CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Comm 00020023		2 Total pages filed: 55	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY	
OFFICEHOLDER NAME	The Honorable	Maria Luisa			Date Received	
					ELECTRONICALLY FILED	
	NICKNAME	LAST		SUFFIX	01/15/2025	
	Lulu	Flores		JUFFIA	01/13/2020	
				710.0005	S. I Have delivered by Data Destroyled	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked	
MAILING ADDRESS	P.O. Box 40969				Receipt # Amount	
Change of Address	Austin, TX 78704				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mr.	Rudy R.				
	NICKNAME	LAST		SUFFIX		
		Colmenero				
2 044541041	0777577 A D D D C C (NO D O	2011 PLEACE):			CTATE: 71D CO	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO		AP	T / SUITE #; CITY;	STATE; ZIP CO	IDE
ADDRESS	901 South Mopac Expwy.					
(Residence or Business)	Bldg. 3, Suite 410					
	Austin, TX 78746					
7 CAMPAIGN		NE NUMBER E	EXTENSION			
TREASURER PHONE	(512) 472-2464					
2 DEDODT						
8 REPORT TYPE	X January 15	30th day before	e election	Runoff	15th day after campaign treasurer	
		_		_	appointment (officeholder only)	
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	IROUGH	12/31/202	24	
						
10 ELECTION	ELECTION DATE Month Day Year		riman.	ELECTION TYPE Runoff	Other	
	11/05/2024		rimary	브	Liouiei	
		ΧG	eneral	Special		
44 055105				T	- 001	
11 OFFICE	OFFICE HELD (if any) State Representative Distr	rict 51		12 OFFICE SOUGHT State Represent		
	State Representative 2.5.	101 31		State Represent	tative District SI	
		GO T	O PAGE 2			
		• • • • • • • • • • • • • • • • • • • •	0.7.0			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 55

13 C / OH NAME	Flores, Maria Luisa(The Honorable)	14 Filer ID (I	Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	holder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
Ш	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 79,709.00		
EXPENDITURE TOTALS						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 20,801.79		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	AST DAY OF THE	\$ 119,730.10		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT						
		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.				
		The Honor	able Maria Luisa Flor	res		
		Signature o	f Candidate or Officehold	der		
AFFIX NO	TARY STAMP / SEAL ABO	DVE				
Sworn to and subs	cribed before me, by the s	aid	, this the	day		
		ertify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	JVE	3 of 55
18 FIL	ER NAM	ME	19 Filer ID	(Eth	ics Commission Filers)
Flo	ores, Ma	aria Luisa (The Honorable)	00020023		
		E SUBTOTALS			SUBTOTAL AMOUNT
NA	ME OF	SCHEDULE			3021017127111130111
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	79,359.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	350.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	20,801.79
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/30 Rpt: 4/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 09/14/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Dringing Loon	Austin, TX 78722-2410	O Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#: Albert, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringinal occu	Austin, TX 78741-3513 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See instructions)	Employer (See instructions	')		
	Date 09/24/2024	Full name of contributor out-of-state PAC (ID#:_Aleman, Steven Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$51.00
		Austin, TX 78702-1429				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Allen Boone Humphries Robinson LLP Contributor address; City; State; Zip Code Houston, TX 77027-7537)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_Allison, Dan Contributor address; City; State; Zip Code Houston, TX 77006-5737			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/30 Rpt: 5/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4		5 Full name of contributor out-of-state PAC (ID#:_Andrus, Lori 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
_		Oakland, CA 94610-1203				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_Anson, Thomas Contributor address; City; State; Zip Code West Lake Hills, TX 78746-3541			Amount of Contribution (\$)	\$51.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/17/2024	Full name of contributor out-of-state PAC (ID#:_Apodaca, Steven Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Austin, TX 78745-1442				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/17/2024	Full name of contributor out-of-state PAC (ID#:_Arguijo, Anthony Contributor address; City; State; Zip Code Austin, TX 78739-1469			Amount of Contribution (\$)	\$250.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_Arriola, Richard Contributor address; City; State; Zip Code Austin, TX 78715-2588			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/30 Rpt: 6/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 09/26/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78768-2185 pation / Job title (See Instructions)	Employer /See Instructions			
•	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions) 		
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:_ Bailey, Brooke Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78703-3909 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:_Bailey, Heather Contributor address; City; State; Zip Code Austin, TX 78703-2616			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_ Battles, Linda Contributor address; City; State; Zip Code Pflugerville, TX 78660-4786			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/18/2024	Full name of contributor out-of-state PAC (ID#:_Black, Janet Ward Contributor address; City; State; Zip Code Summerfield, NC 27358-9293)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/30 Rpt: 7/55	
2	FILER NAME Flores, Maria	Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 10/28/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701-2152				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/20/2024	Full name of contributor			Amount of Contribution (\$)	\$150.00
