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 00067628	ommission Filers) 52		
2 OANIBUS :== /	Lucine	FIDOT	1 00007020		 	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR The Honorable	FIRST Philip		MI	OFFICE	E USE ONLY
NAME	The Honorable	Fillip			Date Received	
					ELECTRONI	CALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025	
	THE REPORT OF THE PERSON OF TH	Cortez		001117		
		Cortez				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	ΤΥ;	ZIP CODE	Date Hand-delivere	ed or Date Postmarked
OFFICEHOLDER MAILING	7919 Liberty Island					
ADDRESS					Receipt #	Amount
Change of Address	San Antonio, TX 78227-47	734				
	Garrantorno, TX 70227 41	0-1			Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Ms.	Rose				
IVAIVIE						
	NICKNAME	 LAST		SUFFIX		
	MORIVAINE	Cortez		301117		
		Cortez				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY;	S	STATE; ZIP CODE
ADDRESS	351 McNarney					
(Residence or Business)						
(residence of Eduliness)	San Antonio, TX 78211					
7 CAMPAIGN	AREA CODE PHON	IE NUMBER	EXTENSION			
TREASURER PHONE	(210) 923-1557					
8 REPORT						
TYPE	X January 15	30th day before	e election	Runoff		campaign treasurer
		7 Oth day before	alastian 🗖	Eveneded modified	_	officeholder only)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	Attach C/OH-FR)
0 DEDIOD	Month Day Year			Month Dav	Voor	
9 PERIOD COVERED	Month Day Year	TL	HROUGH	Month Day 12/31/202	Year	
	10/27/2024	11	HKOOGH	12/31/202	.4	
10 FLECTION	FLECTION DATE	<u> </u>		ELECTION TYPE		
10 ELECTION	ELECTION DATE		Drim on .		Othor	
	Month Day Year	U	Primary	Runoff	Other	
			Seneral	Special		
						
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	State Representative Dist	rict 117		State Represent		17
			TO DAGE 5			
		GO 1	TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 52

13 C / OH NAME	Cortez, Philip (The H	onorable)	14 Filer ID (00067628	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political ex These expenditures may have been made w I officeholders are required to report this info	vithout the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
_	GENERAL	001447777 4000700		
	CDECIFIC	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER N.	AME	
		COMMITTEE CAMPAIGN TREASURER A	DDRESS	
16 CONTRIBUTION TOTALS	\$ 0.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF	LOANS)	\$ 78,024.00
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 49,357.95
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$ 129,254.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOA TING PERIOD	NS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
			penalty of perjury, that the acc ludes all information required to Code.	
			he Honorable Philip Cortez ature of Candidate or Officeholo	
		Signa	ature of Candidate of Officerion	lei
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of offi	ice.	
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 of 52
18 FIL	ER NAN	ΛΕ '	19 Filer ID	(Eth	ics Commission Filers)
Co	rtez, Pl	hilip (The Honorable)	00067628		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	77,774.00
2.	X	\$	250.00		
3.		\$			
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	49,357.95
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
				•	

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/14 Rpt: 4/52	
2	FILER NAME Cortez, Philip	o (The Honorable)			3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 10/28/2024	5 Full name of contributor ANDRE, SARAH6 Contributor address; City; States	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$250.00
8	Drincinal occu	AUSTIN, TX 78702 pation / Job title (See Instructions		9 Employer (See Instructions	-, 		
	Housing Dev)	Structure Development	"		
	Date 11/06/2024	AT&T Inc. Texas Political Contributor address; City; St	ate; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington D.C., DC 200 pation / Job title (See Instructions		Employer (See Instructions	<u>;)</u>		
	· ····o.pa. occa	panon, ooz ano (ooo monasaono	,	p.o/o. (000ou douo	-,		
	Date 12/06/2024	Full name of contributor Allen Boone Humphries R Contributor address; City; St)	•	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77027					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/30/2024	Full name of contributor Arechiga, Jason Contributor address; City; St)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions NPR Group	5)		
	Date 12/12/2024	Full name of contributor Atlantic Pacific Communiti Contributor address; City; St Bay Harbor , FL 33154			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)		
			-				

