/2024		Sam's Club - Laredo								
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode						
	\$35.56		4810 San Bernardo Ave.								
			Laredo, TX 78041								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	•	(b) Description	0	ide of Toylog, Complete Selectule T				
	EXPENDITURE		Transportation Equipment And Relat Expense	ted			ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	yment/Reimbursement rhead/Rental Expense bense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 22/31 Rpt:	Raymond, Richard E. Pena (The Honorable) 00021186								
4	Date	5	Payee name							
	11/08/2024		Sam's Club - Laredo							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de					
	\$36.66		4810 San Bernardo Ave.							
			Laredo, TX 78041							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Transportation Equipment And Relate				ide of Texas. Complete Schedule T.			
			Expense				, officeholder living expense			
					gas for volun	tee	rs			
L				o.""	1					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held			
	Date		Payee name							
	10/28/2024		Sam's Club - Laredo							
Amount (\$) Payee address; City; State; Zip Code										
	\$36.50 4810 San Bernardo Ave.									
			Laredo, TX 78041							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Transportation Equipment And Relate	d			ide of Texas. Complete Schedule T.			
		Expense Check if Austi gas for volu					tin, TX, officeholder living expense nteers			
					gas for voluit		15			
-	Complete ONLY if direct		Candidate/Officeholder name	Office sou	nht		Office held			
	expenditure to benefit C/OF			0	<u></u>					
⊨	Date		Payee name							
	10/10/2024		Sam's Club - Laredo							
-	Amount (\$)		Payee address; City; State	; Zip Co	de					
	\$40.04		4810 San Bernardo Ave.	, <u>Lip</u> 00						
	¢ 10.0 1									
			Laredo, TX 78041							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Transportation Equipment And Relate	d			ide of Texas. Complete Schedule T.			
			Expense				, officeholder living expense			
					gas for volun	iee	15			
	Complete ONIL V if direct	Ļ	Condidata/Officabaldar nama	Office and	abt.		Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	JIIL		Office held			
⊢										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid		Office Over Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	FILER	NAME				3	Filer ID (Ethics Commission Filers))	
	Sch: 23/31 Rpt:	Raym	00021186							
4	Date	Payee	name							
	11/04/2024	Sancl	nez Financial Consultan	ts, Inc.						
6	Amount (\$)	Payee	address; City;	State;	Zip Cod	e				
	\$200.00	7109	N Bartlett Ave Ste 205							
		Lared	o, TX 78041							
8	PURPOSE		Dry (See Categories listed at the t	ion of this coho	(b) Description				
Ĩ	OF		Inting/Banking	op of this sche	aule)		outs	ide of Texas. Complete Schedule T.		
	EXPENDITURE	, 10001	and ing banning			Check if Austir	ı, TX	, officeholder living expense		
						accounting s	erv	ices for campaign		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder name	0	ffice soug	ht		Office held		
	Date	Payee	name							
	12/10/2024	Sciara	affa, Frank							
	Amount (\$)	Pavee	address; City;	State [.]	Zip Cod	e				
	\$10,000.00	-	Box 3735	oluic,	210 000	0				
	\$10,000.00	1.0.1	507 57 55							
		Lared	o, TX 78044							
	PURPOSE OF		Ory (See Categories listed at the		edule)	b) Description				
	EXPENDITURE	Salari	es/Wages/Contract Lab	or				ide of Texas. Complete Schedule T. , officeholder living expense		
						campaign wo		, oncenolaer hving expense		
						ouripuign we				
_	Complete ONLY if direct	Candida	ate/Officeholder name	0	ffice soug	ht		Office held		
	expenditure to benefit C/OF	Cundid		0	ince soug					
	Date	Payee	name							
	09/04/2024		ty of Martha Washingtor	า						
	Amount (\$)		address; City;		Zip Cod	e				
	\$700.00		Box 1775	otato,	2.0 000	0				
	\$100.00	1.0.1	50/ 1110							
		Lared	o, TX 78044							
	PURPOSE	a) Categ	Dry (See Categories listed at the t	top of this sche	edule)	b) Description				
	OF EXPENDITURE	Advei	tising Expense					ide of Texas. Complete Schedule T.		
	EXFENDITORE							, officeholder living expense		
						Officeholder a		for Washington's Birthday		
							.55			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candida	ate/Officeholder name	0	ffice soug	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 24/31 Rpt:		Raymond, Richard E. Pena (The Honor	rable)			00021186			
4	Date 09/27/2024	5	Payee name Society of Martha Washington							
_		Ŀ								
6	6 Amount (\$) \$450.00 Amount (\$) 7 Payee address; City; State; Zip Code P.O. Box 1775 Laredo, TX 78044									
Ļ	DUDDOOF	<u> </u>		—	()					
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 officeholder ad for Washington's Birthday Celebration Association										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	yht .		Office held			
	Date	Γ	Payee name							
	09/03/2024		Sports Max							
	Amount (\$)	┢	Payee address; City; State;	; Zip Co	de					
	\$500.00		2316 Denmark Laredo, TX 78040							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	edule)		I, TX,	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	yht		Office held			
	Date	Γ	Payee name							
	12/31/2024		Stripe, Inc.							
	Amount (\$)	\vdash	Payee address; City; State;	; Zip Co	de					
	\$4,524.17		354 Oyster Point Blvd							
			San Francisco, CA 94080							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)	Check if Austin	ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense , online political contributions			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	yht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)					
1	Sch: 25/31 Rpt:	Raymond, Richard E. Pena (The Honorable)	00021186					
4	Date 07/07/2024	Payee name T-Mobile						
6	Amount (\$) \$125.00	Payee address; City; State; Zip Code P.O. Box 742596 Cincinnati, OH 45274-2596						
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense r campaign staff					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/07/2024	T-Mobile						
	Amount (\$) \$125.00	Payee address;City;State; Zip CodeP.O. Box 742596						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense r campaign staff					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/07/2024	T-Mobile						
	Amount (\$) \$125.00	Payee address;City;State; Zip CodeP.O. Box 742596						
		Cincinnati, OH 45274-2596						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense r campaign staff					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)					
-	Sch: 26/31 Rpt:	Raymond, Richard E. Pena (The Honorable)	00021186					
4	Date 10/07/2024	Payee name T-Mobile						
6	Amount (\$) \$125.00	Payee address;City;State;Zip CodeP.O. Box 742596Cincinnati, OH 45274-2596						
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 cell phone for campaign staff 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/07/2024	T-Mobile						
	Amount (\$) \$125.00	Payee address;City;State;Zip CodeP.O. Box 742596						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense campaign staff					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	12/07/2024	T-Mobile						
	Amount (\$) \$125.00	Payee address;City;State;Zip CodeP.O. Box 742596						
		Cincinnati, OH 45274-2596						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Campaign staff					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Poling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 27/31 Rpt:	Raymond, Richard E. Pena (The Honorable)	00021186					
4	Date 07/29/2024	Payee name Texas Gas Service						
6	Amount (\$) \$40.02	Payee address; City; State; Zip Code P.O. Box 31427 El Paso, TX 79901						
8	PURPOSE OF EXPENDITURE	X Check if Aus	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense ' gas utilities for Austin rental house					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/27/2024	Texas Gas Service						
	Amount (\$) \$38.37	Payee address; City; State; Zip Code P.O. Box 31427 El Paso, TX 79901						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description Office Overhead/Rental Expense Check if trav X Check if Aus	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense • gas utilities for Austin rental house					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/26/2024	Texas Gas Service						
	Amount (\$) \$35.59	Payee address; City; State; Zip Code P.O. Box 31427						
		El Paso, TX 79901						
	PURPOSE OF EXPENDITURE	X Check if Aus	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense gas utilities for Austin rental house					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		•				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 28/31 Rpt:		Raymond, Richard E. Pena (The Honor	rable)			00021186		
4	Date 10/25/2024	5	Payee name Texas Gas Service						
6	Amount (\$) \$36.23	7	Payee address; City; State; P.O. Box 31427 El Paso, TX 79901	Zip Co	le				
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 officeholder gas utilities for Austin rental hou 					officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	Office sou	ht		Office held		
	Date		Payee name						
	11/26/2024		Texas Gas Service						
	Amount (\$) \$42.58		P.O. Box 31427	Zip Co	le				
	PURPOSE OF EXPENDITURE	(a)	El Paso, TX 79901 Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)	X Check if Austir	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense utilities for Austin rental house		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	Diffice soug	ht		Office held		
	Date		Payee name						
	12/10/2024		U.I.S.D. Police Department						
	Amount (\$) \$250.00		Payee address; City; State; 2219 Springfield Ave,	Zip Coo	le				
			Laredo, TX 78040						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Commi	,	Check if Austir	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense Insorship of charity football game		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	Office sou	ht		Office held		
		_		_		_			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Ov Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing E	Expense Wages/Contract Labor			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 29/31 Rpt:		Raymond, Richard E. Pena (The Honorable)				00021186	
4	Date 12/03/2024	5	Payee name USA Savate					
6	Amount (\$) \$500.00	7	Payee address; City; State; Zip Co 27831 Smyth Dr Valencia, CA 91355	ode				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b)			de of Texas. Complete Schedule T. officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office so	ught			Office held	
	Date		Payee name					
	08/06/2024		Vanessa Perez Campaign					
	Amount (\$) \$500.00		Payee address; City; State; Zip Co 414 Crossbill	ode				
			Laredo, TX 78045					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b)			de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ught			Office held	
	Date		Payee name					
	12/31/2024		Variety Meats					
	Amount (\$) \$222.12		Payee address; City; State; Zip Co 520 Shiloh Dr	ode				
			Laredo, TX 78045					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense d supporters	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ught			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		-	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)	
	Sch: 30/31 Rpt:		Raymond, Richard E. Pena (The Hono	rable)			00021186	
4	Date 11/18/2024		Payee name Variety Meats					
6	Amount (\$) \$106.71		Payee address; City; State; Zip Code 520 Shiloh Dr Laredo, TX 78045					
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food for staff and supporters 					officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	yht		Office held	
	Date		Payee name					
	10/24/2024		Variety Meats					
	Amount (\$) \$122.42		Payee address; City; State; 520 Shiloh Dr	; Zip Co	de			
			Laredo, TX 78045					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense PTS	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	jht		Office held	
	Date		Payee name					
	07/01/2024		Villarreal, Graciela					
	Amount (\$) \$4,000.00		Payee address;City;State;4008 Aguascalientes	; Zip Co	de			
			Laredo, TX 78046					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Printing Expense mmittee Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)					
	Sch: 31/31 Rpt:	Raymond, Richard E. Pena (The Honorable)	00021186					
4	Date 08/01/2024	Payee name Villarreal, Graciela						
6	Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 4008 Aguascalientes Laredo, TX 78046						
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date 09/24/2024	Payee name Villarreal, Graciela						
	Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 4008 Aguascalientes Laredo, TX 78046						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/01/2024	Villarreal, Graciela						
	Amount (\$) \$4,000.00	Payee address;City;State;Zip Code4008 Aguascalientes						
		Laredo, TX 78046						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