	Principal occu	West Palm Beach, FL 33401-6104 pation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>		
	· ····o.pa. ooda		p.o) or (000ou double)	,		
	Date 08/18/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75209-1501				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/18/2024	Full name of contributor out-of-state PAC (ID#:_Braley, Bruce Contributor address; City; State; Zip Code Denver, CO 80246-2665)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 08/17/2024	Full name of contributor out-of-state PAC (ID#:_Breen, TJ Contributor address; City; State; Zip Code Bainbridge Island, WA 98110-4905			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 5/30 Rpt: 8/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)			3	Filer ID (Ethics Commissio 00020023	n Filers)
4	Date 08/18/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00
_	Daine in all a con-	Charleston, SC 29402-0879	١,	Faralassa (Osas kastasatis as			
8	attorney	pation / Job title (See Instructions)	9	Employer (See Instructions Richardson Patrick Wes		ook & Brickman LLC	
	Date 08/19/2024	Full name of contributor				Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78722-1923 pation / Job title (See Instructions)	_	Employer (See Instructions	-, 		
	i illicipai occu	pation / Job title (See Instructions)		Employer (See instructions	')		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_Burke, Cecelia (The Honorable) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78731-2806					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_Burke, Cecelia (The Honorable) Contributor address; City; State; Zip Code Austin, TX 78731-2806)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_Butler, Jesse Contributor address; City; State; Zip Code Austin, TX 78739-1905)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 6/30 Rpt: 9/55	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Flores, Mari	a Luisa (The Honorable)			00020023	
4	Date 12/14/2024	 Full name of contributor out-of-state PAC (ID#:_ CRAFT PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$500.00
		Austin, TX 78766-7356				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/17/2024	Full name of contributor X out-of-state PAC (ID#:_CWA-COPE PAC	C00002089)		Amount of Contribution (\$)	\$250.00
		Contributor address; City; State; Zip Code				
		Washington, DC 20001-2760				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 10/17/2024	Full name of contributor X out-of-state PAC (ID#:_CWA-COPE PAC Contributor address; City; State; Zip Code	C00002089)		Amount of Contribution (\$)	\$500.00
		Washington, DC 20001-2760				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Carroll, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$102.00
		Austin, TX 78704-2757				
	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	Charter Communications Inc. Texas PAC Contributor address; City; State; Zip Code				\$500.00
		Austin, TX 78701-5007	_			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/30 Rpt: 10/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 09/24/2024	5 Full name of contributor out-of-state PAC (ID#:_ Clarke, Margot 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00
_		Austin, TX 78731-5420				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Cofer, George Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$35.00
	Principal occu	Austin, TX 78746-5507 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:_ Colmenero, Rudy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/24/2024	Full name of contributor out-of-state PAC (ID#:_ Coronado, Santiago (The Honorable) Contributor address; City; State; Zip Code Austin, TX 78731-4508)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Cortez, Ana Contributor address; City; State; Zip Code Manor, TX 78653-3769			Amount of Contribution (\$)	\$51.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/30 Rpt: 11/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 08/19/2024	5 Full name of contributor out-of-state PAC (ID#:_ Crowley Norman LLP 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$5,000.00
_	Deignaignal annu	Houston, TX 77056-2072	O Familia var (Cap In atrustia na			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Danburg, Debra (The Honorable) Contributor address; City; State; Zip Code Austin, TX 78704-4611			Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2024	Full name of contributor out-of-state PAC (ID#:_ Davis, Ben Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Albuquerque, NM 87106-2265 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Dean, Jessica Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75202-1814 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#: Denkler, Ann Contributor address; City; State; Zip Code Austin, TX 78731-4006			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/30 Rpt: 12/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 09/06/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
8	Dringing coor	Austin, TX 78741-7352 pation / Job title (See Instructions)	Employer (See Instructions			
•	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	')		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_ Downs, Patricia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78757-8153 pation / Job title (See Instructions)	Employer (See Instructions	_		
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ Eastin, Emily Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78735-6701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Erben & Yarbrough Contributor address; City; State; Zip Code Austin, TX 78701-2508			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:_ Escobar, Manuel Contributor address; City; State; Zip Code Austin, TX 78702-3931			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/30 Rpt: 13/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 08/21/2024	5 Full name of contributor out-of-state PAC (ID#:_ Fernandes, Edward 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Austin, TX 78746-4925 pation / Job title (See Instructions)	Employer (See Instructions	.)		
