# 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 00062485		2 Total pages filed: 94	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ON	JLY
OFFICEHOLDER NAME	The Honorable	Rolando			Date Received	
					ELECTRONICALLY FIL	FD
	NICKNAME			CUEFIV	01/15/2025	
	NICKNAME Roland	LAST Gutierrez		SUFFIX	01/10/2020	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postm	narked
MAILING	P.O. Box 15232				Receipt # Amount	
ADDRESS						
Change of Address	San Antonio, TX 78212				Date Processed	
					Date Imaged	
E CAMBAICN	MS / MRS / MR	FIDET		MI		
<b>5</b> CAMPAIGN TREASURER	Mr.	FIRST David D.		IVII		
NAME	IVII.	David D.				
	NICKNAME	LAST		SUFFIX		
	NICKVAWE	Christian		30111X		
		Cimodan				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE):	AP	T / SUITE #; CITY	; STATE; Z	ZIP CODE
TREASURER	1800 McCullough Ave	- ,,		,	- ,	
ADDRESS						
(Residence or Business)	San Antonio, TX 78212					
7 CAMPAIGN TREASURER		IE NUMBER E	EXTENSION			
PHONE	(210) 710-8919					
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after campaign trea	asurer
					appointment (officeholder or	nly)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH-F	=R)
<b>6</b> DEDIOD	Manth Day Year			Month Day	Vasu	
9 PERIOD COVERED	Month Day Year 07/01/2024	T⊢	IROUGH	Month Day 12/31/202	Year 24	
	01/01/2024			12/31/20/	-7	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	I ∏Р	rimary	Runoff	Other	
			eneral	Special	_	
			cherai	Борески		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	[ (if known)	
II OFFICE	State Senator District 19			12 OFFICE SOCOTI	(II KIIOWII)	
		GO T	O PAGE 2			
		GUI	O PAGE Z			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

#### FORM C/OH COVER SHEET PG 2

2 of 94

13 C / OH NAME	Gutierrez, Rolando (1	he Honorable)	<b>14</b> Filer ID 00062485	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political These expenditures may have been ma officeholders are required to report this	de without the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
⊔ °	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURE	ER NAME	
		COMMITTEE CAMPAIGN TREASURE	ER ADDRESS	
16 CONTRIBUTION TOTALS	THER THAN PLEDGES, LOANS, MADE ELECTRONICALLY)	\$ 0.00		
	OF LOANS)	<b>\$</b> 158,289.00		
EXPENDITURE TOTALS	\$ 0.00			
	4. TOTAL POLITIC		<b>\$</b> 43,073.43	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	<b>\$</b> 123,343.82
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	LOANS AS OF THE LAST DAY	\$ 0.00
<b>17</b> AFFIDAVIT			nder penalty of perjury, that the ac I includes all information required t tion Code.	
		-	The Honorable Rolando Gutier	rez
			Signature of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal c		
Signature of office	cer administering	Printed name of officer administer	ing Title of office	r administering oath

#### **SUBTOTALS - C/OH**

#### FORM C/OH COVER SHEET PG 3

		C	OVER SHEET PG 3 3 of 94
18 FILER NAI Gutierrez	ME , Rolando (The Honorable)	<b>19</b> Filer ID 00062485	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 158,289.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	\$		
4.	\$		
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 10,758.83
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 32,314.60
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 TO FILER	RETURNED	\$