	EXPE	NDITURE CATEGOR	RIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense		rage Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	Office Overhead/Rental Expense Transportation Equipment & Related Expense Travel in District					
Contributions/ Donations Made By Candidate/Officeholder/Politica		s/Memorials Expense	Printing Expense Salaries/Wages/Contract Labor		vel Out of District HER (enter a category	not listed ab	ove)		
	The Instr	ruction Guide explains h	now to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			:	3 Filer ID (Ethics	s Commiss	ion Filers)		
Sch: 1/28 Rpt:	Raymond, Richard	E. Pena (The Honoi	rable)		00021186				
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITE		.				
ISSUER	Citik	oank	EXPENDITURES CHARGED TO A C CARD	CHARGED TO A CREDIT					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer	Paid				
	\$5,000.00	10/15/2024	11/04/2024						
7 PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
			685 John B. Sias N	/lemorial	l Pkwy, Ste 400	0			
	Tarrant County Den	nocratic Party							
			Edgecliff Village, T	X 76134	1				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description						
_	Contributions/Donatio	ns Made By		contribution					
X Political	Candidate/Officeholde								
Non-Political		of Texas. Complete Schedule		Austin, TX, o	officeholder living expe	ense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH									
	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer	Paid				
	\$73.60	08/01/2024	09/12/2024						
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
	AT&T-MoPac		5770 N. MoPac Ex	5770 N. MoPac Expwy, Ste 100					
			Austin, TX 78731						
PURPOSE OF	(a) Category		(b) Description	(b) Description					
	(See Categories listed at the top of Office Overhead/Rent		accessories for officeholder cell phone						
X Political		•							
Non-Political		of Texas. Complete Schedule		Austin, TX, o	officeholder living expe	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	office sought		Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d lecuor	Paid				
			11/04/2024	u issuei	raiu				
	\$286.50	10/04/2024							
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
			6412 Burnet Rd						
	Extra Space Storag	e							
			Austin, TX 78757						
PURPOSE OF	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description						
	Office Overhead/Rent		storage space for o	campaig	n and officehol	lder item	S		
X Political		-							
Non-Political		of Texas. Complete Schedule		Austin, TX, o	officeholder living expe	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held				

		EXPE	ENDITURE CATEGOR	RIES F	OR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Awards	rage Expense s/Memorials Expense	Office Polling Printir Salari	Repayment/Reimbursement Overhead/Rental Expense g Expense es/Wages/Contract Labor	Tra Tra Tra	icitation/Fundraisi insportation Equip ivel in District ivel Out of District HER (enter a cate	ment & Related E			
_			ruction Guide explains i	now to	complete this form.				· · · = = 1 · · · · · ·		
1	Total pages Schedule F4:		E Done (The Llong	rabla	N N N N N N N N N N N N N N N N N N N		3 Filer ID (E 00021186	thics Commiss	sion Filers)		
	Sch: 2/28 Rpt:	Raymond, Richard	•				00021100				
4	CREDIT CARD ISSUER		ncial institution revious		5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD		\$	10,033.5	60		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		(c) Date(s) Credit Card Is	suer	Paid				
		\$5,321.19	07/25/2024		09/12/2024						
7	PAYEE	(a) Payee name	I		(b) Payee address;		City,	State,	Zip Code		
		Allstate Insurance C	Company		3075 Sanders Rd, Ste Northbrook, IL 60062	H14	4				
8					(b) Description						
0	EXPENDITURE	(See Categories listed at the top	of this schedule)			ın ve	hicles for size	x months			
	X Political	Office Overhead/Rent	tal Expense		insurance for campaign vehicles for six months						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	Check if Austin	1, TX, c	officeholder living	expense			
9	Complete ONLY if direct	Candidate/Officeholder	name C	Office s	sought		Office held				
e	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge		(c) Date(s) Credit Card Is	suer	Paid				
		\$228.86	07/17/2024		08/08/2024						
	PAYEE	(a) Payee name			(b) Payee address;		City,	State,	Zip Code		
		Direct TV			P.O. Box 5014						
					Carol Stream, IL 60197						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)		(b) Description officeholder cable in Austin						
	X Political	Office Overhead/Rent	tal Expense								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	Check if Austin	1, TX, c	officeholder living	expense			
	Complete ONLY if direct	Candidate/Officeholder	name C	Office s	sought		Office held				
e	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge		(c) Date(s) Credit Card Is	suer	Paid				
		\$198.96	09/17/2024		10/07/2024						
	PAYEE	(a) Payee name	•		(b) Payee address;		City,	State,	Zip Code		
		Direct TV			P.O. Box 5014						
						_					
		(a) Catagor:			Carol Stream, IL 6019	7					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)		(b) Description officeholder cable in A	lletir	h				
	X Political	Office Overhead/Rent					•				
	Non-Political		of Texas. Complete Schedule	e T.	X Check if Austin	n, TX, c	officeholder living	expense			
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office s	sought		Office held				
e	xpenditure to benefit C/OH										

		EXPE	ENDITURE CATEGOR	NES FOR BOX 10(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve Gift/Awards	ense rage Expense s/Memorials Expense	Loan Repayment/Reimburseme Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	e Tra Tra Tra	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)			
		The Inst	ruction Guide explains h	now to complete this form.					
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics	s Commiss	ion Filers)	
	Sch: 3/28 Rpt:	Raymond, Richard	E. Pena (The Honor	rable)		00021186			
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNIT EXPENDITURE		\$	10,033.5	0	
	ISSUER	see pi	revious	CHARGED TO A CARD	-	\$	10,033.0		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	ard Issuer	Paid			
		\$184.00	07/04/2024	08/08/2024					
7	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code	
				6412 Burnet Rd					
	Extra Space Storage								
				Austin, TX 78757	,				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		up and affinabal	dan itana	-	
	_	Office Overhead/Rent	in Austin	storage space for campaign and officeholder items in Austin					
	X Political		_						
_	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule		if Austin, TX, o	officeholder living expe	nse		
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Onicenoider	name O	ffice sought		Office held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	ard Issuer	Paid			
		\$389.70	08/27/2024	10/07/2024					
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code	
				5201 N Lamar Bl	vd				
		Lone Star Awards							
				Austin, TX 78751					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
		Gift/Awards/Memorial	,	awards for fundraising event					
	X Political								
	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule		if Austin, TX, o	officeholder living expe	nse		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Onicenoider	name O	ffice sought		Office field			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	ard Issuer	Paid			
		\$305.21	07/29/2024	09/12/2024					
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code	
		AT&T - Laredo		5704 San Bernar	do Ave.				
					1				
_		(a) Category		Laredo, TX 7804 (b) Description	T				
	PURPOSE OF EXPENDITURE	(See Categories listed at the top	,	officeholder mob	ile telenho	one and compu	ter		
	X Political	Office Overhead/Rent	tal Expense	wireless					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule		if Austin TV	officeholder living expe	nso		
-	Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought		Office held	1130		
e	xpenditure to benefit C/OH			J -					

Forms provided by Texas Ethics Commission

	EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	/ - Gift/Awards al Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Office Overhead/Rental Expense Transportation Equipment & Related Expense Volling Expense Travel in District Vrinting Expense Travel Out of District alaries/Wages/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule F4:	i			2 51	er ID (Ethics Commiss	sion Eilers)		
Sch: 4/28 Rpt:		E. Pena (The Honor	(ablo)	0002	-	sion r liers)		
4 CREDIT CARD	-	ncial institution	5 TOTAL OF UNITEN		1100			
ISSUER		revious	EXPENDITURES CHARGED TO A C CARD	\$	10,033.5	50		
6 PAYMENT	(a) Amount Charged \$108.52	(b) Date of Charge 09/05/2024	(c) Date(s) Credit Card 10/07/2024	d Issuer Paid				
7 PAYEE	(a) Payee name		(b) Payee address;	City	, State,	Zip Code		
	AT&T - Laredo		5704 San Bernardo	Ave.				
8 PURPOSE OF	PURPOSE OF (a) Category (b) Description							
EXPENDITURE	(See Categories listed at the top	of this schedule)	officeholder mobile	telephone a	nd computer			
X Political	X Political Office Overhead/Rental Expense							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	ustin, TX, officehol	der living expense			
9 Complete <u>ONLY</u> if direct	ffice sought		e held					
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer Paid				
	\$208.86	10/06/2024	11/04/2024					
PAYEE	(a) Payee name AT&T - Laredo		(b) Payee address; 5704 San Bernardo Laredo, TX 78041	City Ave.	, State,	Zip Code		
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		officeholder mobile wireless	officeholder mobile telephone and computer wireless				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	ustin, TX, officehol	der living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder		ffice sought		e held			
PAYMENT	(a) Amount Charged \$208.90	(b) Date of Charge 11/05/2024	(c) Date(s) Credit Card 12/17/2024	d Issuer Paid				
PAYEE	(a) Payee name AT&T - Laredo		(b) Payee address; 5704 San Bernardo Laredo, TX 78041	City Ave.	, State,	Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description officeholder mobile wireless					
Non-Political		of Texas. Complete Schedule		ustin, TX, officehol				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Offic	e held			