_	i illicipai occu	pation 7 sob title (see instructions)	5 Employer (See Instructions	')		
	Date 08/09/2024	Full name of contributor out-of-state PAC (ID#:_Flores, Lulu Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$51.00
	Dringing ago	Austin, TX 78746-5883 pation / Job title (See Instructions)	Employer (See Instructions	_		
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See instructions	')		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_Flores, Miguel Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Lakewood, CO 80228-5327				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Focused Advocacy PAC Contributor address; City; State; Zip Code Austin, TX 78746-6773			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Foley & Lardner LLP Texas Campaign Fund Contributor address; City; State; Zip Code Dallas, TX 75201-3340)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/30 Rpt: 14/55	
2	FILER NAME				Filer ID (Ethics Commission	on Filers)
	Flores, Mari	a Luisa (The Honorable)			00020023	
4	Date 08/23/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
		Bainbridge Island, WA 98110-2141				
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 (\$)	
	09/23/2024	Fonte, Rebecca Bears				\$250.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78729-1760				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/07/2024	Fonte, Rebecca Bears Contributor address; City; State; Zip Code				\$50.00
		Austin, TX 78729-1760				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Г	Amount of Contribution (\$)	
	12/07/2024	Fonte, Rebecca Bears				\$50.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78729-1760				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Г	Amount of Contribution (\$)	
	08/16/2024	Fuentes, Vanessa (The Honorable)				\$250.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78744-6444				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/30 Rpt: 15/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 09/24/2024	5 Full name of contributor out-of-state PAC (ID#:_ Gibbons, Heidi 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$51.00
•	Dringing occur	Austin, TX 78703-4517	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_Gilmore, Vanessa Diane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77019-1854 spation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Godigna Collet, Mery Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ Goldgar, Richard & Diana Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Gonzales, Alex Contributor address; City; State; Zip Code Austin, TX 78730-3410			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/30 Rpt: 16/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 09/25/2024	5 Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Raul (The Honorable) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$49.00
_	Delicalizat a second	Austin, TX 78704-0005	O Frankrica (Con Instruction			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ Green, Rudolph Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78746-4626 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:_ Gregory, Bob Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_ Gullickson, Douglas Contributor address; City; State; Zip Code Austin, TX 78701-2853			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (ID#:_ Hanko, Carol Contributor address; City; State; Zip Code Austin, TX 78701-4076			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/30 Rpt: 17/55	
2	FILER NAME	3		3	Filer ID (Ethics Commission	n Filers)
	Flores, Maria	a Luisa (The Honorable)			00020023	
4	Date 08/21/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
		Austin, TX 78701-4076				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/26/2024	Harriman, Jim				\$51.00
		Contributor address; City; State; Zip Code				
		South Glastonbury, CT 06073-3207				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/13/2024	Herzele, Charlotte				\$250.00
		Contributor address; City; State; Zip Code				
	Dringinal accu	Austin, TX 78751-4721	Employer (See Instructions	·/_		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	•)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	09/15/2024	Hexsel, Ricardo				\$100.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78704-4212				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	10/10/2024	Hillco PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701-2458				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/30 Rpt: 18/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 08/16/2024	5 Full name of contributor out-of-state PAC (ID#:_ Holder, Toni 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
_	Deignaignal annu	Lockhart, TX 78644-2789	O Faralayar (Good Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Holder, Toni Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Lockhart, TX 78644-2789 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occu	pation 7 300 title (See Instructions)	Employer (See instructions	,		
	Date 12/14/2024	Full name of contributor)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75201-2532				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Howard, Ann Contributor address; City; State; Zip Code Austin, TX 78701-1025			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:_ Humphrey, Karen Contributor address; City; State; Zip Code Sacramento, CA 95811-4150			Amount of Contribution (\$)	\$51.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/30 Rpt: 19/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 09/19/2024	5 Full name of contributor out-of-state PAC (ID#:_ Humphrey, Karen 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$51.00
		Sacramento, CA 95811-4150				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_ Husch Blackwell LLP Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Saint Louis, MO 63105-1706 pation / Job title (See Instructions)	Employer (See Instructions)		
		·				
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_ Husch Blackwell Strategies Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Jefferson City, MO 65101-3001				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#:_ Jackson Jr., Kevin M. Contributor address; City; State; Zip Code Austin, TX 78748-6415)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_ James, Katherine Contributor address; City; State; Zip Code Culver City, CA 90230-6027			Amount of Contribution (\$)	\$51.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/30 Rpt: 20/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 09/25/2024	5 Full name of contributor out-of-state PAC (ID#:_ Johnson, Cliff 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
		Palestine, TX 75802-0770				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Law Office of Antonio Wehnes Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78702-3395 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Lemmon, Andrew Contributor address; City; State; Zip Code Hahnville, LA 70057-0904			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Linebarger Goggan Blair & Sampson LLP Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_Lipscomb, Barbara Contributor address; City; State; Zip Code Austin, TX 78703-3975			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/30 Rpt: 21/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 08/17/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
	<u></u>	Jackson, WY 83001-4402	To 5 1 10 1 1 1			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	i) 		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_Lorenz, Perry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78702-3368 upation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>		