	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: 2/14 Rpt: 5/52	
2	FILER NAME Cortez, Phili	p (The Honorable)		3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 11/26/2024	5 Full name of contributor out-of-state PAC (ID#:_ BRENTWOOD PUBLIC AFFAIRS 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	<u> </u>	AUSTIN, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Basaldua, Paul Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Deire die alle access	San Antonio, TX 78248	Frankrije (Combration			
	Real Estate	pation / Job title (See Instructions)	Employer (See Instructions VersaTerra)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Charter Communications, Inc. Texas PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Charter Schools Now PAC Contributor address; City; State; Zip Code Austin, TX 78704			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/06/2024	Full name of contributor x out-of-state PAC (ID#: Chevron Employees PAC Contributor address; City; State; Zip Code San Ramon , CA 94583	C00035006)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CO	NTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 3/14 Rpt: 6/52	
2	FILER NAME Cortez, Philip	o (The Honorable)			3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 11/01/2024	 Full name of contributor X Chubb Group Holding Inc Contributor address; City; State; 	out-of-state PAC (ID#: <u>C0</u>) Zip Code)	7	Amount of Contribution (\$)	\$500.00
0	Principal occu	Philidelphia, PA 19106 pation / Job title (See Instructions)	lo.	Employer (See Instructions			
<u> </u>	Principal occu	pation 7 300 title (See Instructions)	9	Employer (See Instructions)		
	Date 10/29/2024	Full name of contributor Dang, Ruby Contributor address; City; State;				Amount of Contribution (\$)	\$2,500.00
	Principal occu	Houston, TX 77010 pation / Job title (See Instructions)		Employer (See Instructions)		
Client Services GHA			,				
	Date 12/13/2024	Full name of contributor Earl, David (Mr.) Contributor address; City; State;	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$3,000.00
		San Antonio, TX 78256					
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions Earl & Associates PC)		
	Date 10/29/2024	Full name of contributor Flores, Juan Contributor address; City; State; San Antonio, TX 78209	out-of-state PAC (ID#: Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu Executive	pation / Job title (See Instructions)		Employer (See Instructions Port San Antonio)		
	Date 12/10/2024	Full name of contributor Friends of San Antonio Leade Contributor address; City; State; San Antonio, TX 78249				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTI	ON	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 4/14 Rpt: 7/52	
2	FILER NAME Cortez, Philip	o (The Honorable)			3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 10/29/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$5,000.00
8	Dringinal occu	Houston, TX 77025 pation / Job title (See Instructions)	l _o	Employer (See Instructions	·/		
0	Finance	oauon7 Job title (See instructions)	9	GHA	»)		
	Date 11/01/2024	Full name of contributor				Amount of Contribution (\$)	\$250.00
	Drincinal occu	San Antonio, TX 78210 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Real Estate	oduon 7 Job title (See matractions)		The NRP Group	·)		
	Date 11/26/2024	Full name of contributor	#:)		Amount of Contribution (\$)	\$1,000.00
	Deire sin al access	Richardson, TX 75082		Faralagae (Octobration	<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID HOSPITALITY HEALTH ER PAC Contributor address; City; State; Zip Code BELLAIRE, TX 77401)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l </u>		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID Heller, J David Contributor address; City; State; Zip Code Boca Raton, FL 33432				Amount of Contribution (\$)	\$500.00
	Principal occu President & (pation / Job title (See Instructions)		Employer (See Instructions The NRP Group	5)		
				<u> </u>			

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 5/14 Rpt: 8/52	
2	FILER NAME Cortez, Philip	o (The Honorable)			3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 11/05/2024	 Full name of contributor out-of-state PAC (ID#:_Hernandez, John Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78224					
8	Principal occu President	pation / Job title (See Instructions)	9	Employer (See Instructions Big Texas Comicon	5)		
	Date 10/29/2024	Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$1,500.00
	Principal occu	San Antonio, TX 78207 Dation / Job title (See Instructions)	Γ	Employer (See Instructions	 s)		
	attorney			the herrera law firm			
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_ Houston Police Retired Officers Association PA Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$250.00
		Houston , TX 77219					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_IBAT PAC Contributor address; City; State; Zip Code Austin, TX 78701)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> S)		
	Date 11/06/2024	Full name of contributor x out-of-state PAC (ID#:_IBEW PAC Voluntary Fund Contributor address; City; State; Zip Code Washington D.C., DC 20001	C00	0027342)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<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: 6/14 Rpt: 9/52	
2	FILER NAME Cortez, Phili	p (The Honorable)		3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 12/06/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
_	Dringing Local	AUSTIN, TX 78701	0 Employer (See Instructions			
8	Рппсіраї осси	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: Jones, Neal Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Austin , TX 78746				
	attorney	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Kaufman, William T. (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		San Antonio, TX 78205				
	Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions Kaufman Killen)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_Kelley, Russell Contributor address; City; State; Zip Code Austin, TX 78731)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Lobbyist	pation / Job title (See Instructions)	Employer (See Instructions Blackridge)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ LaMantia, Lauren Contributor address; City; State; Zip Code Boerne, TX 78015)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Beverage Di	ipation / Job title (See Instructions) istributor	Employer (See Instructions L&F Distributors)		

	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: 7/14 Rpt: 10/52	
2	FILER NAME Cortez, Phili	p (The Honorable)		3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 12/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ Laredo Fire PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_	Discipal	Laredo, TX 78041				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_Legacy 44 PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin , TX 78756 upation / Job title (See Instructions)	Employer (See Instructions			
	i illioipai ooda	pation 7 oob tale (eee metadolone)	Employer (Geo mondone)	,		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Mission Business PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
		Universal City , TX 78148				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Montoya, Celina Contributor address; City; State; Zip Code San Antonio , TX 78209)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Business Ov	upation / Job title (See Instructions) wner	Employer (See Instructions self)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_NAIFA Texas IFAPAC Contributor address; City; State; Zip Code Austin , TX 78746			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO)NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/14 Rpt: 11/52	
2	FILER NAME	p (The Honorable)			3	Filer ID (Ethics Commission 00067628	on Filers)
_				200000550	Ļ		
4	Date 11/26/2024	 5 Full name of contributor NRG ENERGY INC PAC 6 Contributor address; City; Sta 	x out-of-state PAC (ID#: \(\))	′	Amount of Contribution (\$)	\$2,000.00
Ω	Principal occu	PRINCETON, NJ 08540 pation / Job title (See Instructions)		9 Employer (See Instructions			
0	Principal occu	pation / Job title (See instructions)		Employer (See instructions)		
	Date 12/06/2024	Full name of contributor Oliver, Harold Contributor address; City; Sta	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
		SAN ANTONIO, TX 78216	i				
	Principal occu LOBBYIST	pation / Job title (See Instructions)		Employer (See Instructions GAP TEXAS	i)		
	Date 10/29/2024	Full name of contributor Ortiz, Daniel Contributor address; City; Sta	out-of-state PAC (ID#:_ mate; Zip Code			Amount of Contribution (\$)	\$1,000.00
		san antonio, TX 78205					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	()		
	Attorney			Brown & Ortiz, P.C.			
	Date 10/29/2024	Full name of contributor Perez, Johnny Contributor address; City; Sta	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
	'	pation / Job title (See Instructions)		Employer (See Instructions			
	Vice Preside	nt/PAC Chair		San Antonio Police Offic	er	s Association	
	Date 11/15/2024	Full name of contributor Pharm PAC Contributor address; City; Sta Austin , TX 78757	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		