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains hov	<i>t</i> to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 1/51 Rpt: 4/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)				3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 12/05/2024	<ul><li>5 Full name of contributor Ahlberg, Trevor</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	Irving, TX 75038	<u>,                                    </u>		Employer (See Instructions	·,		
0	Retired	pation / Job title (See Instructions	5)	9	Employer (See Instructions Retired	s)		
	Date 12/06/2024	Full name of contributor Alabama-Coushatta Tribe Contributor address; City; S					Amount of Contribution (\$)	\$1,000.00
	Deireciant	Livingston, TX 77351			Frankrije (Cooks trocking)	<u></u>		
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 09/29/2024	Full name of contributor Alba, Kelly Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$5.00
	Dringinal acqu	San Antonio, TX 78253 pation / Job title (See Instructions			Employer (See Instructions	·/		
	Not Employe		,,		Not Employed	,,		
	Date 12/09/2024	Full name of contributor Allen Boone Humphries F Contributor address; City; S Houston, TX 77027					Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>.                                    </u>		
	Date 09/01/2024	Full name of contributor Allison, Ronald Contributor address; City; S Mobile, AL 36609	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions Not Employed	s)		
			1					

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/51 Rpt: 5/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 11/17/2024	<ul><li>5 Full name of contributor Alvarado, Melissa</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Orlando, FL 32827 pation / Job title (See Instructions	;)	9 Employer (See Instructions	<u> </u> s)		
	Product Man		,	Riot Games	,		
	Date 08/08/2024	Full name of contributor  American Electric Power  Contributor address; City; Si  Washington, DC 20004				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>I</u> S)		
	Date 09/15/2024	Full name of contributor Andrade, Paul Contributor address; City; Si	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$25.00
	Deinsinal sass	Rancho Palos Verdes, CA		Franksian (Caa kastuustian	<u></u>		
	Engineer	pation / Job title (See Instructions	5)	Employer (See Instructions Raytheon Technologies	•		
	Date 09/29/2024	Full name of contributor Armstrong, Kimberly Contributor address; City; Si		)		Amount of Contribution (\$)	\$5.00
	Principal occu Retail	pation / Job title (See Instructions	5)	Employer (See Instructions Target	5)		
	Date 10/08/2024	Full name of contributor Associated General Contributor address; City; St		)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONEI	ARY POLITICAL (	CONTRIBUTION	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains hov	to complete this for	m.	1	Total pages Schedule A1: Sch: 3/51 Rpt: 6/94	
2	FILER NAME	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	r Filers)
4	Date 09/22/2024	<ul> <li>5 Full name of contributor         Azadpour, Aram</li> <li>6 Contributor address; City; S</li> </ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu Test Softwar		s) 9	Employer (See Instructions SMS Infocomm Corp.	<u> </u> 5)		
	Date 09/29/2024	Full name of contributor Banks, Joel Contributor address; City; S Austin, TX 78759	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)	Employer (See Instructions Not Employed	<u> </u> s)		
	Date 10/13/2024	Full name of contributor Bannister, Michael Contributor address; City; S	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$25.00
	•	San Antonio, TX 78245 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> S)		
	Date 09/29/2024	Full name of contributor Bartos, Janet P  Contributor address; City; S  Little Rock, AR 72223	out-of-state PAC (ID#:	Tiger Sanitation	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)		
	Date 10/20/2024	Full name of contributor Bartos, Janet P Contributor address; City; S Little Rock, AR 72223	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)		
			<del></del>				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/51 Rpt: 7/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 09/23/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
_	Dringing! goog	Amarillo, TX 79106	D. Employer (See Instructional	<u></u>		
ð	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/01/2024	Full name of contributor out-of-state PAC (ID#: Beer Alliance of Texas PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
	Dringing agg	Austin, TX 78701	Employer (See Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	»)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#: Beer Alliance of Texas 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	5)		
	Date 09/22/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
	Principal occu Video Produ	pation / Job title (See Instructions) cton	Employer (See Instructions City of St. Louis	5)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		I				