	o.pa. ooo	parent, ess are (ess mersers)		,		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Luna, Vilma Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78746-6737				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Marston, Jim Contributor address; City; State; Zip Code Austin, TX 78703-1645			Amount of Contribution (\$)	\$100.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Martinez, Rodolfo Contributor address; City; State; Zip Code Austin, TX 78758-6120)		Amount of Contribution (\$)	\$51.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/30 Rpt: 22/55	
2	FILER NAME	3		3	Filer ID (Ethics Commission	n Filers)
	Flores, Mari	a Luisa (The Honorable)			00020023	
4	Date 09/18/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
		Austin, TX 78737-1110				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor X out-of-state PAC (ID#: C	000225342		Amount of Contribution (\$)	\$500.00
		Contributor address; City; State; Zip Code				
		Richmond, VA 23219-3956				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 08/16/2024	Full name of contributor out-of-state PAC (ID#:_McIlvain, Myra Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$51.00
		Austin, TX 78759-5011				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:_ Montelongo, Irene Contributor address; City; State; Zip Code Austin, TX 78739-2041			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 09/22/2024	Full name of contributor out-of-state PAC (ID#:_ Moonesinghe, Mark Contributor address; City; State; Zip Code Austin, TX 78731-1306			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/30 Rpt: 23/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 09/04/2024	5 Full name of contributor out-of-state PAC (ID#:_ Moore, Henry 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
_	Deinainal assu	Austin, TX 78736-7517	O Frankright (Cook keets et in 19			
8	Рппсіраї осси	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:_NASW Texas PACE Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occu	Austin, TX 78701-2010 upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/03/2024	Full name of contributor x out-of-state PAC (ID#: NRG Energy PAC Contributor address; City; State; Zip Code Princeton, NJ 08540-6023	C00016683)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	ppation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/17/2024	Full name of contributor out-of-state PAC (ID#:_ Nagle, Stephen Contributor address; City; State; Zip Code Austin, TX 78703-5160			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Nelson, Elizabeth Contributor address; City; State; Zip Code Austin, TX 78703-0014)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	ipation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)		

	MONET	ARY POLITICAL CONTRIBUTION	NC	NS		SCHEDULE A	L
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 21/30 Rpt: 24/55	
2	FILER NAME Flores, Maria	Luisa (The Honorable)			3	Filer ID (Ethics Commission Filers 00020023)
4	Date 11/13/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$2,500	0.00
8	Principal occu	Austin, TX 78703-0014 pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Not Employe			Not Employed	,		
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Oncor Texas State PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000	0.00
		Dallas, TX 75202-1234					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#: Orozco, Sylvia Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$100	0.00
		Austin, TX 78703-3762					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#: PAC of the Independent Insurance Agents of T Contributor address; City; State; Zip Code Austin, TX 78768-4487	exa			Amount of Contribution (\$) \$250	0.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#: Pastrana, Raul Steven Contributor address; City; State; Zip Code Rollingwood, TX 78746-5529	-			Amount of Contribution (\$) \$250	0.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/30 Rpt: 25/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 09/09/2024	5 Full name of contributor out-of-state PAC (ID#:_ Pinnelli, Janis W 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78763-0038 spation / Job title (See Instructions)	9 Employer (See Instructions)		
_	i illicipai occu	pation 7 sob title (see instructions)	2 Employer (See Instructions	,		
	Date 10/24/2024	Full name of contributor out-of-state PAC (ID#:_Price, Luisa & Robert Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Dringinal occu	San Antonio, TX 78213-1940 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (See instructions)	Employer (See instructions	,		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Red Rock Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Austin, TX 78701-2114				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Regina Hinojosa Campaign Contributor address; City; State; Zip Code Austin, TX 78703-0002			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_Rosen, Mitchell Contributor address; City; State; Zip Code Atlanta, GA 30306-3552			Amount of Contribution (\$)	\$51.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/30 Rpt: 26/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4		5 Full name of contributor out-of-state PAC (ID#:_Salazar, Elaine 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Austin, TX 78702-2021 pation / Job title (See Instructions)	9 Employer (See Instructions	.)		
0	Fillicipal occu	pation / 300 title (See Instructions)	5 Employer (See Instructions	')		
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_Saldana, Elsa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Sierra Madre, CA 91024-1037 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Schechter, Richard Contributor address; City; State; Zip Code Houston, TX 77005-2036)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_ Sepulveda, Eugene Contributor address; City; State; Zip Code Austin, TX 78705-2816			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/14/2024	Full name of contributor out-of-state PAC (ID#:_ Singley, Michael Contributor address; City; State; Zip Code Austin, TX 78750-8104			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/30 Rpt: 27/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	n Filers)
4	Date 09/04/2024	 5 Full name of contributor out-of-state PAC (ID#:_ Smythe, William R 6 Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
•	Dringing oggu	Boulder, CO 80302-7201	Employer /See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_Snell, Jason Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78701-1825 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Spees, Jason Contributor address; City; State; Zip Code Austin, TX 78747-3915)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Stallings, Robin Contributor address; City; State; Zip Code Austin, TX 78702-4628)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Stewart, Elizabeth Contributor address; City; State; Zip Code Austin, TX 78731-1805)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/30 Rpt: 28/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 08/13/2024	5 Full name of contributor out-of-state PAC (ID#:_Stewart, Tom 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
8	Principal occur	Austin, TX 78749-3030 pation / Job title (See Instructions)	Employer (See Instructions			
0	Fillicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_ Sullivan, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78703-3937 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions	,		
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:_ Sussman, Soll Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$51.00