	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: 9/14 Rpt: 12/52	
2	FILER NAME Cortez, Philip	p (The Honorable)		3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 12/13/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_	Drive in all and	Houston, TX 77249				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	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 (\$)	\$750.00
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions	 		
	Date			<u></u>	Amount of Contribution (\$)	
	11/07/2024	Full name of contributor out-of-state PAC (ID#:_ Rodriguez, Marc Contributor address; City; State; Zip Code			, another of Continuation (c)	\$2,500.00
		Austin, TX 78701		_		
	Principal occu Lobbyist	pation / Job title (See Instructions)	Employer (See Instructions) Offices of Marc Rodrigue			
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Rosas, Chris (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78240)		Amount of Contribution (\$)	\$50.00
	Principal occu CPA	ipation / Job title (See Instructions)	Employer (See Instructions) Bumble	s)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ San Antonio Professional Firefighters PAC Contributor address; City; State; Zip Code San Antonio, TX 78201			Amount of Contribution (\$)	\$1,624.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> 5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 10/14 Rpt: 13/52		
2	FILER NAME Cortez, Phili	p (The Honorable)		3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 12/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ Sledgelaw Group PLLC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
8	Dringing oggu	Austin, TX 78766 pation / Job title (See Instructions)	9 Employer (See Instructions			
<u> </u>	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions) 		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID#:_ Southwest Airlines Co. Freedom Fund Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Dallas , TX 75235 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ TALAPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin , TX 78759 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	- Tilloipai occa	pation 7 oob title (occ instructions)	Employer (See Instructions	, 		
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_ TENET HEALTHCARE CORP PAC Contributor address; City; State; Zip Code DALLAS , TX 75254)		Amount of Contribution (\$)	\$250.00
Principal occupation / Job title (See Instructions) Employer (See Instruction)		
	Date 12/06/2024	Full name of contributor x out-of-state PAC (ID#:_ THE HOME DEPOT PAC Contributor address; City; State; Zip Code WASHINGTON, DC 20004	C00284885)		Amount of Contribution (\$)	\$1,000.00
	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	1	Total pages Schedule A1: Sch: 11/14 Rpt: 14/52		
2	FILER NAME Cortez, Phili	p (The Honorable)		3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 12/06/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Texas Dental Association PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78704 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Land Title Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Timoipai ooda	pation / cos title (ese metastions)	Employer (Goo mondone)			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas McDonald's Operator Association PAC Contributor address; City; State; Zip Code Athens, TX 75751)		Amount of Contribution (\$)	\$1,000.00
Principal occupation / Job title (See Instructions) Employer (See Instruction)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Oil and Gas Association Good Governme Contributor address; City; State; Zip Code Austin, TX 78701	ent Committee		Amount of Contribution (\$)	\$1,000.00
	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	1	Total pages Schedule A1: Sch: 12/14 Rpt: 15/52		
2	FILER NAME Cortez, Phili	p (The Honorable)		3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 11/26/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78705				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/06/2024	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	San Antonio, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Employer (See instructions)						
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas and Soutwestern Cattle Raisers Associat Contributor address; City; State; Zip Code Fort Worth, TX 76185	ion		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_ The Bexar County Justice PAC of SATLA Contributor address; City; State; Zip Code San Antonio , TX 78232			Amount of Contribution (\$)	\$1,000.00
	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: 13/14 Rpt: 16/52	
2	FILER NAME Cortez, Phili	p (The Honorable)		3	Filer ID (Ethics Commission 00067628	on Filers)
4	Date 12/14/2024	 Full name of contributor	C00085316)	7	Amount of Contribution (\$)	\$500.00
_		Philadelphia, TX 19192				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Valero PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
	Principal occu	San Antonio, TX 78269 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Timolpai occa	pation 7 oob title (oce instructions)	Employer (See Matractions	,		
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Vruggink, Matthew Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75214				
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions Ojala Partners)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard Contributor address; City; State; Zip Code Houston, TX 77027)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Housing	pation / Job title (See Instructions)	Employer (See Instructions Weekley Homes)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

TARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A1
iction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 14/14 Rpt: 17/52
ip (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067628
5 Full name of contributor out-of-state PAC (ID#		7 Amount of Contribution (\$) \$1,000.00
San Antonio, TX 78265-3240		
upation / Job title (See Instructions)	9 Employer (See Instructions	s)
	ction Guide explains how to complete this p (The Honorable) 5 Full name of contributor out-of-state PAC (ID# Zachary Corporation Political Action Committee 6 Contributor address; City; State; Zip Code San Antonio, TX 78265-3240	The Honorable The Honorable

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: 18/52 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Cortez, Philip (The Honorable) 00067628 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) description 12/05/2024 **TREPAC** \$250.00 Advertising for fundraising 7 Contributor address; City; State; Zip Code event Austin, TX 78768 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) 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)

SCHEDULE F1

Advertising Expense Accounting/Banking Event Expense Fees Consulting Expense

Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By -Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/34 Rpt: 19/52 Cortez, Philip (The Honorable) 00067628 4 Date Payee name 11/13/2024 7-Eleven 6 Amount (\$) Payee address; State; Zip Code \$35.84 7930 Callaghan Rd San Antonio, TX 78229 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/28/2024 AT&T Amount (\$) Payee address; City; State; Zip Code \$207.49 P.O. BOX 5006 Carol Stream, IL 60197 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Equipment fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/18/2024 AT&T Amount (\$) Payee address: City; State; Zip Code \$174.82 P.O. BOX 5006 Carol Stream, IL 60197 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Equipment fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