	MONET	TARY POLITICAL CONTRIBUTION	)NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/51 Rpt: 8/94	
2	FILER NAME Gutierrez, Ro	colando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 08/14/2024	Full name of contributor		7	Amount of Contribution (\$)	\$2,000.00
	Duit single one	Austin, TX 78701	To Free Coo Instructions	Ĺ		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5) 		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_Blackridge  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701  upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	· 					
	Date 09/22/2024	Full name of contributor out-of-state PAC (ID#:_ Breedlove, Scott Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Katy, TX 77449				
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions) Retired	5)		
	Date 07/07/2024	Full name of contributor out-of-state PAC (ID#:_ COLDIRON, RON Contributor address; City; State; Zip Code  Austin, TX 78731	)		Amount of Contribution (\$)	\$5.00
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
	Date 08/04/2024	Full name of contributor out-of-state PAC (ID#:_ COLDIRON, RON Contributor address; City; State; Zip Code  Austin, TX 78731			Amount of Contribution (\$)	\$5.00
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 6/51 Rpt: 9/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 09/01/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$5.00
		Austin, TX 78731					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Not Employed	5)		
	Date 10/06/2024	Full name of contributor		)		Amount of Contribution (\$)	\$5.00
	Principal occu	Austin, TX 78731 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Retired	,		Not Employed	,		
	Date 12/01/2024	Full name of contributor	(ID#:	)		Amount of Contribution (\$)	\$4.00
		Austin, TX 78731					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 12/08/2024	Full name of contributor out-of-state PAC Capo, Zeph Contributor address; City; State; Zip Code Austin, TX 78722		)		Amount of Contribution (\$)	\$500.00
	Principal occu Education/La	pation / Job title (See Instructions) abor		Employer (See Instructions Texas AFT	5)		
	Date 09/29/2024	Full name of contributor out-of-state PAC Carsrud, Alan Contributor address; City; State; Zip Code Spicewood, TX 78669		)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
			•				

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 7/51 Rpt: 10/94	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Gutierrez, Ro	olando (The Honorable)			L	00062485	
4	Date 10/20/2024	<ul><li>5 Full name of contributor Carsrud, Alan</li><li>6 Contributor address; City; Si</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$25.00
		Spicewood, TX 78669					
8	Principal occu Not Employe	pation / Job title (See Instructions d	s) <u> </u>	9 Employer (See Instructions Not Employed	s)		
_	Date	Full name of contributor	out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	12/15/2024	Castaneda Jr, Tristan					\$1,000.00
		Contributor address; City; Si	ate; Zip Code				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	<u>L</u> S)		
	Government	Relations		Self			
Date Full name of contributor		out-of-state PAC (ID#:	)		Amount of Contribution (\$)		
	09/22/2024 Cavazos, JB					\$10.00	
		Contributor address; City; Si	ate; Zip Code		1		
		Con Antonio TV 70260					
	Drincinal occu	San Antonio, TX 78260 pation / Job title (See Instructions	.)	Employer (See Instructions	-, 		
	Not Employe		,	Not Employed	>)		
	Date		Out of state DAC (ID#)		Т	Amount of Contribution (\$)	
	12/13/2024	Full name of contributor Charter Communications,	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5,000.00
	12/10/2024	Contributor address; City; Si			ł		φο,οσο.σο
		Continuator address, Oily, Oil	.a.c., 2.p 0000				
		Austin, TX 78701			Ĺ		
	Principal occu	pation / Job title (See Instructions	;) 	Employer (See Instructions	5)		
	Date	Full name of contributor	x out-of-state PAC (ID#: C	00035006		Amount of Contribution (\$)	
	10/03/2024	Chevron Employees PAC					\$2,000.00
		Contributor address; City; Si	ate; Zip Code				
		San Ramon , CA 94583					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to c	omplete this form	n.	1	Total pages Schedule A1: Sch: 8/51 Rpt: 11/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 10/20/2024	Clark, Kathrene  6 Contributor address; City; State; Zi			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Walkersville, MD 21793 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> ;)		
	Not Employe	d		Not Employed			
	Date 11/03/2024	Coldiron, Ron  Contributor address; City; State; Zi	t-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occur	Austin, TX 78731 pation / Job title (See Instructions)		Employer (See Instructions	:) 		
	Retired	pation / Job title (See Instructions)		Not Employed	)		
	Date 10/06/2024	Full name of contributor ou collins, Deborah  Contributor address; City; State; Zi	p Code			Amount of Contribution (\$)	\$1.00
		Olney, TX 76374					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 10/06/2024	Full name of contributor ou conniff, Yuko Contributor address; City; State; Zi	t-of-state PAC (ID#: p Code	)		Amount of Contribution (\$)	\$3.00
	Principal occu Buddhist prie	pation / Job title (See Instructions)		Employer (See Instructions self	5)		
	Date 09/22/2024	Full name of contributor ou Contreras, Richard Contributor address; City; State; Zi Edmonds, WA 98020	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions)		Employer (See Instructions		2110	
	marketing			Independent Partners g	i OU	μ LLC	