		Driftwood, TX 78619-4489				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID#:_ TREPAC Contributor address; City; State; Zip Code Austin, TX 78768-2246			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Terrazas, Kevin Contributor address; City; State; Zip Code West Lake Hills, TX 78746-6585			Amount of Contribution (\$)	\$2,500.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Terrazas PLLC)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/30 Rpt: 29/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 12/11/2024	Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	<u> </u>	Austin, TX 78711-2727				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Automobile Dealers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701-2181 upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/17/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Building Branch AGC PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701-2658	Employer (See Instructions)		
		,	. , (
	Date 08/05/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Democratic Women Contributor address; City; State; Zip Code Austin, TX 78703-0024)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Land Title Association PAC Contributor address; City; State; Zip Code Austin, TX 78703-4775			Amount of Contribution (\$)	\$1,500.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 27/30 Rpt: 30/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 10/29/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas Lobby Partners LLP 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701-2132				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Sands PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$4,000.00
	Principal occu	Austin, TX 78701-4093 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Society of Architects Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78702-2754 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Teachers Association PAC Contributor address; City; State; Zip Code Austin, TX 78759-8327			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Towing & Storage Association PAC Contributor address; City; State; Zip Code Spring, TX 77386-1024			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 28/30 Rpt: 31/55	
2	2 FILER NAME Flores, Maria Luisa (The Honorable)		Filer ID (Ethics Commission 00020023	on Filers)		
4	Date 09/20/2024	 Full name of contributor	,	7	Amount of Contribution (\$)	\$2,500.00
_	5	Austin, TX 78701-1814	<u> </u>	Ĺ		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID Texas Trial Lawyers Assocation PAC Contributor address; City; State; Zip Code Austin, TX 78701-1814	#)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID VOTE PAC Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78731-3064 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/10/2024	Full name of contributor X out-of-state PAC (ID Vistra Employee PAC Contributor address; City; State; Zip Code Irving, TX 75039-2479	#: <u>C00226548</u>		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> s)		
	Date 08/16/2024	Full name of contributor out-of-state PAC (ID Waddell, Adrianne Contributor address; City; State; Zip Code Austin, TX 78745-3935	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/30 Rpt: 32/55	
2	FILER NAME Flores, Maria	a Luisa (The Honorable)		3	Filer ID (Ethics Commission 00020023	on Filers)
4	Date 08/16/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
_	Delicalis al access	Austin, TX 78741-1522	O Frankrica (Con Instruction			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:_ Walker, Nathaniel J Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78752-1416 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	T morpar occa	pation 7 oob tale (eee metadolone)	Employer (Geo metrocione	,		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Whitehurst, William Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78746-1909				
	Principal occu attorney	pation / Job title (See Instructions)	Employer (See Instructions National Trial Law)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701-2434			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#:_Yeakel, Lee & Anne Contributor address; City; State; Zip Code Austin, TX 78716-4196			Amount of Contribution (\$)	\$1,000.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 30/30 Rpt: 33/55
2	FILER NAME Flores, Maria Luisa (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020023
4	Date 10/18/2024 5 Full name of contributor out-of-state PAC (ID#:) Zachry PAC 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$500.00
0	San Antonio, TX 78265-3240 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 34/55 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Flores, Maria Luisa (The Honorable) 00020023 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 09/25/2024 Kelley, Rusty \$350.00 event venue expenses 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) government affairs Blackridge 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	•	s Expense Printing E	Expense Wages/Contract Labor	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: 1/21 Rpt: 35/55	Flores, Maria Luisa (The F	Honorable)		00020023	
4	Date	Payee name				
	12/16/2024	AT&T				
6	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$86.46	208 S Akard St				
		Dallas, TX 75202-4206				
8	PURPOSE	a) Category (See Categories listed at	the top of this schedule)	(b) Description		
	OF EXPENDITURE	Office Overhead/Rental Ex			outside of Texas. Complete Schedule T.	
				Check if Austin	, TX, officeholder living expense	
				i none servic	•	
9	Complete ONLY if direct	Candidate/Officeholder name	Office sou	<u>l</u> ught	Office held	
	expenditure to benefit C/O					
	Date	Payee name				
	11/18/2024	AT&T				
	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$86.46	208 S Akard St				
		Dallas, TX 75202-4206		_		
	PURPOSE OF	a) Category (See Categories listed at		(b) Description	outside of Toyon Complete School-T	
	EXPENDITURE	Office Overhead/Rental Ex	rpense	l =	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
				Phone servic		
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	ught	Office held	
	expenditure to benefit C/OI					
	Date	Payee name				
	10/16/2024	AT&T				
	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$86.44	208 S Akard St				
		Dallas, TX 75202-4206				
	PURPOSE OF	a) Category (See Categories listed at		(b) Description	outside of Toyon Committee College	
	EXPENDITURE	Office Overhead/Rental Ex	rpense	l —	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
				Phone servic		
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	ught	Office held	
	expenditure to benefit C/O					

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 2/21 Rpt: 36/55	Flores, Maria Luisa (The Honorable)		00020023	
4	Date	Payee name	•		
	09/16/2024	AT&T			
6	Amount (\$)	Payee address; City; State; Zip Code			
	\$86.44	208 S Akard St			
		Dallas, TX 75202-4206			
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Onice Overneda/Nerital Expense		side of Texas. Com (, officeholder living	
		Phone serv		k, officeriolder living	rexpense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O				
	Date	Payee name			
	08/16/2024	AT&T			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$86.44	208 S Akard St			
		Dallas, TX 75202-4206			
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense		side of Texas. Com	
		Check if Aus Phone serv		K, officeholder living	expense
		Thore serv	icc		
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O				
	Date	Payee name			
	07/16/2024	AT&T			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$86.41	208 S Akard St			
		Dallas, TX 75202-4206			
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE		el outs	side of Texas. Com	plete Schedule T.
	EXPENDITURE			(, officeholder living	expense
		Phone serv	rice		
	Complete ONII V if alias -t	Condidate/Officeholder name		Office he	old.