Available Properties Available Propertin Available Properis Available Properies Available Properties Ava											
Accounting Building Petra			EXPE	ENDITURE CATEGOR	NES FOR BOX 10(a)						
Construction Dependence Description of the second construction of the second constructin of the second construction of the second consecond co				ense							
Capacity Contraction Capacity Contracticy Contractin Contraction Capacity Contraction <th></th> <td>Consulting Expense</td> <td>Food/Beve</td> <td>Polling Expense</td> <td>Trav</td> <td colspan="3"></td>		Consulting Expense	Food/Beve	Polling Expense	Trav						
1 Total pages Schedule F4: Sch: 5/28 Rpt: 2 FILER NAME Raymond, Richard E. Pena (The Honorable) 3 Filer ID (Ethics Commission Filers) 00021186 4 CREDT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITENES CARD 5 10,033.50 6 PAYMENT (a) Amount Charged \$119.00 (b) Date of Charge 12/06/2024 (c) Date(s) Credit Card Issuer Paid 5 10,033.50 7 PAYEE (a) Payee name AT&T - Laredo (b) Payee address; 5704 San Bernardo Ave. City, State, Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (b) Category (the rest dated of the schedule) Office Overhead/Rental Expense (b) Description 9 Complete ONLY if direct expendiure to benefit COH Candidate/Officeholder name Office scupte rest Office held 9 Complete ONLY if direct expendiure to benefit COH (a) Amount Charged \$281.26 (b) Date of Charge 07/06/2024 (c) Cate(s) Credit Card Issuer Paid 08/08/2024 Office held PAYEE (a) Payee name (b) Payee name AT&T - Laredo (b) Date of Charge 07/06/2024 (c) Date(s) Credit Card Issuer Paid 08/08/2024 Office held PAYEE (a) Category (b) Category dist the test of the schedule) (b) Description officeholder moble telephone and computer vireless Offi			l Committee Legal Serv	ices	Salaries/Wages/Contract Labor			gory not listed at	oove)		
Sch: S/28 Rpt: Raymond, Richard E. Pena (The Honorable) 00021186 4 CREDIT CARD ISURE Name of finat-icial institution Set previous 5 TOTAL OF UNITENIZED CARDOB TO A CREDIT 5 10,033.50 6 PAYMENT (a) Amount Charged S119.00 (b) Date of Charge 12/06/2024 (c) Dates, Credit Card Issuer Paid 7 PAYEE (a) Payee name EXPENDITURE (b) Payee address; S704 San Bernardo Ave. Laredo, TX 78041 City, State, Zip Code 8 PUPPOSE OF EXPENDITURE (a) Category (b) Category (c) Category				ruction Guide explains h	now to complete this form.						
4 CREDIT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITEMIZED CHARGE TO A CREDIT CARD \$ 10,033.50 6 PAYMENT (a) Amount Charged \$119.00 (b) Date of Charge 12/06/2024 (c) Date(s) Credit Card Issuer Paid \$ 10,033.50 7 PAYEE (a) Payee name AT&T - Laredo (b) Payee address: City. City. State. Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (de Category instruct and the store of this sometable) Office Coverhead/Rental Expense Office Instruct and computer wireless Ontorio office Auster. Tr. offontoder Intege reprise 9 Complete DALV if direct expenditure to benefit C/OH (a) Amount Charged \$221.26 (b) Date of Charge 07/06/2024 City. State. Zip Code S704 San Bernardo Ave. PAYEE (a) Amount Charged (b) Date of Charge At and the file of date of the state in the origin of this sometable 07/06/2024 Office Inde/ Code S704 San Bernardo Ave. City. State. Zip Code S704 San Bernardo Ave. PAYEE (a) Payee name AT&T - Laredo (b) Payee address; S704 San Bernardo Ave. City. State. Zip Code S704 San Bernardo Ave. PurPOSE OF EXPENDITURE (a) Category (Ge Category is concepts bind at the store of the sometable) Office Overhead/Rental Expense (b) Description officeho	1							thics Commiss	ion Filers)		
ISSUER See previous EXPENDITURES CARGED TO A CREDIT CARGED TO A CREDIT CARGED TO A CREDIT CARGED TO A CREDIT I.0.033.50 6 PAYMENT (a) Amount Charged \$119.00 (b) Date of Charge 12/06/2024 (c) Date(s) Credit Card Issuer Paid 7 PAYEE (a) Payee name AT&T - Laredo (b) Payee address; S704 San Bernardo Ave. Oity. State, Zip Code 8 Puppose OF EXPENDITURE (c) C order travel outside of texes to thatk); Office Overhead/Rental Expense (b) Description officeholder mobile telephone and computer wireless (c) Context travel outside of texes to thatk); Office Overhead/Rental Expense (c) Description officeholder mobile telephone and computer wireless 9 Complete DBLY if direct expenditure to benefit COH (c) Date of Charge 07/06/2024 (c) Date(s) Credit Card Issuer Paid 08/08/2024 Office held PAYEE (a) Amount Charged \$281.26 (b) Payee address; 07/06/2024 City. State, Zip Code 5704 San Bernardo Ave. PAYEE (a) Category S20.33 (b) Date of Charge 07/06/2024 (b) Payee address; City. City. State, Zip Code 5704 San Bernardo Ave. EXPENDITURE expenditure to benefit COH (c) Category 07/06/2024 (b) Payee address; City. City. State, Zip Code 5704 San Bernardo Ave. PAYEE (a) Category 06/0		-	-	•	,		00021186				
See previous CHARGE TO A CREDIT 6 PAYMENT (a) Amount Charged \$119.00 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 7 PAYEE (a) Payee name AT&T - Laredo (b) Payee address: Cardot Card O Ave. Cliv, State, Zip Code 8 PUEPOSE OF EXPENDITURE (a) Category (ce- Cardot card terme or the scheale) Office Overhead/Rental Expense (b) Payee address: Cardot card issuer Paid Cliv, State, Zip Code 9 Complete ONLY if direct expenditure to benefit C/OH (c) Category (ce- Cardot card terme or the scheale) Office Poid Card (c) Category (ce- Cardot card terme or the scheale) Office Overhead/Rental Expense (c) Catek it raver or the scheale) Office Poid Card Office hold 9 Complete ONLY if direct expenditure to benefit C/OH (c) Catek it raver or the scheale) Office Overhead/Rental Expense (c) Date(s) Credit Card Issuer Paid O8/08/2024 PAYEE (a) Amount Charged s281.26 (b) Date of Charge O7/06/2024 (c) Date(s) Credit Card Issuer Paid O8/08/2024 PUEPOSE OF EXPENDITURE (a) Category Office Overhead/Rental Expense (b) Description office hold er mobile telephone and computer wireless 1 Non-Political (c) Catek it ravei or this scheale) Office Overhead/Rental Expense (b) Description office hold er mobile telephone and computer wireless 2 Candidate/Office/Office Order targe Office Overhead/Rental Expense (c) Catek it raveit	4		Name of finar	ncial institution			\$	10 033 5	50		
6 PAYMENT (a) Amount Charged \$119.00 (b) Date of Charge 12/06/2024 (c) Date(s) Credit Card Issuel Paid 7 PAYEE (a) Payee name AT&T - Laredo (b) Payee address; 5704 San Bernardo Ave. City, State, Zip Code 5704 San Bernardo Ave. 8 PURPOSE OF EXPENDITURE (a) Category (b) Category (b) Category (c) Orderhead/Rental Expense (b) Description 9 Omplete DNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office Notes music address; 5704 San Bernardo Ave. City, State, Zip Code 5704 San Bernardo Ave. 9 Complete DNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office Notes music address; 07/06/2024 City, State, Zip Code 5704 San Bernardo Ave. PAYEE (a) Payee name AT&T - Laredo (b) Date of Charge 07/06/2024 (c) Date(s) Credit Card Issuer Paid 08/08/2024 PAYEE (a) Category (free Campute Istel at the to of this schedule) Office Overhead/Rental Expense (b) Dase of Date of Ave. Laredo, TX 78041 Complete DNLY if direct expenditure to benefit C/OH (a) Category (free Campute Istel at the to of this schedule) Office Polder mobile telephone and computer wireless (b) Description officeholder mobile telephone and computer wireless Complete DNLY if direct (a) Category (free Campute Istel at the to of this schedule) Office Poltical (c) Check if taxeel Oathote		ISSUEIX	see pi	revious	CHARGED TO A		Ŷ	20,000.0			
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Forms provided by Texas Ethics Commission

	EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	rage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Inst	ruction Guide explains h	now to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Sch: 6/28 Rpt:	Raymond, Richard	E. Pena (The Honor	rable)	00021186
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZE	
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	aign and officeholder items
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	Extra Space Storag	le		
			Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description	
	Office Overhead/Rent	,	storage space for camp in Austin	aign and officeholder items
X Political				
Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T.	TX, officeholder living expense Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Oniceriolder	name O	Since Sought	Onceneid
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid
	\$286.50	11/04/2024	12/17/2024	
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Extra Space Storag	le	6412 Burnet Rd	
			Auctin TV 79757	
PURPOSE OF	(a) Category		Austin, TX 78757 (b) Description	
EXPENDITURE	(See Categories listed at the top	,		aign and officeholder items
X Political	Office Overhead/Rent	tal Expense	in Austin	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder		Office sought	Office held
expenditure to benefit C/OH				

		EXPE	ENDITURE CATEGOR	IES FOR BOX 10	D(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Awards	rage Expense s/Memorials Expense ices	Loan Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr	al Expense Tra Tra Tract Labor OT	licitation/Fundraising ansportation Equipme avel in District avel Out of District THER (enter a catego	nt & Related E	
			ruction Guide explains h	ow to complete th	is form.			
1	Total pages Schedule F4:					3 Filer ID (Ethi	cs Commiss	ion Filers)
	Sch: 7/28 Rpt:		E. Pena (The Honor			00021186		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	DF UNITEMIZED ITURES ED TO A CREDIT	\$	10,033.5	50
6	PAYMENT	(a) Amount Charged \$447.68	(b) Date of Charge 09/27/2024	(c) Date(s) 0 11/04/2024	Credit Card Issuei 4	r Paid		
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Extra Space Storag	le	6412 Burn	et Rd			
				Austin, TX	78757			
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodulo)	(b) Descripti				
		Contributions/Donatio	,	contributio	n			
	X Political	Candidate/Officeholde		e				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e.	xpenditure to benefit C/OH					- Deid		
	PAYMENT	(a) Amount Charged \$208.00	(b) Date of Charge 07/26/2024	09/12/202	Credit Card Issuei 4	Palu		
	PAYEE	(a) Payee name Sanchez Financial	I Consultants,	(b) Payee ad 7109 N Ba Laredo, T≻	rtlett Ave Ste 2	City, 05	State,	Zip Code
	PURPOSE OF	(a) Category		(b) Descripti	on			
	EXPENDITURE	(See Categories listed at the top Accounting/Banking	of this schedule)	accounting	services for ca	ampaign		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т. 🛛	Check if Austin, TX,	officeholder living exp	ense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held		
	PAYMENT	(a) Amount Charged \$208.44	(b) Date of Charge 10/17/2024	(c) Date(s) 0 11/04/2024	Credit Card Issuer 4	r Paid		
	PAYEE	(a) Payee name Direct TV		(b) Payee and P.O. Box 5 Carol Stree		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent	al Expense	(b) Descripti officeholde	on er cable in Austi		00050	
			of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct Candidate/Officeholder name Office sought Office held penditure to benefit C/OH Complete Sought Office held							