	MONEI	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 9/51 Rpt: 12/94	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Gutierrez, Ro	olando (The Honorable)				00062485	
4	Date 09/22/2024	<ul><li>5 Full name of contributor [ Cramer, Hanni</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
		West Lafayette, IN 46906					
8	Principal occu Not Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions Not Employed	)		
	Date 09/22/2024	Full name of contributor [ Dadig, Robyn Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$10.00
		Aberdeen, NC 28315					
			Employer (See Instructions Not Employed	)			
	Date 09/29/2024	Full name of contributor [ Daniello, Kathleen  Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$25.00
		Union City, CA 94587					
		pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Not Employed  Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$10.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Date 07/07/2024	Full name of contributor  Duffy, Jeannie  Contributor address; City; Sta  Gettysburg, PA 17325	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		

	MONET	ARY POLITICAL CONTRIBUT	TION	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete thi	is for	m.	1	Total pages Schedule A1: Sch: 10/51 Rpt: 13/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 08/04/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Gettysburg, PA 17325 pation / Job title (See Instructions)	la	Employer (See Instructions	;) 		
Ü	Not Employe			Not Employed	"		
	Date 09/08/2024	Full name of contributor out-of-state PAC (II Duffy, Jeannie Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$5.00
		Gettysburg, PA 17325					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
	Date 10/06/2024	Full name of contributor out-of-state PAC (II Duffy, Jeannie Contributor address; City; State; Zip Code	D#:			Amount of Contribution (\$)	\$5.00
		Gettysburg, PA 17325					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	s)		
	Date 11/10/2024	Full name of contributor out-of-state PAC (I Duffy, Jeannie Contributor address; City; State; Zip Code Gettysburg, PA 17325				Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/22/2024	Full name of contributor out-of-state PAC (II Ellison, Sharon Contributor address; City; State; Zip Code Germantown, MD 20876				Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			<u> </u>				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to	complete this forn	1.	1	Total pages Schedule A1: Sch: 11/51 Rpt: 14/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 09/29/2024	Estabrook, Helen	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
8	Principal occur	Houston, TX 77019 pation / Job title (See Instructions)	٥	Employer (See Instructions			
0	Not Employe			Not Employed	,		
	Date 12/08/2024	Full name of contributor FAHNERT, CELESTE  Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Leander, TX 78641					
	Principal occu sales	pation / Job title (See Instructions)		Employer (See Instructions Taylor Morrison	)		
	Date 10/20/2024	Full name of contributor Fagner, Karin Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Sebastian, FL 32958					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Date 10/20/2024	Full name of contributor  Fleming, Nancy  Contributor address; City; State;  Lilburn, GA 30047				Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Date 12/11/2024	Full name of contributor Focused Advocacy PAC Contributor address; City; State; Austin, TX 78746	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
			l .				