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

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

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

	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: 2/34 Rpt: 20/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	11/18/2024	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$53.62	P.O. BOX 5006
		Carol Stream , IL 60197
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 Equipment fees
		Equipment lees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name
	11/27/2024	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$169.60	P.O. BOX 5006
		Carol Stream , IL 60197
	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
		Equipment fees
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	
⊨		
	Date	Payee name
	11/15/2024	Alamodome
	Amount (\$)	Payee address; City; State; Zip Code
	\$327.93	100 Montana St
		San Antonio, TX 78203
	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 Food
		Fuou
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
I		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/34 Rpt: 21/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/05/2024	Allianze Events
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	7711 Guilbeau Rd
		San Antonio , TX 78250
8	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 Music
		Wusie
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
٠	expenditure to benefit C/OI	
	Date	Payee name
	12/12/2024	Allianze Events
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	7711 Guilbeau Rd
	Ψ200.00	TTI Gallboad Na
		San Antonio , TX 78250
	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 Music
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/23/2024	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.79	440 Terry Avenue North
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office supplies
	Complete ONLY if dies -t	Condidate/Officeholder name Office county
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

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		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	kpense		ense ges/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		
1	Total pages Schedule F1:						1	Filer ID	(Ethics Commission Filers)	
	Sch: 4/34 Rpt: 22/52	Cortez, F	Philip (The Honorable	e) 				00067628		_
4	Date	5 Payee na								
	10/30/2024	BDR Ser								
6	Amount (\$)	7 Payee ad		State;	Zip Code	е				
	\$2,580.00	2610 Till	e Drive							
		San Anto	onio , TX 78222							
8	PURPOSE	(a) Category	(See Categories listed at the	top of this sched	_{dule)} (I	Description				
	OF EXPENDITURE	Salaries/	Wages/Contract Lab	or		=		le of Texas. Com officeholder living	plete Schedule T.	
						Field	., .,,	ooonoluer iiviitį		
9	Complete ONLY if direct expenditure to benefit C/Oh		Officeholder name	Of	ffice sough	nt		Office he	eld	
H	Date	Payee na	me							=
	11/10/2024	BDR Ser								
	Amount (\$)	Payee ad	dress; City;	State;	Zip Code	e				_
	\$3,352.00	2610 Till	e Drive							
		San Anto	onio , TX 78222							
	PURPOSE	(a) Category	(See Categories listed at the	top of this sched	dule) (I	Description				
	OF EXPENDITURE		Wages/Contract Lab			=			plete Schedule T.	
						Field	ı, IX, (officeholder living	g expense	
	Complete ONLY if direct		Officeholder name	Of	ffice sough	nt		Office h	eld	_
	expenditure to benefit C/OI	1 								
	Date	Payee na	me							
L	11/06/2024	Beasely,	Thomas							
	Amount (\$)	Payee ad		State;	Zip Code	e				
	\$500.00	308 Lon	gview Drive							
		San Anto	onio, TX 78220							
	PURPOSE OF	(a) Category	(See Categories listed at the	top of this sched	dule) (I	Description				
	EXPENDITURE	Event Ex	pense					le of Texas. Com officeholder living	plete Schedule T. g expense	
						Security	, . , , ,		y - 1, 2	
						-				
	Complete ONLY if direct		Officeholder name	Of	ffice sough	nt		Office he	eld	_
	expenditure to benefit C/O	1								

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 5/34 Rpt: 23/52	Cortez, Philip (The Honorable)	00067628
4	Date	5 Payee name	<u>'</u>
l	12/12/2024	Beasely, Thomas	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$400.00	308 Longview Drive	
l			
l		San Antonio, TX 78220	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Security
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		0.00
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┡	·		
	Date	Payee name	
L	11/18/2024	Best Buy	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$162.37	6001 Northwest Loop 410	
		San Antonio, TX 78238	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l			Suplies
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	12/30/2024	Best Buy	
┝	Amount (\$)	Payee address; City; State; Zip Code	
l	\$194.84	6001 Northwest Loop 410	
l		·	
		San Antonio, TX 78238	
⊢	PURPOSE		Description
l	OF	(a) Category (See Categories listed at the top of this schedule) Fees	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	1 000	Check if Austin, TX, officeholder living expense
			Membership
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experience to beliefit 6/01	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment		The Instruction Guide explains how to o	ompl	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 6/34 Rpt: 24/52		Cortez, Philip (The Honorable)		00067628
4	Date	5	Payee name		
	12/19/2024		Bohanan's		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$899.87		219 E Houston Street		
			San Antonio , TX 78205		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Meeting
					Modulig
9	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office so	 ouaht	Office held
	expenditure to benefit C/OI		2	-ag	C.IIGC IIGG
_	Date	$\overline{}$	Payee name	—	
	12/23/2024		Chevron		
	Amount (\$)	⊢	Payee address; City; State; Zip C	ode.	
	\$49.02		1900 N. St. Mary's St.	,ouc	
	Ψ+3.02		1300 N. St. Wary 3 St.		
			Can Antonio TV 70212		
		Ļ	San Antonio, TX 78212	Ta>	
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(d)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Travel In District		Check if Austin, TX, officeholder living expense
					fuel
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/O	п			
	Date		Payee name		
	12/08/2024		Circle K		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$98.76		7715 S Zarzamora		
			San Antonio , TX 78224		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Travel In District		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense Fuel
					ruei
	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/O		Sandidate/Oniceriolder flame Onice Sc	ugnt	Office field
		—			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 7/34 Rpt: 25/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/10/2024	Cortez, Philip
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$512.86	7919 Liberty Island
		San Antonio, TX 78227
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Staff meals
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	10/31/2024	Door Dash
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.11	901 Market Street
	400.22	6th floor
		San Francisco , CA 94103
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Staff food
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/31/2024	Door Dash
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.37	901 Market Street
		6th floor
		San Francisco , CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LAFEINDITORE	Check if Austin, TX, officeholder living expense
		Staff food
	Computate ONLY if direct	Constitute /Office helder no year
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·	