		EXPE	ENDITURE CATEGOR	IES FOR BOX	10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve Gift/Award	ense rage Expense s/Memorials Expense	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	eimbursement ental Expense	Transı Travel Travel	ation/Fundraisin portation Equipm in District Out of District R (enter a categ	nent & Related E	
		The Inst	ruction Guide explains h	low to complete	this form.				
1	Total pages Schedule F4:	2 FILER NAME				3	Filer ID (Eth	hics Commiss	ion Filers)
	Sch: 8/28 Rpt:	Raymond, Richard	E. Pena (The Honor	able)		0	0021186		
4	CREDIT CARD	Name of final	ncial institution		OF UNITEMIZE	ED s		10,033.5	0
	ISSUER	see pi	revious		GED TO A CREE			10,033.0	
6	PAYMENT	(a) Amount Charged \$870.85	(b) Date of Charge 09/13/2024	(c) Date(s) 10/07/20	Credit Card Iss 24	suer Pa	aid		
7	PAYEE	(a) Payee name		(b) Payee	address;		City,	State,	Zip Code
				7718 Mc	Pherson Rd #	8, 77	18 McPher	son Rd #8	
		San Telmo Argentir	nean						
				Laredo, 1					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip					
		Food/Beverage Exper	,	tood for c	food for officeholder meeting with constituents				
	X Political								
_	Non-Political		of Texas. Complete Schedule		Check if Austin,			xpense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		(Office held		
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid									
		\$252.39	10/01/2024	11/04/20					
	PAYEE	(a) Payee name Hampton Inn - Port	Aransas	(b) Payee 2208 TX- Port Arar			City,	State,	Zip Code
	PURPOSE OF	(a) Category		(b) Descrip	otion				
	EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	lodging fo	or meeting with	h sup	porters		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin,	TX, offic	ceholder living e	xpense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		(Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Iss	uer Pa	aid		
		\$650.00	09/25/2024	11/04/20	24				
	PAYEE	(a) Payee name	1	(b) Payee	address;		City,	State,	Zip Code
		Don Bonnin Charity	Auctions	15733 Sa	an Pedro Ave				
					nio, TX 78232	2			
	PURPOSE OF	(a) Category	of this schedulo)	(b) Descrip		-			
		(See Categories listed at the top Contributions/Donatio		donation	for La Prensa,	, San	Antonio Te	exas	
	X Political	Candidate/Officeholde		e					
	Non-Political		of Texas. Complete Schedule		Check if Austin,			xpense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		(Office held		

		EXPE	ENDITURE CATEGORII	ES FOR BOX	10(a)			
	Advertising Expense Accounting/Banking	Event Expe Fees	ense L	oan Repayment/R	Reimbursement	Solicitation/Fundraising E Transportation Equipmer		Typense
	Consulting Expense Contributions/ Donations Made By	Food/Beve	rage Expense	Polling Expense		Travel in District Travel Out of District	ni a riciaica i	LAPENSE
	Candidate/Officeholder/Politica	I Committee Legal Serv		Printing Expense Salaries/Wages/Co		OTHER (enter a categor	y not listed at	oove)
		The Inst	ruction Guide explains ho	w to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	ion Filers)
	Sch: 9/28 Rpt:	Raymond, Richard	E. Pena (The Honora	ıble)		00021186		
4	CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED			
	ISSUER	see pi	revious		IDITURES GED TO A CREDI	, \$	10,033.5	0
				CARD				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$200.08	10/18/2024	11/04/20)24			
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				1701 Re	d River			
		UT Athletics						
				Austin, T	X 78701			
8	PURPOSE OF	(a) Category		(b) Descri	•			
	EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial		football t	ickets for suppo	orters		
	X Political	Citil Wards/Weinbridi						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T		Check if Austin, T	X, officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Off	ice sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issu	er Paid		
		\$208.00	07/09/2024	08/08/20)24			
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Constant Financial	O a manufika mka	7109 N E	Bartlett Ave Ste	205		
		Sanchez Financial	Consultants,					
					TX 78041			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Descri				
		Accounting/Banking	of this schedule)	accounti	ng services for o	campaign		
	X Political	5						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T		Check if Austin, T	X, officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Off	ice sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issu	er Paid		
		\$227.97	10/12/2024	11/04/20	124			
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Truluck's - Arboretu	ım	10225 R	esearch Blvd. #	4000		
		(a) Catagon :		Austin, T				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri		eting with suppor	tore	
		Food/Beverage Expe	,			sung with suppor	1013	
	X Political							
	Non-Political		of Texas. Complete Schedule T		Check if Austin, T	X, officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Off	ice sought		Office held		
e	xpenditure to benefit C/OH							

	EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense										
	Advertising Expense Accounting/Banking	Event Expe Fees	ense		licitation/Fundraising Expense ansportation Equipment & Related Expense						
	Consulting Expense	Food/Beve	erage Expense	Polling Expense Tr	avel in District						
	Contributions/ Donations Made By Candidate/Officeholder/Politica		s/Memorials Expense rices		avel Out of District THER (enter a category not listed above)						
		The Inst	ruction Guide explains	how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)						
	Sch: 10/28 Rpt:	Raymond, Richard	E. Pena (The Hono	rable)	00021186						
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED							
	ISSUER	see n	revious	EXPENDITURES	\$ 10,033.50						
				CHARGED TO A CREDIT CARD							
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
		\$364.00	12/15/2024								
		4004.00	12,10,2024								
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code						
				2395 E. Del Mar Blvd.							
		U.S. Postal Service	e - Del Mar								
				Laredo, TX 78045							
8	PURPOSE OF	(a) Category		(b) Description							
Ŭ	EXPENDITURE	(See Categories listed at the top	of this schedule)	campaign PO box renewa	l fee						
	X Political	Office Overhead/Rent	tal Expense								
	Non-Political		of Texas. Complete Schedule		officeholder living expense						
9 Complete ONLY if direct Candidate/Officeholder name			r name C	Office sought	Office held						
expenditure to benefit C/OH			1								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
		\$659.76	09/20/2024								
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code						
		Taco Palenque		7122 Bob Bullock Loop #2	20						
		raco Falenque									
				Laredo, TX 78041							
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodula)	(b) Description							
		Food/Beverage Exper			ing with Webb County Democratic						
	X Political	, i i i i i i i i i i i i i i i i i i i		precinct chairs							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin, TX,	officeholder living expense						
	Complete ONLY if direct	Candidate/Officeholder	r name C	Office sought	Office held						
e	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
		\$28.70	09/28/2024	11/04/2024							
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code						
				7122 Bob Bullock Loop #2	20						
		Taco Palenque									
				Laredo, TX 78041							
	PURPOSE OF	(a) Category		(b) Description							
	EXPENDITURE	(See Categories listed at the top		food for officeholder meet	ing with supporters						
	X Political	Food/Beverage Expe	nse								
	Non-Political	(c) Chack if travel outside	of Taxas Complete Schedule		officeholder living evonso						
		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	Diffice sought	officeholder living expense Office held						
	Complete <u>ONLY</u> if direct	Candidate/Onicendider		mee sought	Onice Helu						
e)	xpenditure to benefit C/OH										

		EXPE	ENDITURE CATEGOR	IES FOR BOX 10(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Awards Legal Servi	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ow to complete this form.	Trai Trav Trav	vel in District vel Out of District	ment & Related E		
				ow to complete this form.				····	
	otal pages Schedule F4:						thics Commiss	ion Filers)	
	Sch: 11/28 Rpt:	-	E. Pena (The Honor	,		00021186			
	CREDIT CARD SSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A CARD		\$	10,033.5	0	
6 1	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issuer	Paid			
		\$294.81	10/01/2024	11/04/2024					
7	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code	
				6420 Polaris Dr. #4	4				
		Quarter Mile Graph	ics						
				Laredo, TX 78041					
8 I	PURPOSE OF	(a) Category		(b) Description					
I	EXPENDITURE	(See Categories listed at the top	of this schedule)	printing for campai	ign				
	X Political	Printing Expense							
	Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	T. Check if J	Austin, TX, o	officeholder living	expense		
9 (Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held			
	penditure to benefit C/OH								
I	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issuer	Paid			
		\$9.68	08/09/2024	09/12/2024					
I	PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code	
		U.S. Postal Service	- Del Mar	2395 E. Del Mar B	lvd.				
				Laredo, TX 78045					
	PURPOSE OF	(a) Category		(b) Description					
1		(See Categories listed at the top Office Overhead/Rent	,	postage for campa	aign				
	X Political								
	Non-Political		of Texas. Complete Schedule		Austin, TX, o	officeholder living	expense		
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held			
	benditure to benefit C/OH		(h) Data of Charge	(a) Data(a) Cradit Ca		Daid			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca 10/07/2024	ra Issuer	Pald			
		\$57.32	08/31/2024	10/01/2024					
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code	
		(a) r ayee hame		7122 Bob Bullock	l oon #2		otato,		
		Taco Palenque		TILL BOD BUILDON	2000 // 2	•			
				Laredo, TX 78041					
	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE	(See Categories listed at the top		food for officeholde	er meetir	ng with sup	oorters		
	X Political	Food/Beverage Exper	nse						
	Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	T. Check if A	Austin. TX. n	officeholder living	expense		
(Complete ONLY if direct	Candidate/Officeholder	•	ffice sought		Office held			
	penditure to benefit C/OH								

Forms provided by Texas Ethics Commission

		EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve Gift/Awards I Committee Legal Serv	ense rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Transportation Equ Travel in District Travel Out of Distr	uipment & Related I		
_					la	(=	·	
1	Total pages Schedule F4:					(Ethics Commiss	sion Filers)	
	Sch: 12/28 Rpt:	Raymond, Richard	E. Pena (The Hono	rable)	00021186	00021186		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A (CARD	\$	10,033.5	50	
6	PAYMENT	(a) Amount Charged \$135.79	(b) Date of Charge 09/07/2024	(c) Date(s) Credit Ca 10/07/2024	rd Issuer Paid			
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Taco Palenque		7122 Bob Bullock	Loop #20			
				Laredo, TX 78041				
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Exper	,	food for officeholde	er meeting with su	pporters		
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if <i>i</i>	Austin, TX, officeholder livir	ng expense		
9	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office hel	d		
expenditure to benefit C/OH								
PAYMENT (a) Amount Charged (b) Date of Charge				(c) Date(s) Credit Ca	rd Issuer Paid			
				10/07/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Taco Palenque		7122 Bob Bullock Laredo, TX 78041	Loop #20			
	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expen		food for officeholde	er meeting with su	pporters		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule		Austin, TX, officeholder livir			
	Complete ONLY if direct	Candidate/Officeholder		Diffice sought	Office hel			
e	xpenditure to benefit C/OH			line cought		~		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issuer Paid			
		\$1,200.00	09/28/2024	11/04/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Promedia Designs,	LLC	208 Lipan Dr				
				Laredo, TX 78045				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	X Political	Office Overhead/Rent	,	mailing list for cam	ipaign			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if A	Austin, TX, officeholder livir	ng expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	office sought	Office hel	d		
		1						