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought		Office he	eiu

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/21 Rpt: 37/55	Flores, Maria Luisa (The Honorable) 00020023
4 Date	5 Payee name
08/11/2024	ActBlue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2.02	PO Box 441146
	West Somerville, MA 02144-0031
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	credit card processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experience to serious eye	
Date	Payee name
08/18/2024	ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$298.40	PO Box 441146
·	
	West Somerville, MA 02144-0031
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	credit card processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
experience to benefit eye	
Date	Payee name
08/25/2024	ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$35.57	PO Box 441146
	West Somerville, MA 02144-0031
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	credit card processing fees
Complete ONLY if allow	Condidate/Officeholder name
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/21 Rpt: 38/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	09/01/2024	ActBlue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$142.69	PO Box 441146
		West Somerville, MA 02144-0031
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		credit card processing fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/Oi	1
	Date	Payee name
	09/08/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$73.08	PO Box 441146
	Ψ10.00	1 0 DOX 112210
		West Somerville, MA 02144-0031
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		credit card processing fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/15/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$77.03	PO Box 441146
	Ψ11.00	1 0 80% 441140
		Most Comonillo MA 02144 0021
		West Somerville, MA 02144-0031
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense credit card processing fees
		Great Cara processing rees
_	Computate ONU V if alice	Condidate/Officeholder name Office sought
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	- parameter solition of or	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	•		/ages	of Contract Labor OTHER (enter a category not listed above)				ove)	
				The Instruction	Guide explains	how to co	mple	ete this form.					
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)	
	Sch: 5/21 Rpt: 39/55		Flores, Mari	a Luisa (The	Honorable)					00020023			
4	Date	5	Payee name										
	09/22/2024		ActBlue										
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de						
	\$75.11		PO Box 441			•							
			West Some	rville, MA 021	14-0031								
8	PURPOSE	(a)	<u> </u>			hadula)	(b)	Description					
	OF	``	Fees	e Categories listed a	t the top of this sci	nedule)	(,		outsi	de of Texas. Con	plete Schedule T.		
	EXPENDITURE		1 003					=		K, officeholder living expense			
								credit card pr	осе	essing fees			
9	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld		
	expenditure to benefit C/OI	H											
	Date		Payee name										
	09/29/2024		ActBlue										
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de						
	\$116.82		PO Box 441	146									
			West Some	rville, MA 021	14-0031								
	PURPOSE	(a)	Category (Se	e Categories listed a	t the top of this sc	hedule)	(b)	Description					
	OF EXPENDITURE		Fees					Check if travel of	outsi	de of Texas. Con	plete Schedule T.		
LAFLINDITORL								ш		officeholder living	g expense		
								credit card pr	oce	essing fees			
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name		Office sou	ght			Office h	eld		
	experientare to benefit Gree	_											
	Date		Payee name										
	09/30/2024		ActBlue										
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de						
	\$5.93		PO Box 441	.146									
			West Some	rville, MA 021	14-0031								
	PURPOSE	(a)	Category (Se	e Categories listed a	t the top of this sc	hedule)	(b)	Description					
	OF EXPENDITURE		Fees								plete Schedule T.		
	LAFENDITORE									officeholder living	g expense		
								credit card pr	OCE	essing tees			
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name		Office sou	ght			Office h	eld		
	experience to beliefft C/Of												

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		I Committee L	ift/Awards/Memorials Expense egal Services		/ages	s/Contract Labor		Travel Out of Dis OTHER (enter a	trict category not listed above)
_			he Instruction Guide expla	uns now to co	mpie	-	_		
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission Filers)
	Sch: 6/21 Rpt: 40/55	Flores, Maria	Luisa (The Honorable	e)				00020023	
4	Date	5 Payee name							
	10/06/2024	ActBlue							
6	Amount (\$)	7 Payee address	; City; Si	tate; Zip Co	de				
	\$3.95	PO Box 4411	•	, ,					
	Ψ0.00	. O Box 1122							
		West Somer	ville, MA 02144-0031						
8	PURPOSE	(a) Category (See	Categories listed at the top of thi	s schedule)	(b)	Description			
	OF	Fees	categories iisted at the top of the	3 soricuaic)		_	outsi	de of Texas. Comp	olete Schedule T.
	EXPENDITURE					Check if Austin,	TX,	officeholder living	expense
						credit card pro	oce	essing fees	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Office	eholder name	Office sou	ght			Office he	ld
	Date	Payee name							
	10/20/2024	ActBlue							
	Amount (\$)	Payee address		tate; Zip Co	de				
	\$1.98	PO Box 4411	.46						
		West Somer	ville, MA 02144-0031						
	PURPOSE	(a) Category (See	Categories listed at the top of thi	s schedule)	(b)	Description			
	OF EXPENDITURE	Fees				_	outsi	de of Texas. Comp	olete Schedule T.
	EXPENDITURE					Check if Austin,	TX,	officeholder living	expense
						credit card pro	ОСЕ	essing fees	
	Complete ONLY if direct	Candidate/Office	eholder name	Office sou	ght			Office he	ld
	expenditure to benefit C/O	1							
	Date	Payee name							
	11/03/2024	ActBlue							
	Amount (\$)	Payee address	; City; Si	tate; Zip Co	do				
	\$1.39	PO Box 4411		iale, Zip Co	ue				
	Φ1.39	PO 60X 4411	.40						
		West Somer	ville, MA 02144-0031						
	PURPOSE	(a) Category (See	Categories listed at the top of thi	s schedule)	(b)	Description			
	OF EXPENDITURE	Fees						de of Texas. Comp	
	LAFENDITORE							officeholder living	expense
						credit card pro	oce	essing fees	
	Complete ONLY if direct	Candidate/Office	eholder name	Office sou	ght			Office he	ld
	expenditure to benefit C/OH								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/21 Rpt: 41/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	11/10/2024	ActBlue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.98	PO Box 441146
		West Somerville, MA 02144-0031
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		credit card processing fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	H T
_	Date	Payee name
	11/17/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.70	PO Box 441146
	, , , , , ,	
		West Somerville, MA 02144-0031
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	credit card processing fees
	!	Stock out a processing room
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	12/08/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.98	PO Box 441146
	Ψ1.90	10 80% 441140
		West Somerville, MA 02144-0031
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		credit card processing fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Tatalmana C. I. I. T.	