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 12/51 Rpt: 15/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 11/20/2024	<ul><li>5 Full name of contributor Ford, Curtis</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: tte; Zip Code		7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Administrato			Media Choice	,		
	Date 09/29/2024	Full name of contributor Fox, Jeffrey Contributor address; City; Sta		)		Amount of Contribution (\$)	\$5.00
	Principal occu	Lynn Haven, FL 32444 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Not Employe			Not Employed	,		
	Date 07/07/2024	Full name of contributor Franke, Claude Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code	)		Amount of Contribution (\$)	\$25.00
		Ottawa, IL 61350					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	)		
	Date 12/10/2024	Full name of contributor Friends of San Antonio Lea Contributor address; City; Sta San Antonio, TX 78249				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 08/21/2024	Full name of contributor Garcia, David (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions David Garcia Consulting			
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 13/51 Rpt: 16/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 10/20/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu Not Employe	Yellville, AR 72687 pation / Job title (See Instructions)	9	Employer (See Instructions Not Employed	<u> </u> s)		
	Date 12/15/2024	Full name of contributor out-of-state PAC (ID#Ghavidel, Kelly  Contributor address; City; State; Zip Code  Katy, TX 77450				Amount of Contribution (\$)	\$10.00
	Principal occu Self-employe	pation / Job title (See Instructions) ed		Employer (See Instructions Self	5)		
	Date 09/01/2024	Full name of contributor out-of-state PAC (ID# Gillies, Glen Contributor address; City; State; Zip Code	:	)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	Pancho Santa Fe, CA 92067 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> 5)		
	Date 08/04/2024	Full name of contributor out-of-state PAC (ID# Gozaine, Andy  Contributor address; City; State; Zip Code  Plano, TX 75025				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>I</u> S)		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID# Graves, John Contributor address; City; State; Zip Code  Lafayette, CO 80026			•	Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 14/51 Rpt: 17/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 10/14/2024	<ul><li>5 Full name of contributor Gulf States Toyota Inc., S</li><li>6 Contributor address; City; St</li></ul>			7	Amount of Contribution (\$)	\$2,500.00
_	Deinsinal	Houston, TX 77077	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	) Familia de (Cara la structione			
8	Principal occu	pation / Job title (See Instructions	(3)	Employer (See Instructions	5)		
	Date 09/22/2024	Full name of contributor Gustafson, Robert Contributor address; City; St				Amount of Contribution (\$)	\$25.00
	Deinsinal assu	Chicago, IL 60657	, I	Franksian (Caa kashii shiana	<u></u>		
	Not Employe	pation / Job title (See Instructions ed	()	Employer (See Instructions Not Employed	5)		
	Date 08/15/2024	Full name of contributor HILLCO PAC Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor HOMEPAC of TEXAS Contributor address; City; St Austin, TX 78701		)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 10/20/2024	Full name of contributor Hayden, Anne Contributor address; City; St Concord, MA 01742	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions	()	Employer (See Instructions Not Employed	5)		
			<u> </u>				

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS	SCHEDULE A	<b>\1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1 Total pages Schedule A1: Sch: 15/51 Rpt: 18/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3 Filer ID (Ethics Commission File 00062485	ers)
4	Date 07/28/2024	<ul><li>5 Full name of contributor Hebley, Sandi</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#:ate; Zip Code		7 Amount of Contribution (\$)	\$10.00
		Dallas, TX 75230				
8	Principal occu RN, LMSW	pation / Job title (See Instructions)	) 9	Employer (See Instructions Faith Presbyterian Hosp		
	Date 08/25/2024	Full name of contributor Hebley, Sandi Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code	)	Amount of Contribution (\$)	\$10.00
	Dringinal occu	Dallas, TX 75230	<u> </u>	Employer (See Instructions		
	RN, LMSW	pation / Job title (See Instructions)	'	Faith Presbyterian Hosp		
	Date 09/29/2024	Full name of contributor Hebley, Sandi Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code	)	Amount of Contribution (\$)	\$10.00
		Dallas, TX 75230				
	Principal occu RN, LMSW	pation / Job title (See Instructions	)	Employer (See Instructions Faith Presbyterian Hosp		
	Date 10/06/2024	Full name of contributor Hebley, Sandi Contributor address; City; Sta		)	Amount of Contribution (\$)	\$10.00
	Principal occu RN, LMSW	pation / Job title (See Instructions)	)	Employer (See Instructions Faith Presbyterian Hosp		
	Date 10/27/2024	Full name of contributor Hebley, Sandi Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$10.00
	Principal occu RN, LMSW	I pation / Job title (See Instructions)	)	Employer (See Instructions Faith Presbyterian Hosp		