		EXPE	ENDITURE CATEGOR	RIES FOR BOX	10(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/F Office Overhead/R Polling Expense Printing Expense Salaries/Wages/Co	ental Expense ontract Labor	Solicitation/Fundraisin Transportation Equipn Travel in District Travel Out of District OTHER (enter a categ	nent & Related E	
_				now to complete				· · · = = · · · · · · · · · · · · · · ·
1	Total pages Schedule F4:					3 Filer ID (Et	hics Commiss	sion Filers)
	Sch: 13/28 Rpt:	Raymond, Richard	E. Pena (The Hono	rable)		00021186		
4	CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZ	ED	10 000 5	
	ISSUER	see pi	revious		NDITURES GED TO A CRE		10,033.5	50
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
		\$500.08	09/13/2024		,			
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				1701 Re		, ,	,	
		UT Athletics		1101110				
				Auctin T	X 78701			
8	PURPOSE OF	(a) Category		(b) Descri				
ð	EXPENDITURE	(See Categories listed at the top	of this schedule)		ickets for sup	nortors		
		Gift/Awards/Memorial	s Expense			ponters		
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	Check if Austin	n, TX, officeholder living e	xpense	
9	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought		Office held		
e	penditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Is	suer Paid		
		\$250.00	07/08/2024	08/08/20)24			
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				603 Flor	es Ave #4			
		Laredo Sportswear						
				Laredo,	TX 78040			
	PURPOSE OF	(a) Category		(b) Descri				
	EXPENDITURE	(See Categories listed at the top		donation	to police cha	rity football game	e trophy ex	pense
	X Political	Contributions/Donatio		20				
	Non-Political					n, TX, officeholder living e		
	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	Office sought		Office held	xpense	
	complete <u>ONLY</u> If direct kpenditure to benefit C/OH	Candidate/Oniceriolder	name e	Shiele Sought		Office field		
0/		(a) Amount Charged	(b) Date of Charge	(c) Data(c) Credit Card Is	suor Paid		
		.,		08/08/20				
		\$52.35	07/12/2024					
	54/75							
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		OnStar		PO Box	1027			
		onotar						
					MI 48090			
	PURPOSE OF	(a) Category	of this color - (-)->	(b) Descri				
	EXPENDITURE	(See Categories listed at the top Transportation Equipr	,	OnStar s	safety services	s for campaign ve	ehicles for	six months
	X Political	Expense						
	Non-Political		of Texas. Complete Schedule	т.	Check if Austin	n, TX, officeholder living e	xpense	
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought		Office held		
e	kpenditure to benefit C/OH							

Forms provided by Texas Ethics Commission

		EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	erage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Trar Trav Trav	citation/Fundraising nsportation Equipm vel in District vel Out of District HER (enter a catego	ent & Related	·
			ruction Guide explains h	now to complete this form.				
1	Total pages Schedule F4:				;	3 Filer ID (Eth	iics Commis	sion Filers)
	Sch: 14/28 Rpt:	-	E. Pena (The Honor	able)		00021186		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CI CARD		\$	10,033.5	50
6	PAYMENT	(a) Amount Charged \$52.35	(b) Date of Charge 10/10/2024	(c) Date(s) Credit Card 11/04/2024	l Issuer	Paid		
7	PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code
		0.00		PO Box 1027				
		OnStar						
				Warren, MI 48090				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
		Transportation Equip	,	OnStar safety servic	ces for	campaign ve	nicles for	six months
	X Political	Expense						
	Non-Political		of Texas. Complete Schedule		ustin, TX, o	officeholder living ex	pense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held		
		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	lssuer	Paid		
		\$85.44	09/12/2024	10/07/2024				
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
		AT&T		PO Box 537104				
				Atlanta, GA 30353				
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description				
	EXPENDITURE	Office Overhead/Rent	,	officeholder internet	in Aus	tin		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. X Check if Au	ustin, TX, o	fficeholder living ex	pense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card		Paid		
		\$85.44	11/12/2024	11/04/2024 12/17/2	2024			
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
		AT&T		PO Box 537104				
L				Atlanta, GA 30353				
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
		Office Overhead/Rent	,	officeholder internet	in Aus	tin		
	X Political		-					
	Non-Political		of Texas. Complete Schedule		ustin, TX, o	fficeholder living ex	pense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held		

		EXPE	ENDITURE CATEGOR	RIES	FOR BOX 10(a)			
	Advertising Expense Accounting/Banking	Event Expe Fees	ense			Solicitation/Fundraisin Fransportation Equipr		Exnense
	Consulting Expense Contributions/ Donations Made By	Food/Beve	rage Expense s/Memorials Expense	Polli	ng Expense	Fravel in District		
	Candidate/Officeholder/Politica					OTHER (enter a cate	pory not listed at	oove)
		The Instr	ruction Guide explains	how t	o complete this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)
	Sch: 15/28 Rpt:	Raymond, Richard	E. Pena (The Hono	orable	e)	00021186		
4	CREDIT CARD	Name of finar	ncial institution		5 TOTAL OF UNITEMIZED		40.000	- 0
	ISSUER	see pr	revious		EXPENDITURES CHARGED TO A CREDI	T \$	10,033.5	50
					CARD			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		(c) Date(s) Credit Card Issue	er Paid		
		\$52.35	12/09/2024					
7	PAYEE	(a) Payee name			(b) Payee address;	City,	State,	Zip Code
					PO Box 1027			
		OnStar						
					Warren, MI 48090			
8	PURPOSE OF	(a) Category			(b) Description			
	EXPENDITURE	(See Categories listed at the top Transportation Equipr			OnStar safety services for	or campaign ve	ehicles for	six months
	X Political	Expense	neni Anu Reialeu					
	Non-Political		of Texas. Complete Schedule	е Т.	Check if Austin, T	K, officeholder living e	xpense	
9	Complete ONLY if direct	Candidate/Officeholder	name C	Office	sought	Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge		(c) Date(s) Credit Card Issue	er Paid		
		\$84.60	07/13/2024		08/08/2024			
	PAYEE	(a) Payee name	1		(b) Payee address;	City,	State,	Zip Code
					PO Box 537104			
		AT&T						
					Atlanta, GA 30353			
	PURPOSE OF	(a) Category			(b) Description			
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,		officeholder internet in A	ustin		
	X Political	Onice Overneau/Nem						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	X Check if Austin, T	K, officeholder living e	xpense	
	Complete ONLY if direct	Candidate/Officeholder	name C	Office	sought	Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge		(c) Date(s) Credit Card Issue	er Paid		
		\$85.02	08/12/2024		09/12/2024			
	PAYEE	(a) Payee name	1		(b) Payee address;	City,	State,	Zip Code
					PO Box 537104			
		AT&T						
					Atlanta, GA 30353			
	PURPOSE OF	(a) Category			(b) Description			
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent			officeholder internet in A	ustin		
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	X Check if Austin, T	K, officeholder living e	xpense	
	Complete ONLY if direct	Candidate/Officeholder	name C	Office	sought	Office held		
e	xpenditure to benefit C/OH							
_								

Forms provided by Texas Ethics Commission

		EXPE	ENDITURE CATEGOR	IES FOR BOX	10(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/R Office Overhead/R Polling Expense Printing Expense Salaries/Wages/Co	ental Expense 1 1 1	Solicitation/Fundraising Expense ransportation Equipment & Related ravel in District ravel Out of District DTHER (enter a category not listed	
		The Inst	ruction Guide explains h	ow to complete	this form.		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commis	sion Filers)
	Sch: 16/28 Rpt:	Raymond, Richard	E. Pena (The Honor	able)		00021186	
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$ 10,033.	50
6	PAYMENT	(a) Amount Charged \$52.35	(b) Date of Charge 08/11/2024	(c) Date(s 09/12/20) Credit Card Issue)24	er Paid	
7	PAYEE	(a) Payee name		(b) Payee	address;	City, State,	Zip Code
		OnStar		PO Box	-		
		() -			MI 48090		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Transportation Equipr Expense	,	(b) Descri OnStar s	•	or campaign vehicles for	six months
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin, T	, officeholder living expense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held	
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	er Paid	
		\$52.35	09/10/2024	10/07/20)24		
	PAYEE	(a) Payee name OnStar		(b) Payee PO Box Warren.		City, State,	Zip Code
	PURPOSE OF	(a) Category		(b) Descri			
	EXPENDITURE	(See Categories listed at the top Transportation Equipr Expense	,	OnStar s	afety services fo	or campaign vehicles for	six months
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	Т.	Check if Austin, T>	K, officeholder living expense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held	
	PAYMENT	(a) Amount Charged \$52.35	(b) Date of Charge 11/09/2024	(c) Date(s 12/17/20) Credit Card Issue)24	er Paid	
	PAYEE	(a) Payee name OnStar		(b) Payee PO Box Warren,		City, State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Transportation Equips Expense	ment And Related			or campaign vehicles for	six months
	Non-Political		of Texas. Complete Schedule		Check if Austin, T>	k, officeholder living expense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held	