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
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

	Credit Card Payment		The Instruction Guide explains how to co	omple	olete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 8/34 Rpt: 26/52		Cortez, Philip (The Honorable)		00067628
4	Date	5	Payee name		•
	11/01/2024		Door Dash		
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode	1
	\$18.86		901 Market Street		
			6th floor		
			San Francisco , CA 94103		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Staff food
					Sta. 1.000
9	Complete ONLY if direct		Candidate/Officeholder name Office sou	<u>ı</u> ught	t Office held
	expenditure to benefit C/OI	Н		-	
F	Date		Payee name		
	11/06/2024		Door Dash		
	Amount (\$)	H	Payee address; City; State; Zip Co	ode	
	\$23.22		901 Market Street		
			6th floor		
			San Francisco , CA 94103		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description
	OF	l` <i>`</i>	Food/Beverage Expense	`´	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		,		Check if Austin, TX, officeholder living expense
					Staff food
	Operation ONLY if the st	<u> </u>	Or a lide to 10 ff and a led an array		A Office health
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sou	ugnt	t Office held
	<u> </u>	_			
	Date		Payee name		
	11/08/2024		Door Dash		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$35.79		901 Market Street		
			6th floor		
			San Francisco , CA 94103		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description
	EXPENDITURE		Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Staff food
	Complete ONLY if direct	۳	Candidate/Officeholder name Office sou	ught	t Office held
	expenditure to benefit C/OI	Н		-	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/34 Rpt: 27/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	11/18/2024	Door Dash
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$24.71	901 Market Street
		6th floor
		San Francisco , CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Staff food
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/25/2024	Door Dash
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.62	901 Market Street
		6th floor
		San Francisco , CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff food
		Star root
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
_	Date	Douge name
	12/16/2024	Payee name Door Dash
		200, 200
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.58	901 Market Street
		6th floor
		San Francisco , CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff food
		Star root
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 10/34 Rpt: 28/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/30/2024	Door Dash
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$90.96	901 Market Street
		6th floor
		San Francisco , CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff food
		Stan root
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	12/30/2024	Door Dash
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$75.34	901 Market Street
		6th floor
		San Francisco , CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff food
		Stall 1000
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/29/2024	Dough Pizzeria
	Amount (\$)	Payee address; City; State; Zip Code
	\$88.47	6989 Blanco Rd
		San Antonio, TX 78216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food
		Food
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		
I		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 11/34 Rpt: 29/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	11/25/2024	El nortenito tacos
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$149.91	6565 Babcock Rd
		Suite 26
_	DUDDOGE	San Antonio, TX 78249
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Staff food
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/10/2024	Elegant Charter - San Antonio
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	5157 Blanco Rd
		San Antonio, TX 78216
	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
		Transportation
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Superioritate to beliefit 6/01	
	Date	Payee name
	12/30/2024	Elegant Charter - San Antonio
	Amount (\$)	Payee address; City; State; Zip Code
	\$289.00	5157 Blanco Rd
		San Antonio, TX 78216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTALE (Control of State Control of C

	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: 12/34 Rpt: 30/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	11/26/2024	Felix H. Morales Funeral Home & On-site Crematory
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$217.93	2901 Canal St,
		Houston, TX 77003
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense
		Constituent gift
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	11/15/2024	Fuerza Unida
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	710 New Laredo Hwy
		San Antonio, TX 78211
	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 Check if Austin, TX, officeholder living expense Thanksgiving donation
		Thanksgiving donation
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Davisa nama
	11/01/2024	Payee name Google
		<u> </u>
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.35	1600 Amphitheatre
		Parkway Mountain View , CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		G-suite account
		S suite decount
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

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

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

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

l	Credit Card Payment	The Instruction Guide explains how to com	plete thi	is form.	, ,
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Et	hics Commission Filers)
l	Sch: 13/34 Rpt: 31/52	Cortez, Philip (The Honorable)		00067628	
4	Date	5 Payee name			
	12/23/2024	Google			
6	Amount (\$)	7 Payee address; City; State; Zip Code	9		
	\$15.35	1600 Amphitheatre			
		Parkway Mountain View , CA 94043			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Des	cription	
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete	
				Check if Austin, TX, officeholder living expeuite account	ense
			0 3	and addount	
9	Complete ONLY if direct	Candidate/Officeholder name Office sougl	nt	Office held	
ľ	expenditure to benefit C/OI				
F	Date	Payee name			
	11/04/2024	HEB Gas			
┝	Amount (\$)	Payee address; City; State; Zip Code	<u>۔</u>		
	\$94.82	6818 S Zarzamora			
	*****	33-2 2			
		San Antonio, TX 78224			
⊢	PURPOSE) Doc	cription	
	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District		Check if travel outside of Texas. Complete	Schedule T.
	EXPENDITURE	Traver in District		Check if Austin, TX, officeholder living expe	ense
			Fue	·l	
L					
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	nt	Office held	
┕					
l	Date	Payee name			
	10/28/2024	HEB			
l	Amount (\$)	Payee address; City; State; Zip Code	Э		
l	\$85.37	6818 S Zarzamora			
		0 4 1 7 70004			
		San Antonio, TX 78224			
l	PURPOSE OF	,		cription Check if travel outside of Texas. Complete	Schodulo T
l	EXPENDITURE	Transportation Equipment And Related Expense		Check if Austin, TX, officeholder living expe	
l		,pses	Fue	ıl	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held	
	expenditure to benefit C/OI	1			