	MONEI	ARY POLITICAL CO	NIRIBUTION	S	SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to	complete this form	n.	1 Total pages Schedule A1: Sch: 16/51 Rpt: 19/94	
2	FILER NAME	planda (The Hanerahla)			3 Filer ID (Ethics Commission Fi	ilers)
		olando (The Honorable)			00062485	
4	Date 11/24/2024	<ul><li>5 Full name of contributor Hebley, Sandi</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: ; Zip Code	)	7 Amount of Contribution (\$)	\$10.00
		Dallas, TX 75230				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)	
	RN, LMSW			Faith Presbyterian Hosp	pice	
	Date 11/03/2024	Full name of contributor  Herrera, Mercedes  Contributor address; City; State	out-of-state PAC (ID#:;		Amount of Contribution (\$)	\$10.00
		Lindsay, CA 93247				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Not Employe	ed		Not Employed		
	Date 07/21/2024	Full name of contributor Hill, Kathy Contributor address; City; State	out-of-state PAC (ID#:; Zip Code		Amount of Contribution (\$)	\$10.00
		Houston, TX 77058				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)	
	Not Employe	ed		Not Employed		
	Date 07/21/2024	Full name of contributor Hill, Kathy Contributor address; City; State Houston, TX 77058	out-of-state PAC (ID#:; Zip Code		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)	
	Date 08/18/2024	Full name of contributor Hill, Kathy Contributor address; City; State Houston, TX 77058	out-of-state PAC (ID#:; Zip Code	)	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)	

	MONEI	ARY POLITICAL CO	ONTRIBUTION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 17/51 Rpt: 20/94	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Gutierrez, Ro	olando (The Honorable)				00062485	
4	Date 09/22/2024	<ul><li>5 Full name of contributor Hill, Kathy</li><li>6 Contributor address; City; Stat</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$10.00
		Houston, TX 77058	o, 2p 0000				
8		pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Not Employe	d 		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/21/2024	Hillhouse, Tizzy					\$5.00
		Contributor address; City; Stat	e; Zip Code				
		Alvin, TX 77511					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/25/2024	Houston Pilots PAC	_				\$1,000.00
		Contributor address; City; Stat	e; Zip Code				
		Houston TV 77526					
	Drincinal occu	Houston, TX 77536 pation / Job title (See Instructions)	1	Employer (See Instructions	) 		
	r micipai occu	pation 7 300 title (See manuctions)		Employer (See manuchons	)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/13/2024	Howard Energy Partners P		,		(+)	\$2,000.00
		Contributor address; City; Stat					
			·				
		San Antonio, TX 78256					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Data	Full constant of controller to the				Assessment of Occapillations (d)	
	Date 09/01/2024	Full name of contributor  Jackson, David	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	09/01/2024	Contributor address; City; Stat	ro: Zin Codo				Ψ23.00
		Contributor address, City, Stat	e, zip Code				
		Cary, NC 27519					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Not Employe	d		Not Employed			

	MONEI	ARY POLITICAL CO	NIRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 18/51 Rpt: 21/94	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Gutierrez, Ro	olando (The Honorable)				00062485	
4	Date 10/20/2024	<ul><li>5 Full name of contributor</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78258					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Not employe			Not employed			
	Date 10/20/2024	Full name of contributor  Kendelbacher, Thomas  Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
		Seabrook, TX 77586					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Software Eng	gineer		Airbus US Space & Defe	ens	e, Inc.	
	Date 09/29/2024	Full name of contributor  Kenny, Michael  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Houston, TX 77041					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>.                                    </u>		
	Not Employe			Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/26/2024	Kickapoo Traditional Tribe of Contributor address; City; State; Eagle Pass, TX 78852	Texas				\$15,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/28/2024	Full name of contributor  Klitenick, Dr Michael  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$18.00
	Delia sia 1	Key West, FL 33040	1	Furthern (Co. 1			
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	·)		