Acco Cons Cont	ertising Expense unting/Banking sulting Expense ributions/ Donations Made By andidate/Officeholder/Politica	Event Exp Fees Food/Bev / - Gift/Awar I Committee Legal Ser	erage Expense ds/Memorials Expense vices	Loan Repayment/Reimburse Office Overhead/Rental Expe Polling Expense Printing Expense Salaries/Wages/Contract Lat	ense Tra Tra Tra Dor OT	Dicitation/Fundraisi ansportation Equip avel in District avel Out of District THER (enter a cate	ment & Related I	·
			truction Guide explains	how to complete this for	m.			
1 Total	pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	sion Filers)
Sch:	17/28 Rpt:	Raymond, Richard	E. Pena (The Hono	rable)		00021186		
4 CRE	DIT CARD	Name of fina	ancial institution	5 TOTAL OF UN				
ISSU			previous	EXPENDITUR CHARGED TO CARD	ES	\$	10,033.5	50
6 PAY	MENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issue	r Paid		
		\$331.95	08/25/2024	11/04/2024				
7 PAY	FF	(a) Payee name		(b) Payee addres	c.	City,	State,	Zip Code
		(d) Fayee hame		()	-		State,	
		American Airlines		P.O. Box 61963	12 MD 240	IO CPII		
		American Amires						
				DFW Airport, T	X 76021			
8 PUR	POSE OF	(a) Category		(b) Description				
	ENDITURE	(See Categories listed at the top	o of this schedule)	airfare to speak	at Tarrant	t County Den	nocrats fun	draiser
		Travel Out of District			(at runan			uluisei
Х	Political							
	Non-Political	(C) Check if travel outside	e of Texas. Complete Schedule	e T. Che	ck if Austin, TX,	officeholder living	expense	
9 Com	plete ONLY if direct	Candidate/Officeholde	r name (Dffice sought		Office held		
expend	iture to benefit C/OH							
PAY	MENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issue	r Paid		
		\$295.68	12/31/2024					
PAY	EE	(a) Payee name		(b) Payee addres	S:	City,	State,	Zip Code
		(7903 San Dario		,	,	F
		Hampton Inn - Lar	edo	7903 San Dan	Ave			
				Laredo, TX 780)45			
PUR	POSE OF	(a) Category		(b) Description				
EXP	ENDITURE	(See Categories listed at the top	o of this schedule)	lodging for staf	f to attend	political even	t	
	Political	Travel In District						
	Non-Political	(C) Check if travel outside	e of Texas. Complete Schedule	e T. 🗌 Che	ck if Austin, TX,	officeholder living	expense	
Com	plete <u>ONLY</u> if direct	Candidate/Officeholde	r name 🛛 🔾	Office sought		Office held		
expend	iture to benefit C/OH							
-	MENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issue	r Paid		
				10/07/2024				
		\$91.38	09/17/2024					
PAY	EE	(a) Payee name		(b) Payee addres	S;	City,	State,	Zip Code
				2501 E Del Ma	r Blvd			
		Valero - Del Mar						
				Laredo, TX 780	/4⊥			
	POSE OF	(a) Category		(b) Description				
EXP	ENDITURE	(See Categories listed at the top		gasoline for ca	mpaign veł	hicle		
X	Political	Transportation Equip	ment And Related					
		Expense	<u>.</u>					
	Non-Political		e of Texas. Complete Schedule		ck if Austin, TX,	officeholder living	expense	
Com	plete <u>ONLY</u> if direct	Candidate/Officeholde	r name C	Office sought		Office held		
expend	iture to benefit C/OH							

	EXP	ENDITURE CATEGOR	RIES FOR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic	By - Gift/Award al Committee Legal Serv	erage Expense Is/Memorials Expense vices	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	ent & Related E	
		ruction Guide explains h	now to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	ion Filers)
Sch: 18/28 Rpt:	Raymond, Richard	E. Pena (The Honor	rable)	00021186		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$	10,033.5	0
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$71.63	12/09/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	Valero - Del Mar		2501 E Del Mar Blvd			
			Laredo, TX 78041			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Transportation Equips Expense	,	(b) Description gasoline for campaign ve	ehicle		
Non-Political		of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living ex	pense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$87.44	07/07/2024	08/08/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Spectrum		2438 Monarch Dr Suite A Laredo, TX 78045	A-500 Suite A		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		internet/wifi for campaigr	1		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$90.46	08/07/2024	09/12/2024			
PAYEE	(a) Payee name Spectrum	·	(b) Payee address; 2438 Monarch Dr Suite /	City, A-500 Suite A	State,	Zip Code
			Laredo, TX 78045			
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description			
EXPENDITURE	Office Overhead/Rent	,	internet/wifi for campaigr	1		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living ex	pense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name C	office sought	Office held		

Forms provided by Texas Ethics Commission

	EXPE	NDITURE CATEGOR	RIES FOR BOX 10)(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Awards Legal Servi	rage Expense /Memorials Expense ces	Loan Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr	al Expense Tra Tra Tra act Labor OT	licitation/Fundraising ansportation Equipme avel in District avel Out of District 'HER (enter a catego	ent & Related E	
		uction Guide explains I	now to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 19/28 Rpt:	Raymond, Richard I	E. Pena (The Hono	rable)		00021186		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	10,033.5	50
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
	\$90.46	09/07/2024	10/07/202	4			
7 PAYEE	(a) Payee name		(b) Payee ad	ldress;	City,	State,	Zip Code
	Spectrum		2438 Mona	arch Dr Suite A-	500 Suite A		
			Laredo, TX				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Descripti				
	Office Overhead/Rent	•	internet/wi	ii for campaign			
X Political							
Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	office sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (11/04/202	Credit Card Issuer 4	Paid		
	\$90.46	10/07/2024	11/0 1/202				
PAYEE	(a) Payee name		(b) Payee ad		City,	State,	Zip Code
	Spectrum		2438 Mona	arch Dr Suite A-	500 Suite A		
			Laredo, TX	(78045			
PURPOSE OF	(a) Category		(b) Descripti				
	(See Categories listed at the top of Office Overhead/Rent	,	internet/wit	ii for campaign			
X Political		•					
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	Jense	
Complete ONLY if direct	Candidate/Officeholder	name C	office sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 0 12/17/202	Credit Card Issuer	Paid		
	\$90.46	11/07/2024	12/11/202	+			
PAYEE	(a) Payee name		(b) Payee a	ldress;	City,	State,	Zip Code
	Spectrum		2438 Mona	arch Dr Suite A-	500 Suite A		
	Spectrum						
			Laredo, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Descripti				
	Office Overhead/Rent		mernevwi	fi for campaign			
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	т. [Check if Austin, TX,	officeholder living exp	jense	
Complete ONLY if direct	Candidate/Officeholder	name C	office sought		Office held		
expenditure to benefit C/OH							

Forms provided by Texas Ethics Commission

	EXPE	NDITURE CATEGOR	IES FOR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Bever - Gift/Awards I Committee Legal Servi	nse rage Expense /Memorials Expense ces	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ow to complete this form.	Solicitation/Fundraisi Transportation Equip Travel in District Travel Out of District OTHER (enter a cate	ment & Related I	
						· · · = = · · · · · · · · · · · · · · ·
1 Total pages Schedule F4:		/		3 Filer ID (E	thics Commiss	sion Filers)
Sch: 20/28 Rpt:	Raymond, Richard	E. Pena (The Honor	able)	00021186		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A C CARD	\$	10,033.5	50
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer Paid		
	\$90.46	12/07/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Spectrum		2438 Monarch Dr S	Suite A-500 Suite A		
			Laredo, TX 78045			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		internet/wifi for cam	Ipaign		
X Political	Office Overhead/Rent	al Expense				
Non-Political		(= 0 · 0 · ·	- D aulin			
	(c) Check if travel outside of Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	ustin, TX, officeholder living Office held	expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Canuluale/Onicenoluer	name Oi	nice sought	Office field		
	(a) Amount Charged	(b) Data of Charge	(a) Data(a) Cradit Carr	d Joouar Daid		
PATMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	u issuel Palu		
	\$231.96	12/10/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Chaotrum Austin		1000 E 41st St Suit	e 920		
	Spectrum - Austin					
			Austin, TX 78751			
PURPOSE OF	(a) Category	of this ashadula)	(b) Description			
	(See Categories listed at the top Office Overhead/Rent		officeholder cable ir	n Austin		
X Political						
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	T. Check if A	ustin, TX, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer Paid		
	\$40.00	07/01/2024	08/08/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			12719 Burnet Rd			
	TxTag					
			Austin, TX 78727			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Transportation Equipr		toll charge for office	eholder travel		
X Political	Expense	HEAL AND RELACED				
Non-Political		of Texas. Complete Schedule	T. Check if Au	ustin, TX, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held		

		EXPE	ENDITURE CATEGOR	IES FOR BOX 10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve Gift/Award	ense rage Expense s/Memorials Expense	Loan Repayment/Reimbursem Office Overhead/Rental Expen Polling Expense Printing Expense Salaries/Wages/Contract Labo	se Tra Tra Tra	licitation/Fundraising ansportation Equipme avel in District avel Out of District 'HER (enter a catego	nt & Related I	
		The Inst	ruction Guide explains h	ow to complete this form				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 21/28 Rpt:	Raymond, Richard	E. Pena (The Honor	able)		00021186		
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNI		•	10 000 5	-0
	ISSUER	see pi	revious	EXPENDITURE CHARGED TO A CARD		\$	10,033.5	50
6	PAYMENT	(a) Amount Charged \$40.00	(b) Date of Charge 07/28/2024	(c) Date(s) Credit (09/12/2024	Card Issuer	Paid		
7	PAYEE	(a) Payee name	•	(b) Payee address		City,	State,	Zip Code
		TxTag		12719 Burnet Ro	ł			
				Austin, TX 7872	7			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	°	1		
		Transportation Equipr	,	toll charge for of	ricenoider	travel		
	X Political	Expense						
_	Non-Political		of Texas. Complete Schedule		if Austin, TX, o	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit (Card Issuer	Paid		
		\$40.00	08/31/2024	10/07/2024				
	PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code
		TxTag		12719 Burnet Ro	k			
		TATAY		Austin, TX 7872	7			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
		Transportation Equipr Expense	,	toll charge for of	liceholder	travel		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check	if Austin, TX, o	officeholder living exp	ense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit (Card Issuer	Paid		
		\$40.00	09/13/2024	10/07/2024				
	PAYEE	(a) Payee name	I	(b) Payee address;		City,	State,	Zip Code
		TyTog		12719 Burnet Ro	k			
		TxTag			-			
		(a) Catagon:		Austin, TX 7872	1			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description toll charge for of	ficeholder	travel		
	X Political	Transportation Equipr	ment And Related					
	Non-Political	Expense (c) Check if travel outside	of Texas. Complete Schedule			officeholder living exp	onso	
-	Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought	. II AUSUII, TX, (Office held	121126	
e	xpenditure to benefit C/OH			g		2		