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal	vards/Memorials Expe Services nstruction Guide	Salari		es/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	12						3	Filer ID	(Ethics Commission	Eilore)
-	Sch: 14/34 Rpt: 32/52	_	Cortez, Philip (T	he Honorable)				3	00067628	(Ethics Commission	riieis)
4	Date	5	Payee name								
	10/28/2024		HEB								
_		 		O'th	Otata: 7'a	0					
6	Amount (\$)	7	Payee address;	City;	State; Zip	Coae					
	\$35.79		6818 S Zarzamo	ora							
			San Antonio, TX	78224							
8	PURPOSE	(a)	Category (See Cate	egories listed at the to	n of this schedule)	(b)) Description				
	OF		Travel In District		p or allo corrodallo)			outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE						Check if Austin	ı, TX	, officeholder living	gexpense	
							Fuel				
9	Complete ONLY if direct		Candidate/Officehol	der name	Office s	ought	t		Office he	eld	
	expenditure to benefit C/OI	Н									
H	Date	Π	Payee name								
	11/20/2024		HEB								
		⊢		0''		<u> </u>					
	Amount (\$)		Payee address;	City;	State; Zip	Coae					
	\$159.47		6818 S Zarzamo	ora							
			San Antonio, TX	78224							
	PURPOSE	(a)	Category (See Cate	egories listed at the to	n of this schedule)	(b)) Description				
	OF		Travel In District		,		Check if travel	outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE						Check if Austin	ı, TX	, officeholder living	gexpense	
							Fuel				
	Complete ONLY if direct		Candidate/Officehol	der name	Office s	ought	t		Office h	eld	
	expenditure to benefit C/OI	Н									
H	Date		Payee name								
	11/25/2024		HEB								
<u> </u>		\vdash		City	State; Zip	Code					
	Amount (\$)		Payee address;	City;	State, ZIP	Coue					
	\$63.90		6818 S Zarzamo	ııa							
			San Antonio, TX	78224							
	PURPOSE	(a)	Category (See Cate	gories listed at the to	p of this schedule)	(b)) Description				
	OF EXPENDITURE		Travel In District				Check if travel	outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITORE						ш	ı, TX	, officeholder living	g expense	
							Fuel				
	Complete ONLY if direct		Candidate/Officehol	der name	Office	ought	t		Office h	eld	
	expenditure to benefit C/OI	Н									

SCHEDULE F1

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

Fees Cod/Beverage Expense Git/Awards/Memorials Expense Fugal Services S

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 15/34 Rpt: 33/52	2 FILER NAME Cortez, Philip (The Honorable) 3 Filer ID (Ethics Commission Filer 00067628	rs)
4	Date 12/16/2024	5 Payee name HEB	
6	Amount (\$) \$34.59	7 Payee address; City; State; Zip Code 6818 S Zarzamora San Antonio, TX 78224	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 12/17/2024	Payee name HEB	
	Amount (\$) \$103.11	Payee address; City; State; Zip Code 6818 S Zarzamora San Antonio, TX 78224	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date 12/23/2024	Payee name HEB	
	Amount (\$) \$44.44	Payee address; City; State; Zip Code 6818 S Zarzamora Sep Antonio, TV 79224	
	PURPOSE OF EXPENDITURE	San Antonio, TX 78224 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	

SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1: Sch: 16/34 Rpt: 34/52	2 FILER NAME Cortez, Philip (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067628
4		5 Payee name HEB	L
6	Amount (\$) \$62.27	7 Payee address; City; State; Zip Code 6818 S Zarzamora	
8	PURPOSE OF EXPENDITURE	San Antonio, TX 78224 (a) Category (See Categories listed at the top of this schedule) Travel In District (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 11/06/2024	Payee name Harland Clarke	
	Amount (\$) \$41.60	Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
	PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check printing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 11/27/2024	Payee name Harland Clarke	
	Amount (\$) \$83.20	Payee address; City; State; Zip Code 15955 La Cantera Parkway	
		San Antonio, TX 78256	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Checks
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/34 Rpt: 35/52 Cortez, Philip (The Honorable) 00067628 4 Date Payee name 11/12/2024 Henry Metzger Middle School 6 Amount (\$) Payee address; City; State; Zip Code \$123.32 7475 Binz Engleman Rd San Antonio, TX 78244 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/01/2024 J. Alexander's Amount (\$) Payee address; City; State; Zip Code \$140.67 255 East Basse Rd. Suite 300 San Antonio, TX 78209 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff food Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/13/2024 J. Alexander's Amount (\$) Payee address: City: State; Zip Code \$219.44 255 East Basse Rd. Suite 300 San Antonio, TX 78209 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff food Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 18/34 Rpt: 36/52	Cortez, Philip (The Honorable)
Ļ	•	
4	Date	5 Payee name
L	12/02/2024	Jaramillo, Leo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	330 West Baetz
		San Antonio, TX 78221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Sign removal
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
H	Date	Payee name
	12/18/2024	LAZ Parking
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.75	101 W. 6th Street
L		Austin, TX 78701
	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
		Event parking
_	Operation Objects "	Overflideta (Official to Identify and Identification and Identify and
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	,	
	Date	Payee name
	11/06/2024	La Fogata Mexican Restaurant
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,067.40	2427 Vance Jackson
		San Antonio, TX 78213
_	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Event Experate Accounting/Banking Fees
Consulting Expense Food/Bever
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Servi
Credit Card Payment