1 Total pages Schedule F1: Sch: 8/21 Rpt: 42/55	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Flores, Maria Luisa (The Honorable) 00020023
4 Date	5 Pavee name
	,
12/15/2024	ActBlue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$19.75	PO Box 441146
	West Somerville, MA 02144-0031
	,
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense credit card processing fees
	credit card processing rees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiditure to beliefft C/O	
Date	Payee name
07/16/2024	Austin Tejano Democrats
Amount (\$)	Payee address; City; State; Zip Code
\$225.00	123 No Address
Φ225.00	123 NO Address
	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
07/23/2024	CFC Consulting
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	PO Box 301074
	Austin, TX 78703-0018
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Compliance consulting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
Ļ		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
L	Sch: 9/21 Rpt: 43/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	08/31/2024	Cabello Moron, Juan Pablo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	114 Efrench Oaks Cir
		The Woodlands, TX 77382
Ļ		1
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Salary supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		
	Date	Payee name
	10/02/2024	Cabello Moron, Juan Pablo
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	114 Efrench Oaks Cir
		The Woodlands, TX 77382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Salary supplement
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/31/2024	Cabello Moron, Juan Pablo
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	114 Efrench Oaks Cir
		The Woodlands, TX 77382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LA LIBITORE	Check if Austin, TX, officeholder living expense
		Salary supplement
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	CAPETIGITUTE TO DETICITE C/OI	<u> </u>

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/21 Rpt: 44/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	12/01/2024	Cabello Moron, Juan Pablo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	114 Efrench Oaks Cir
		The Woodlands, TX 77382
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Salary supplement
		Salary supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	d v
	Date	Payee name
	12/30/2024	Cabello Moron, Juan Pablo
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	114 Efrench Oaks Cir
		The Woodlands, TX 77382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Salary supplement
		Salary supplement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/15/2024	Del Rio, Alicia
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7400 Ladle Ln
		Austin, TX 78749-2844
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Salary supplement
		Salary Supplement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment		The Instruction Gui	ide explains how to co	mpl	ete this form.				
1	Total pages Schedule F1:	2 FI	LER NAME			3		Filer ID	(Ethics Commission File	ers)
	Sch: 11/21 Rpt: 45/55	FI	lores, Maria Luisa (The Ho	onorable)				00020023		
4	Date	5 Pa	ayee name			I				
	08/06/2024	D	el Rio, Alicia							
6	Amount (\$)	7 Pa	ayee address; City;	State; Zip Co	de					
	\$500.00	74	400 Ladle Ln							
		Aı	ustin, TX 78749-2844							
8	PURPOSE	(a) Ca	ategory (See Categories listed at the	e ton of this schedule)	(b)	Description				
	OF EXPENDITURE		alaries/Wages/Contract La			Check if travel outs	sid	e of Texas. Com	plete Schedule T.	
	LAPENDITORE					Check if Austin, TX			expense	
						Salary supplem	ıe	nt		
_	Opening ONE V if dispert		- did - t - 10ff l - l d	O#:				O#: I	Lat	
9	Complete ONLY if direct expenditure to benefit C/Ol		ndidate/Officeholder name	Office sou	ignt			Office he	eia	
		<u> </u>								
	Date	l	ayee name							
	08/31/2024		el Rio, Alicia							
	Amount (\$)	l	ayee address; City;	State; Zip Co	de					
	\$500.00	74	400 Ladle Ln							
		Aı	ustin, TX 78749-2844							
	PURPOSE	(a) Ca	ategory (See Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE	S	alaries/Wages/Contract La	bor		Check if travel outs Check if Austin, TX				
						Salary supplem			ехрепзе	
	Complete ONLY if direct	<u>I</u> Car	ndidate/Officeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/O	Н			-					
	Date	Pź	ayee name							_
	10/02/2024	l .	el Rio, Alicia							
	Amount (\$)		ayee address; City;	State; Zip Co	ode					
	\$500.00	l	400 Ladle Ln							
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
		l Ai	ustin, TX 78749-2844							
	PURPOSE	<u> </u>			(h)	Description				
	OF		ategory (See Categories listed at the alaries/Wages/Contract La		(D)	Description Check if travel outs	sid	e of Texas. Com	olete Schedule T.	