	MONET	ARY POLITICAL (	CONTRIBUTION	NS			SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains hov	v to complete this for	rm.		1	Total pages Schedule A1: Sch: 19/51 Rpt: 22/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)				3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 07/28/2024	<ul><li>5 Full name of contributor Koutsky, Barbara</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#: tate; Zip Code			7	Amount of Contribution (\$)	\$5.00
8	Dringing aggr	Woodridge, IL 60517	2)	) Emr	oloyer (See Instructions	<u>,,</u>		
0	Not Employe	pation / Job title (See Instructionsed	5)		Employed	>)		
	Date 08/25/2024	Full name of contributor Koutsky, Barbara Contributor address; City; S	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$5.00
	Dringing! aggs	Woodridge, IL 60517	2)		Nover (Can Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructionsed	5)		oloyer (See Instructions Employed	o)		
	Date 09/29/2024	Full name of contributor Koutsky, Barbara Contributor address; City; S	out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$5.00
		Woodridge, IL 60517						
	Principal occu Not Employe	pation / Job title (See Instructionsed	5)		oloyer (See Instructions Employed	5)		
	Date 10/27/2024	Full name of contributor Koutsky, Barbara Contributor address; City; S Woodridge, IL 60517	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)		oloyer (See Instructions Employed	5)		
	Date 12/01/2024	Full name of contributor Koutsky, Barbara Contributor address; City; S Woodridge, IL 60517	out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)		oloyer (See Instructions Employed	5)		
			,					

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 20/51 Rpt: 23/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	r Filers)
4	Date 08/04/2024	Kraus, Mary	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
_	Dringing! aggs	San Antonio, TX 78212	lo.	Employer (Coo Instructions			
8	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	)		
	Date 09/01/2024	Full name of contributor o o Kravetz, Carol Contributor address; City; State; Z		)		Amount of Contribution (\$)	\$5.00
	Principal occur	Santa Fe, NM 87506 pation / Job title (See Instructions)		Employer (See Instructions			
	Not Employe			Not Employed	')		
	Date 09/01/2024	Full name of contributor o o Kravetz, Carol Contributor address; City; State; Z	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Santa Fe, NM 87506					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/29/2024	Full name of contributor of contributor of contributor address; City; State; Z  Santa Fe, NM 87506	ut-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	i)		
	Date 10/27/2024	Full name of contributor of contributor of contributor address; City; State; Z	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	i)		
			l				

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to com	plete this forr	n.	1	Total pages Schedule A1: Sch: 21/51 Rpt: 24/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 10/06/2024	Krupa, Borys	-state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Unionville, CT 06085 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
-	Retired	,		Not Employed	,		
	Date 08/11/2024	Full name of contributor out-of- LYON, WILLIAM  Contributor address; City; State; Zip C	-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Helotes, TX 78023					
	Principal occu Cyber	pation / Job title (See Instructions)		Employer (See Instructions USAF	)		
	Date 08/25/2024	Full name of contributor out-of- LaVelle, Elizabeth  Contributor address; City; State; Zip C	state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Baldwin, WI 54002					
	Principal occu nurse	pation / Job title (See Instructions)		Employer (See Instructions self-employed	i)		
	Date 09/29/2024	Laux, Lucinda	state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 08/19/2024	Full name of contributor out-of- Lewis, Ron (Mr.)  Contributor address; City; State; Zip C	state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self	i)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete this 1	or	m.	1	Total pages Schedule A1: Sch: 22/51 Rpt: 25/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 09/22/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Lilly, Lynne</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu Not Employe	Arlington, VA 22205 pation / Job title (See Instructions)	9	Employer (See Instructions Not Employed	<u> </u> s)		
	Date 10/06/2024	Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
	Principal occu Resident Phy	El Paso, TX 79912 pation / Job title (See Instructions) ysician		Employer (See Instructions	<u> </u> s)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Linebarger Goggan Blair & Sampson LLP Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78760 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 09/29/2024	Full name of contributor out-of-state PAC (ID#:_Liska, Collum Contributor address; City; State; Zip Code Olympia, WA 98501		)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>I</u> S)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:_Lloyd Gosselink Rochelle and T Contributor address; City; State; Zip Code  Austin, TX 78701			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			•				