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

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

l	Credit Cara r ayment	The Instruction Guide explains how to co	mpl	lete this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
L	Sch: 19/34 Rpt: 37/52	Cortez, Philip (The Honorable)		00067628
4	Date	5 Payee name		
L	11/21/2024	La Fogata Mexican Restaurant		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$146.10	2427 Vance Jackson		
		Con Antonio, TV 70212		
Ļ	DUDDOCE	San Antonio, TX 78213	/l=\	\
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 courseverage Expense		Check if Austin, TX, officeholder living expense
				Staff food
L	2 1 2 2 2 2 2 2 2			
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou H	ıght	t Office held
⊨	Data			
	Date 12/16/2024	Payee name Lackland Mart		
┡			240	
	Amount (\$) \$58.75	Payee address; City; State; Zip Co 421 Valley High Dr	oue	
	Ψ30.73	421 Valley Flight Di		
		San Antonio, TX 78227		
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)) Description
	OF	Travel In District	(~)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				fuel
H	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht	Office held
	expenditure to benefit C/O		agric	Since held
H	Date	Payee name		
	11/06/2024	Lopez, Lee		
H	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$500.00	13030 Essen force		
		Helotes, TX 78023		
	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 Security
				,
Н	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	t Office held
	expenditure to benefit C/O	-1		

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 Cor

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	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: 20/34 Rpt: 38/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	11/22/2024	MailChimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$98.07	512 Means Street
		Atlanta, GA 30318
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 E-blast
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Date	David and a second a second and
		Payee name MeilChimp
L	12/23/2024	MailChimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.07	512 Means Street
		Atlanta, GA 30318
	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 E-blast
		L-blast
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
H	Data	David and the second se
	Date 11/06/2024	Payee name Mariachi Zacatecano
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	8622 S South Zarzamora Street
		San Antonio , TX 78224
	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 Music
		IVIUSIC
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
1		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/34 Rpt: 39/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/11/2024	Mariachi Zacatecano
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$550.00	8622 S South Zarzamora Street
		San Antonio , TX 78224
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
•	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Music
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit Grot	<u>'</u>
	Date	Payee name
	12/12/2024	Mon Chou Chou
	Amount (\$)	Payee address; City; State; Zip Code
	\$401.24	312 Pearl Pkwy
		San Antonio, TX 78215
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff food
		Stan lood
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/30/2024	Nava Photography
	Amount (\$)	Payee address; City; State; Zip Code
	\$278.88	27583 Old Blanco Rd.
		San Antonio, TX 78260
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Photography
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/34 Rpt: 40/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	11/24/2024	Office Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.53	119 SW Military
		San Antonio, TX 78245
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Office supplies
		Office Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Date	David and the second se
	11/26/2024	Payee name Office Depart
		Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.30	119 SW Military
		San Antonio, TX 78245
	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 Office supplies
		Office Supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	11/27/2024	Payee name Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.32	119 SW Military
		San Antonio, TX 78245
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Cinic Supplies
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/34 Rpt: 41/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/23/2024	Olive Garden
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.61	7811 IH 35 S
		San Antonio, TX 78224
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff food
		Starriou
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
_		
	Date	Payee name
	12/12/2024	Orozco, Menell
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	7000 Culebra
		San Antonio, TX 78238
	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.
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Blue santa parade
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/04/2024	Palenque Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,513.50	15900 La Cantera Pkwy Suite #25100
		San Antonio, TX 78256
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	CAPETIGITATE TO DETICITE C/OI	'

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/34 Rpt: 42/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/12/2024	Palenque Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,096.00	15900 La Cantera Pkwy Suite #25100
		San Antonio, TX 78256
8	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 Food
		1 000
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Davies same
		Payee name
	12/12/2024	Palenque Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	15900 La Cantera Pkwy Suite #25100
		San Antonio, TX 78256
	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
		Food
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	10/30/2024	Party Hat Celebrations
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,210.26	555 W Bitters Rd
		Suite 124
		San Antonio, TX 78216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Decorations
	0 1. 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Food/Beverage Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	<u> </u>	ore)
1	Sch: 25/34 Rpt: 43/52	Cortez, Philip (The Honorable)	315)
4	Date	5 Payee name	
	12/31/2024	Piryx	
6	Amount (\$) \$898.70	7 Payee address; City; State; Zip Code 995 Market Street San Francisco, CA 94103	
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	
		Donation fees	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/12/2024	Quinetero , Valeria	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	1207 Agora Palms Dr	
		Apt 1229	
		San Antonio, TX 78258	
	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	
		Salary	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/16/2024	Reinhard, Hannah	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	227 Dwyer Avenue	
		275	
		SAN ANTONIO, TX 78204	
	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	
\vdash	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 Commit

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/34 Rpt: 44/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/23/2024	Reinhard, Hannah
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,929.11	227 Dwyer Avenue
		275
		SAN ANTONIO, TX 78204
8	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
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/31/2024	Sabina Apartments
	Amount (\$)	Payee address; City; State; Zip Code
	\$233.95	3400 Harmon Avenue
		Austin, TX 78705
	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.
		X Check if Austin, TX, officeholder living expense
		App fee
	Complete ONL V if direct	Condidate Office held
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/13/2024	Sabina Apartments
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,031.87	3400 Harmon Avenue
	, ,	
		Austin, TX 78705
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Rent Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense Rent
		IVEH
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	•	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	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: 27/34 Rpt: 45/52	Cortez, Philip (The Honorable) 00067628
4 Date	5 Payee name
10/31/2024	Sam's Club
6 Amount (\$) \$247.63	7 Payee address; City; State; Zip Code 3150 SW Military Dr San Antonio, TX 78224
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 Office supplies
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/13/2024	Sam's Club
Amount (\$) \$80.40	Payee address; City; State; Zip Code 3150 SW Military Dr
	San Antonio, TX 78224
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 11/29/2024	Payee name Sam's Club
Amount (\$)	Payee address; City; State; Zip Code
\$164.52	3150 SW Military Dr
	San Antonio, TX 78224
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership renewal
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/34 Rpt: 46/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/18/2024	Sam's Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$183.16	3150 SW Military Dr
		San Antonio, TX 78224
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Supplies
		Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	11/29/2024	Shell Oil
	Amount (\$)	Payee address; City; State; Zip Code
	\$94.28	606 W Theo
		San Antonio, TX 78225
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fuel
		1 401
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	10/31/2024	Spectrum Cable
	Amount (\$)	Payee address; City; State; Zip Code
	\$115.89	1900 Blue Crest Ln
L		San Antonio, TX 78247
	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 DO cable
		DO capie
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	

SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total manage Calcadate 54	
1	Total pages Schedule F1:	
	Sch: 29/34 Rpt: 47/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	10/31/2024	St James Catholic School
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	907 W Theo Ave
		Can Antonia TV 7022E
		San Antonio, TX 78225
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TV, officeholder living evenness
		Candidate/Officeholder/Political Committee
		T unutuisei
<u>_</u>	Complete ONLY !! -!!!	Condidate/Officeholder name Office sought
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	12/24/2024	Texas Exes
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	2110, Etter-Harbin Alumni Center San Jacinto Blvd,
		Austin, TX 78712
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
\vdash	Data	
	Date	Payee name
	10/30/2024	The Rose Boutique
	Amount (\$)	Payee address; City; State; Zip Code
	\$115.00	955 Cincinnati Ave.
		San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent flowers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 30/34 Rpt: 48/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	11/07/2024	The Rose Boutique
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$655.00	955 Cincinnati Ave.
		San Antonio, TX 78201
8	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 Flowers
		T lowers
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
	Date	Davisa nama
	12/13/2024	Payee name The Rose Boutique
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$740.00	955 Cincinnati Ave.
		San Antonio, TX 78201
	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
		Flowers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	12/18/2024	The Rose Boutique
	Amount (\$)	Payee address; City; State; Zip Code
	\$160.00	955 Cincinnati Ave.
	,	
		San Antonio, TX 78201
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent flowers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/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: 31/34 Rpt: 49/52	Cortez, Philip (The Honorable) 00067628
4	Date	5 Payee name
	12/11/2024	The wash tub
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$407.00	3826 Fredericksburg
		San Antonio, TX 78201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		constituent gifts
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payes name
	12/12/2024	Payee name Trakas, Theodore
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	11106 Claypool Dr
		San Antonio , TX 78230
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Dove nome
	12/10/2024	Payee name Trevino, Carlos
	Amount (\$)	Payee address; City; State; Zip Code
	\$225.00	2022 W. Mistletoe
		San Antonio, TX 78201
	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
		Photography
		Ποτοφιαμή
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 32/34 Rpt: 50/52	Cortez, Philip (The Honorable) 00067628					
4	Date	5 Payee name					
	12/11/2024	USPS					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$167.48	1140 S Laredo St.					
		San Antonio, TX 78204					
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.					
	EXI ENDITORE	Check if Austin, TX, officeholder living expense					
		PO box renewal					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9	Complete ONLY if direct expenditure to benefit C/OH						
_							
	Date	Payee name					
	12/10/2024	Unique Creations					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$2,875.00	2600 SW Military Dr					
		San Antonio, TX 78224					
	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 Rental space + decorations					
		Remai space i decorations					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
_	Date	Davida marra					
	11/12/2024	Payee name Valero					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$97.57	6735 Medina Base Road					
		San Antonio, TX 78227					
	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					
		Fuel					
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
ı							

SCHEDULE F1

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

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

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

Candidate/Officenoider/Politi	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 33/34 Rpt: 51/52	Cortez, Philip (The Honorable) 00067628
4 Date	5 Payee name
12/26/2024	Valero
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$41.84	6735 Medina Base Road
	San Antonio, TX 78227
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Fuel
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
Date	Payee name
11/12/2024	WUFOO.COM
Amount (\$)	Payee address; City; State; Zip Code
\$20.26	1 Curiosity Way
	San Mateo , CA 94403
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 Website Security
	Website Security
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
Data	
Date 11/04/2024	Payee name Zoom
	1
Amount (\$)	Payee address; City; State; Zip Code
\$17.07	55 Almaden Blvd
	San Jose, CA 95113
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Video conferencing
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to benefit C/C	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		mmittee I	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						OTHER (enter a category not listed above)			
_	Tatal as a confidence of the	_							_	Ell- ID	(Ethion Commission Eilens)	
	Total pages Schedule F1:								Filer ID	(Ethics Commission Filers)		
	Sch: 34/34 Rpt: 52/52		Cortez, Phili	p (The Honorabl	e)					00067628		
4	Date	5	Payee name									
	12/10/2024		Zoom									
6	Amount (\$)	7	Payee addres	s; City;	State; Zij	n Code	<u> </u>					
ľ	\$17.07	ľ	55 Almaden		State, Zij	p Cour						
	Φ17.07		55 Almauen	DIVU								
			San Jose, C	A 95113								
8	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this schedule) (t	b)	Description				
	OF	Office Overhead/Pental Evnence Check if travel outside of Texas. Complete Schedule T.						mplete Schedule T.				
	EXPENDITURE			Check if Austin, TX, officeholder living expense				ng expense				
								Video confere	enc	ing		
9	Complete ONLY if direct	(Candidate/Offic	eholder name	Office	e sough	ht			Office h	neld	
	expenditure to benefit C/O	Н										
H	Date	Г	Dayco name									
			Payee name eRenterPlan									
	11/08/2024											
	Amount (\$)		Payee addres	-	State; Zij	p Code	е					
	\$418.00		330 Comme	rce								
			Suite 100									
			Irvine , CA 9	2602								
	PURPOSE	(a)				. 10	h)	Description				
OF		(a) Category (See Categories listed at the top of this schedule) Fees					~, 	:	outsio	de of Texas. Cor	mplete Schedule T.	
	EXPENDITURE		1-663					X Check if Austin,				
								— Renter's insui	ran	ce		
	Complete ONLY if direct		Candidate/Offic	eholder name	Office	e sough	ht			Office h	neld	
	expenditure to benefit C/O					J						