	EXPENDITURE	3	alanes/wages/Contract La	DOI		Check if Austin, TX				
						Salary supplem	ne	nt		
	Complete ONLY if direct		ndidate/Officeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/Ol									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/21 Rpt: 46/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	10/31/2024	Del Rio, Alicia
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	7400 Ladle Ln
		Austin, TX 78749-2844
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Salary supplement
		Salary supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/02/2024	Del Rio, Alicia
H	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7400 Ladle Ln
		Austin, TX 78749-2844
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Salary supplement
		Calay supplement
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/30/2024	Del Rio, Alicia
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7400 Ladle Ln
		Austin, TX 78749-2844
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EX. ENDITORE	Check if Austin, TX, officeholder living expense
		Salary supplement
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/21 Rpt: 47/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	10/28/2024	Donna Howard Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	PO Box 5375
L		Austin, TX 78763-5375
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Avetic TV officeholder living greeners
		Candidate/Officeholder/Political Committee Contribution
		Contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	the state of the s
	Date	Payee name
	08/14/2024	Dove Springs Proud
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	PO Box 1434
		Del Valle, TX 78617-1434
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Sponsorarip
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
H	Date	Davis same
	09/26/2024	Payee name HABLA
	Amount (\$)	Payee address; City; State; Zip Code
	\$262.28	PO Box 19712
		Austin, TX 78760-9712
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/21 Rpt: 48/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	08/31/2024	Heinrich, Allison
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	2301 Ohlen Rd
		Apt 107
		Austin, TX 78757-7760
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Consulting
		Consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г	Date	Payee name
	10/02/2024	Heinrich, Allison
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2301 Ohlen Rd
		Apt 107
		Austin, TX 78757-7760
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Consulting
		Consulting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г	Date	Payee name
	10/24/2024	Heinrich, Allison
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2301 Ohlen Rd
		Apt 107
		Austin, TX 78757-7760
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Consulting
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/21 Rpt: 49/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	12/30/2024	Heinrich, Allison
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	2301 Ohlen Rd
		Apt 107
		Austin, TX 78757-7760
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Consulting
		Consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	10/02/2024	JW Marriott
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$405.36	23808 Resort Pkwy
		San Antonio, TX 78261-2018
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense lodging while attending MALC conference
		loughly while alterially while conference
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	12/26/2024	La Voz Newspapers
	Amount (\$)	Payee address; City; State; Zip Code
	\$550.00	3601 Far West Blvd
		Ste 204
		Austin, TX 78731-3052
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Advertisement
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 16/21 Rpt: 50/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	08/29/2024	La Voz Newspapers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	3601 Far West Blvd
		Ste 204
		Austin, TX 78731-3052
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Advertisement
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/30/2024	La Voz Newspapers
	Amount (\$)	Payee address; City; State; Zip Code
	\$225.00	3601 Far West Blvd
		Ste 204
		Austin, TX 78731-3052
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertisement
		Auvertisement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/24/2024	Legislative Solutions
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	PO Box 5643
		Austin, TX 78763-5643
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Email distribution for event
		Email distribution for event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 17/21 Rpt: 51/55	Flores, Maria Luisa (The Honorable) 00020023	
4	Date	5 Payee name	
	12/02/2024	NGP VAN	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$266.50	655 15th St NW	
		Ste 650	
		Washington, DC 20005-5738	
8	PURPOSE		_
0	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Database software	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_
	Date	Payee name	=
	11/04/2024	Payee name NGP VAN	
			_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$266.50	655 15th St NW	
		Ste 650	
		Washington, DC 20005-5738	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	LXI LINDITORL	Check if Austin, TX, officeholder living expense	
		Database software	
	2		_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	=
	10/02/2024	NGP VAN	
	Amount (\$)	Payee address; City; State; Zip Code	-
	\$266.50	655 15th St NW	
		Ste 650	
		Washington, DC 20005-5738	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Database software	
		Batabase software	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI		
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/21 Rpt: 52/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	09/03/2024	NGP VAN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$266.50	655 15th St NW
		Ste 650
		Washington, DC 20005-5738
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Database software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/07/2024	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$266.50	655 15th St NW
		Ste 650
		Washington, DC 20005-5738
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Database software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	07/02/2024	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$266.50	655 15th St NW
		Ste 650
		Washington, DC 20005-5738
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Database software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/21 Rpt: 53/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
L	07/15/2024	Pacheco, Michael
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	4904 Bundyhill Dr
		Austin, TX 78723-6118
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Salary supplement
		Calary supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
Г	Date	Payee name
	10/24/2024	South Austin Democrats
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 152592
		Austin, TX 78715-2592
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		- Continuation
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	12/02/2024	Texas House Democratic Caucus
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	PO Box 12453
	·	
		Austin, TX 78711-2453
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Dues
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		
	Sch: 20/21 Rpt: 54/55	Flores, Maria Luisa (The Honorable) 00020023	
4	Date	5 Payee name	
	08/05/2024	Texas Universitiy Democrats	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	2819 Rio Grande St	
		Apt 610	
		Austin, TX 78705-3698	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Contribution	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/30/2024	The Austin Club	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	110 E 9th St	
	4000.00		
		Austin, TX 78701-2426	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		event venue expense	
	0 1 0 0 1 1 1 1		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	09/25/2024	Threes Company LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$350.00	1108 E. 6th St.	
		Austin, TX 78702	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense event venue rental	
		evenit venue rentai	
	Computate ONE V if alice	Condidate/Officeholder name	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/21 Rpt: 55/55	Flores, Maria Luisa (The Honorable) 00020023
4	Date	5 Payee name
	08/13/2024	Travis County Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	1311 E 6th St
		Ste B
		Austin, TX 78702-3368
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/10/2024	Travis County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1311 E 6th St
		Ste B
		Austin, TX 78702-3368
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Contribution
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
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