		EXPI	ENDITURE CATEGOR	RIES FOR BOX	10(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense Is/Memorials Expense vices	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Tr Tr Tr ntract Labor O	olicitation/Fundraising ransportation Equipme ravel in District ravel Out of District THER (enter a categor	nt & Related I	
			ruction Guide explains I	now to complete	this form.	i		
1	Total pages Schedule F4:					3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 22/28 Rpt:	-	E. Pena (The Hono			00021186	00021186	
4	CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED	\$	10,033.5	50
	ISSOLA	see p	revious		GED TO A CREDIT	T	10,00010	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
		\$40.00	09/24/2024	11/04/20	24			
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		TyTag		12719 Bi	urnet Rd			
		TxTag						
				Austin, T				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion le for officeholde	r travol		
	X Political	Transportation Equip	ment And Related	ton charg		i tiavei		
		Expense						
L	Non-Political Complete ONLY if direct	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Office sought	Check if Austin, TX,	, officeholder living exp Office held	ense	
	xpenditure to benefit C/OH	Candidate/Onicenoider	name C	mce sought		Office field		
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$40.00	09/29/2024	11/04/20	24			
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		TxTag		12719 Bi	urnet Rd			
		TXTay						
_		(a) Catagony		Austin, T				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	e for officeholde	r travel		
	X Political	Transportation Equip Expense	ment And Related			i ilavei		
	Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	, officeholder living exp	ense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder		office sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
		\$40.00	10/13/2024	11/04/20	24			
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		TyTee		12719 Bi	urnet Rd			
		TxTag						
				Austin, T				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip		r travel		
		Transportation Equip	,	ton charg	e for officeholde	i ilavel		
	X Political	Expense						
_	Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	ense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	office sought		Office held		

Forms provided by Texas Ethics Commission

		EXPE	ENDITURE CATEGOR	IES FOR BOX 10	(a)			
	Advertising Expense Accounting/Banking	Event Expe Fees	ense	Loan Repayment/Reim Office Overhead/Renta		licitation/Fundraisir ansportation Equipr		Expense
	Consulting Expense Contributions/ Donations Made By	Food/Beve	rage Expense s/Memorials Expense	Polling Expense Printing Expense	Tra	avel in District avel Out of District		Exponeo
	Candidate/Officeholder/Politica	l Committee Legal Serv		Salaries/Wages/Contra		THER (enter a cate	gory not listed al	oove)
		The Inst	ruction Guide explains h	now to complete this	s form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)
	Sch: 23/28 Rpt:	Raymond, Richard	E. Pena (The Honor	able)		00021186		
4	CREDIT CARD	Name of final	ncial institution				10.000 5	-0
	ISSUER	see p	revious	EXPENDI	D TO A CREDIT	\$	10,033.5	50
				CARD				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	⁻ Paid		
		\$17.95	08/31/2024	10/07/2024	Ļ			
7	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
				1701 Red F	River			
		University of Texas						
				Austin, TX	78701			
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	food for offi	ceholder meeti	ing with supp	orters	
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т. Г	Check if Austin, TX,	officeholder living e	expense	
9	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	•	Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	^r Paid		
		\$40.73	10/19/2024	11/04/2024	ŀ			
	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
				1701 Red F	River			
		University of Texas						
				Austin, TX				
	PURPOSE OF	(a) Category (See Categories listed at the top		(b) Description				
		Food/Beverage Expe	,	food for offi	ceholder meeti	ing with supp	orters	
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living e	expense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	^r Paid		
		\$5,000.00	10/03/2024					
	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
		Kristin Carranza for	Tovas	P.O. Box 8	31436			
			TEXAS					
					o, TX 78283			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	_	Contributions/Donatio	ns Made By	contribution	I			
	X Political	Candidate/Officehold	er/Political Committe	e				
	Non-Political		of Texas. Complete Schedule		Check if Austin, TX,		expense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH							

		EXPE	ENDITURE CATEGOR	IES FOR BOX	10(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	rage Expense s/Memorials Expense	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Tr Tr Tr	olicitation/Fundraising E ansportation Equipmer avel in District avel Out of District THER (enter a category	t & Related I	
		The Inst	ruction Guide explains h	ow to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	ion Filers)
	Sch: 24/28 Rpt:	Raymond, Richard	E. Pena (The Honor	able)		00021186		
4	CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED		10.000 5	
	ISSUER	see p	revious		IDITURES GED TO A CREDIT	\$	10,033.5	οU
6	PAYMENT	(a) Amount Charged \$73.62	(b) Date of Charge 08/16/2024	(c) Date(s) 09/12/20) Credit Card Issue 124	r Paid		
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Evtra Casas Stores	10	6412 Bu	rnet Rd			
		Extra Space Storag	je					
_				Austin, T				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	otion Id lock for storage	e of officeholde	itoms	
	X Political	Office Overhead/Ren	tal Expense	50763 0	in lock for storage		items	
	Non-Political		of Towns, Operations, Ophersky and	-		- ff h - l - l - l - i - i		
<u>م</u>	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought		officeholder living expe	ense	
	xpenditure to benefit C/OH			inco cougin		enice noid		
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$302.99	10/17/2024					
	PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code
		Hobby Lobby		2450 Mo	narch Dr #101			
					TX 78045			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	otion or Texas flags			
	X Political	Gift/Awards/Memorial	s Expense	indifies it	n rexus hugs			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin. TX.	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	•	ffice sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	r Paid		
		\$59.60	07/09/2024	08/08/20	024			
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Valero - Del Mar		2501 E D	Del Mar Blvd			
				Lorodo -	TV 70041			
⊢	PURPOSE OF	(a) Category		(b) Descri	TX 78041			
	EXPENDITURE	(See Categories listed at the top	,		for campaign vel	nicle		
	X Political	Transportation Equip	ment And Related		1			
	Non-Political		of Texas. Complete Schedule	<u> </u>	Check if Austin. TX	officeholder living expe	ense	
-	Complete ONLY if direct	Candidate/Officeholder		ffice sought		Office held		
e	xpenditure to benefit C/OH							

		EXP	ENDITURE CATEGOR	RIES FOR BOX 10(a)				
	Advertising Expense Accounting/Banking	Event Exp Fees	ense	Loan Repayment/Reimbursement Office Overhead/Rental Expense		itation/Fundraising		Evpopeo
	Consulting Expense	Food/Beve	rage Expense	Polling Expense	Trave	el in District	ini a rielaleu i	Lypense
	Contributions/ Donations Made By Candidate/Officeholder/Politica		s/Memorials Expense ices	Printing Expense Salaries/Wages/Contract Labor		el Out of District ER (enter a catego	ry not listed at	oove)
		The Inst	ruction Guide explains h	now to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3	B Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 25/28 Rpt:	Raymond, Richard	E. Pena (The Honor	able)	C	00021186		
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEM				
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CF		\$	10,033.5	50
				CARD	REDIT			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	l Issuer F	Paid		
		\$77.96	07/23/2024	09/12/2024				
		φ/1.50	0172072024					
7	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
				2501 E Del Mar Blvo	d			
		Valero - Del Mar						
				Laredo, TX 78041				
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top	,	gasoline for campaig	gn vehio	cle		
	X Political	Transportation Equip	ment And Related					
	Non-Political		of Texas. Complete Schedule	T Check if Au	istin TX of	ficeholder living exp	nense	
9	Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	13tin, 17t, 01	Office held		
	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	l Issuer F	Paid		
		\$40.00	08/13/2024	09/12/2024				
		\$40.00	00/13/2024					
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
				12719 Burnet Rd		0.0),	otato,	p 0000
		TxTag						
				Austin, TX 78727				
	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top		toll charge for officel	holder t	ravel		
	X Political	Transportation Equip	ment And Related					
	Non-Political		of Texas. Complete Schedule	T Check if Au	istin TX of	ficeholder living exp	hense	
	Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought		Office held		
e	xpenditure to benefit C/OH			0				
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	l Issuer F	Paid		
		\$40.00	09/17/2024					
		φ40.00	03/11/2024					
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
				12719 Burnet Rd				
		TxTag						
				Austin, TX 78727				
	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top		toll charge for officel	holder t	ravel		
	X Political	Transportation Equip	ment And Related					
	Non-Political		of Texas. Complete Schedule	T. Check if Au	istin, TX of	ficeholder living exp	oense	
-	Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought	,, 01	Office held		
e	xpenditure to benefit C/OH		-					

		EXPE	ENDITURE CATEGOR	IES FOR BOX	10(a)			
	Advertising Expense Accounting/Banking	Event Expe Fees	ense	Loan Repayment/F Office Overhead/R	Reimbursement So ental Expense Tr	olicitation/Fundraising ansportation Equipme		Exnense
	Consulting Expense Contributions/ Donations Made By	Food/Beve	rage Expense s/Memorials Expense	Polling Expense Printing Expense	Tr	avel in District	in a rolatou i	Exponeo
	Candidate/Officeholder/Politica			Salaries/Wages/Co		THER (enter a catego	ry not listed al	oove)
		The Inst	ruction Guide explains h	ow to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 26/28 Rpt:	Raymond, Richard	E. Pena (The Honor	able)		00021186		
4	CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED			
	ISSUER	see pi	revious		NDITURES GED TO A CREDIT	\$	10,033.5	50
				CARD	SED TO A CREDIT			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$40.00	10/11/2024	11/04/20)24			
		Q-0.00	10/11/2024					
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
					urnet Rd			
		TxTag						
				Austin, T	X 78727			
8	PURPOSE OF	(a) Category		(b) Descri	ption			
	EXPENDITURE	(See Categories listed at the top	,	toll charg	ge for officeholde	r travel		
	X Political	Transportation Equipr Expense	Henri Anu Relateu					
	Non-Political		of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living exp	oense	
9	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	<u> </u>	Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$40.00	10/20/2024	11/04/20)24			
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		- -		12719 B	urnet Rd			
		TxTag						
					X 78727			
	PURPOSE OF	(a) Category	of this schoolule)	(b) Descri	•			
		(See Categories listed at the top Transportation Equipr	,	toll char	ge for officeholde	r travel		
	X Political	Expense						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	Т.	Check if Austin, TX,	officeholder living exp	oense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	r Paid		
		\$30.21	07/14/2024	08/08/20)24			
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				1455 Ma	arket St.			
		UberEATS, Inc.						
					ncisco, CA 94105			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	•	ing with sures	rtoro	
		Food/Beverage Exper	,	rood for	officeholder meet	ing with suppo	iters	
	X Political							
	Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	oense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH							

		EXP	ENDITURE CATEGOR	RIES FOR BOX	10(a)			
A C	dvertising Expense ccounting/Banking consulting Expense contributions/ Donations Made By Candidate/Officeholder/Politica	r - Gift/Awar	erage Expense ds/Memorials Expense	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	ental Expense T T T	olicitation/Fundraising E ransportation Equipmen ravel in District ravel Out of District 'THER (enter a category	t & Related I	
		The Ins	truction Guide explains h	now to complete	this form.			
1 To	tal pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sc	ch: 27/28 Rpt:	Raymond, Richard	E. Pena (The Honor	rable)		00021186		
	REDIT CARD SUER		ancial institution previous	EXPEN CHARC	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			50
6 P/	AYMENT	(a) Amount Charged \$103.39	(b) Date of Charge 07/15/2024	(c) Date(s	(c) Date(s) Credit Card Issuer Paid 08/08/2024			
7 P/	AYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		UberEATS, Inc.		1455 Ma	rket St.			
					ncisco, CA 94105	5		
	JRPOSE OF (PENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Descri	ption officeholder mee	ting with suppor	tore	
-	X Political	Food/Beverage Expe				ung with suppor	lers	
	Non-Political	(C) Check if travel outside	e of Texas. Complete Schedule		Check if Austin, TX	, officeholder living expe	ense	
	omplete <u>ONLY</u> if direct	Candidate/Officeholde	r name O	office sought		Office held		
	nditure to benefit C/OH	(a) Amount Charged	(b) Data of Charge	(a) Data(a)	Cradit Card Jacua	vr Doid		
P7	AYMENT	(a) Amount Charged \$483.00	(b) Date of Charge 07/12/2024	08/08/20) Credit Card Issue 124	er Paid		
P/	AYEE	(a) Payee name Narvaez Flower Sl	пор		address; n Bernardo TX 78041	City,	State,	Zip Code
PL	JRPOSE OF	(a) Category		(b) Descri				
	KPENDITURE	(See Categories listed at the top Gift/Awards/Memoria		flowers for	or constituent fur	neral		
[Non-Political	(C) Check if travel outside	e of Texas. Complete Schedule	T.	Check if Austin, TX	, officeholder living expe	ense	
	omplete <u>ONLY</u> if direct anditure to benefit C/OH	Candidate/Officeholde	r name O	office sought		Office held		
P/	AYMENT	(a) Amount Charged \$29.26	(b) Date of Charge 10/08/2024	(c) Date(s 11/04/20) Credit Card Issue 124	er Paid		
Ρ/	AYEE	(a) Payee name UberEATS, Inc.		(b) Payee 1455 Ma San Frar		City,	State,	Zip Code
E)		(a) Category (See Categories listed at the top Food/Beverage Expe	ense		officeholder mee			
	Non-Political		e of Texas. Complete Schedule		Check if Austin, TX	, officeholder living expe	ense	
	omplete <u>ONLY</u> if direct Inditure to benefit C/OH	Candidate/Officeholde	r name O	office sought		Office held		

		EXPE	NDITURE CATEGOR	RIES FOR BOX 1	.0(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/Rei Office Overhead/Ren Polling Expense Printing Expense Salaries/Wages/Cont	ital Expense Tra Tra Tra	licitation/Fundraisii ansportation Equip avel in District avel Out of District THER (enter a cate	ment & Related E	
			ruction Guide explains I	how to complete the	nis form.	i		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	ion Filers)
	Sch: 28/28 Rpt:	Raymond, Richard	E. Pena (The Hono	rable)		00021186		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$	10,033.5	60
6	PAYMENT	(a) Amount Charged \$59.55	(b) Date of Charge 08/23/2024	(c) Date(s) 09/12/202	Credit Card Issuer 24	r Paid		
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		UberEATS, Inc.		1455 Market St.				
	San Francisco, CA 9410							
8		(a) Category (See Categories listed at the top Food/Beverage Exper	•	(b) Description food for officeholder meeting with sup			oorters	
X Political								
	Non-Political		of Texas. Complete Schedule	L	Check if Austin, TX,		expense	
9 Complete ONLY if direct Candidate/Officeholder name Office sought				Office held				
e	xpenditure to benefit C/OH					B : I		
	PAYMENT	(a) Amount Charged \$59.19	(b) Date of Charge 12/08/2024	(c) Date(s)	(c) Date(s) Credit Card Issuer			
	PAYEE	(a) Payee name UberEATS, Inc.		(b) Payee a 1455 Marl San Franc		City,	State,	Zip Code
	PURPOSE OF	(a) Category		(b) Descript				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Exper	•	food for of	fficeholder meeti	ing with supp	oorters	
	Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	ет. Г	Check if Austin, TX,	officeholder living	expense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought		Office held		

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
⊨						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ow Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement erhead/Rental Expense spense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 1/6 Rpt: 132/138	2 FILER NAME Raymond, Richard E. Pena (The Honorable)		3 Filer ID (Ethics Commission Filers) 00021186		
4	Date 08/19/2024	5 Payee name Cellars at Pearl				
6	Amount (\$) \$20.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 312 Pearl Parkway, Bldg 4 San Antonio, TX 78215				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense With supporter		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
F	Date	Payee name				
	08/05/2024	City of Austin Parking				
⊢	Amount (\$)	Payee address; City; State; Zip Co	nde			
	\$10.00	1111 Rio Grande St				
	Reimbursement from political contributions intended	Austin, TX 78701				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
F	Date	Payee name				
	11/03/2024	Cruz Jr., Phillip (Mr.)				
	Amount (\$) \$300.00	Payee address; City; State; Zip Co 6704 Crowmarty Ln.	ode			
	Reimbursement from political contributions intended	Austin, TX 78754				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Jabor to move off location	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense iceholder belongings to new Austin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
F						

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
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	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Solicitation/Fundraising Expense brhead/Rental Expense Transportation Equipment & Related Expense pense Travel in District vgense Travel Out of District vages/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 2/6 Rpt: 133/138	2 FILER NAME Raymond, Richard E. Pena (The Honorable)	3 Filer ID (Ethics Commission Filers) 00021186	
4	Date 11/17/2024	5 Payee name Cruz Jr., Phillip (Mr.)		
6	Amount (\$) \$200.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 6704 Crowmarty Ln. Austin, TX 78754		
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 labor to move officeholder belongings to new Austin location	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
F	Date	Pavee name		
	11/01/2024	Gia Sanchez Memorial Fund		
	Amount (\$) \$500.00	Payee address; City; State; Zip Code		
	Reimbursement from political contributions intended			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Check if travel outside of Texas. Complete Schedule T.	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held			
	Date 10/01/2024	Payee name HEB #202		
	Amount (\$) \$60.00	Payee address; City; State; Zip Code 0 5808 Burnet Rd. 5808 Burnet Rd.		
	X Reimbursement from political contributions intended	Austin, TX 78756		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense refreshments for Capitol office	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing f	bayment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 3/6 Rpt: 134/138	2 FILER NAME Raymond, Richard E. Pena (The Honorable)	3	Filer ID (Ethics Commission Filers) 00021186
4 Date 08/24/2024	5 Payee name Infante, Juan Carlos		
6 Amount (\$) \$200.00 Reimbursement from	7 Payee address; City; State; Zip Code 5724 E Howard Ln		
X political contributions intended 8 PURPOSE	Manor, TX 78653 (a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense r items in Austin to new location
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
08/28/2024	Mario Garcia Consulting		
Amount (\$) \$158.00 Reimbursement from political contributions	Payee address;City;State; Zip Code0731 W. 19th St.		
	Mercedes, TX 78570		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held		Office held	
Date	Payee name		
09/24/2024	Mario Garcia Consulting		
Amount (\$) \$228.00	Payee address; City; State; Zip Code 731 W. 19th St.		
X Reimbursement from political contributions intended	Mercedes, TX 78570		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense spense Travel in District xpes/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 4/6 Rpt: 135/138	2 FILER NAME Raymond, Richard E. Pena (The Honorable)	3 Filer ID (Ethics Commission Filers) 00021186	
4	Date 10/14/2024	5 Payee name Mario Garcia Consulting		
6	Amount (\$) \$228.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 731 W. 19th St. Mercedes, TX 78570		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.	
9	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 11/06/2024	Payee name Mario Garcia Consulting		
	Amount (\$) \$106.00 Reimbursement from political contributions intended	Payee address; City; State; Zip Code 731 W. 19th St. Mercedes, TX 78570		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense political consulting	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held		Office sought Office held	
	Date 11/22/2024	Payee name Mario Garcia Consulting		
	Amount (\$) \$108.00	Payee address; City; State; Zip Code 0 731 W. 19th St.		
	X Reimbursement from political contributions intended	Mercedes, TX 78570		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense political consulting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E /- Gift/Awards/Memorials Expense Printing F	bayment/Reimbursement rerhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 5/6 Rpt: 136/138	2 FILER NAME Raymond, Richard E. Pena (The Honorable)	3	Filer ID (Ethics Commission Filers) 00021186
4 Date 10/02/2024	5 Payee name Monte Carlo		
6 Amount (\$) \$150.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 6619 McPherson Rd Laredo, TX 78041		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense at campaign fundraiser
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held			Office held
Date	Payee name		
08/08/2024	Olive Garden - Laredo		
Amount (\$) \$20.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5329 San Dario Laredo, TX 78041		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense or meeting with supporters
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held		Office held	
Date 07/17/2024	Payee name Quince Lakehouse		
Amount (\$) \$15.00	Payee address; City; State; Zip Code 3825 Lake Austin Blvd Ste 201		
Reimbursement from political contributions intended	Austin, TX 78703		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense ntal Expense Transportation Equipment & Related Expense Travel in District Travel Out of District tract Labor OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 6/6 Rpt: 137/138	2 FILER NAME Raymond, Richard E. Pena (The Honorable)	3 Filer ID (Ethics Commission Filers) 00021186		
4	09/30/2024	5 Payee name Specs			
6	Amount (\$) \$120.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 914 N Lamar Blvd Austin, TX 78703			
8	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Offi	ce sought Office held		
	Date 08/15/2024	/2024 Payee name Webb County Democratic Party			
	Amount (\$) \$140.00 Reimbursement from political contributions				
	PURPOSE OF EXPENDITURE	Laredo, TX 78041 Category (See Categories listed at the top of this schedule) De Contributions/Donations Made By Candidate/Officeholder/Political Committee contrib	Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Offi	ce sought Office held		

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

SCHEDULE K

	The Instruction Guide explains how to complete this form.			pages Schedule K: 1/1 Rpt: 138/138
2	FILER NAME		3 Filer I	D (Ethics Commission Filers)
	Raymond, R	ichard E. Pena (The Honorable)	0002	1186
4	Date	5 Name of person from whom amount is received	•	8 Amount (\$)
	12/31/2024	Raymond, Richard (The Honorable)		\$300.00
		 6 Address of person from whom amount is received; City; State; Zip Code 		
		Laredo, TX 78045		
		7 Purpose for which amount is received Check if	political con	tribution returned to filer
		deposit to political fund for inadvertent or incidental use of campaign vehic		
	Date	Name of person from whom amount is received		Amount (\$)
	07/18/2024	Webb County Democratic Party		\$10,000.00
	01110/2024			
		Address of person from whom amount is received; City; State; Zip Code		
		Laredo, TX 78041		
			political con	I tribution returned to filer
		refund of duplicate check		