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDULI	<b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 23/51 Rpt: 26/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Gutierrez, Ro	olando (The Honorable) ·				00062485	
4	Date 10/20/2024	Full name of contributor     Logan, Robert      Contributor address; City; Si	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Carmel Hamlet, NY 1051:		Employer (See Instructions	(3)		
0	Not Employe		(*)	Not Employed	>)		
	Date 12/08/2024	Full name of contributor Lopez, Joe Contributor address; City; S	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$25.00
	Dringing con	Kyle, TX 78640	<u> </u>	Employer (See Instructions	<u>'</u>		
	Not Employe	pation / Job title (See Instructionsed	)	Employer (See Instructions Not Employed	>)		
	Date 10/06/2024	Full name of contributor Louie, Edmund Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		San Francisco, CA 94121					
	Principal occu Not Employe	Pation / Job title (See Instructionsed	5)	Employer (See Instructions Not Employed	5)		
	Date 09/22/2024	Full name of contributor M Trinidad, Jesus  Contributor address; City; S  Seguin, TX 78155	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)	Employer (See Instructions Not Employed	5)		
	Date 09/29/2024	Full name of contributor  MONDRAGON, CARLOS  Contributor address; City; Si  Euless, TX 76039			•	Amount of Contribution (\$)	\$10.00
	Principal occu Truck driver	pation / Job title (See Instructions	s)	Employer (See Instructions Self	s)		

	MONET	ARY POLITICAL CONTRIBUT	IOI	IS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete thi	s for	m.	1	Total pages Schedule A1: Sch: 24/51 Rpt: 27/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 10/20/2024	<ul> <li>Full name of contributor  out-of-state PAC (II Madej, Chet</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Beachwood, OH 44122 pation / Job title (See Instructions)	9	Employer (See Instructions	<u></u>		
	Not Employe			Not Employed	-,		
	Date 07/07/2024	Full name of contributor out-of-state PAC (II Martines, Linda  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
	Dringing conu	Charlestown, WV 25414		Employer (See Instructions	<u>''</u>		
	Not Employe	pation / Job title (See Instructions)		Not Employed	o)		
	Date 08/04/2024	Full name of contributor out-of-state PAC (II Martines, Linda Contributor address; City; State; Zip Code	D#:	)		Amount of Contribution (\$)	\$10.00
		Charlestown, WV 25414					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
	Date 09/08/2024	Full name of contributor out-of-state PAC (II Martines, Linda  Contributor address; City; State; Zip Code  Charlestown, WV 25414			•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/06/2024	Full name of contributor out-of-state PAC (II Martines, Linda  Contributor address; City; State; Zip Code  Charlestown, WV 25414	<b>D</b> #:		•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	<b>--</b>	-					

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 25/51 Rpt: 28/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 11/03/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Charlestown, WV 25414 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>;)</u>		
Ū	Not Employe			Not Employed	,		
	Date 12/08/2024	Full name of contributor out-of-state PAC (ID#:_ Martines, Linda Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$10.00
	Delicalization	Charlestown, WV 25414		Faralas and Constructions			
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	S)		
	Date 12/08/2024	Full name of contributor out-of-state PAC (ID#:_ McCants, Blondell Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$10.00
		Hutto, TX 78634					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 09/01/2024	Full name of contributor out-of-state PAC (ID#:_ McClellan, Kelly Contributor address; City; State; Zip Code Woodland Hills, CA 91364		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 08/22/2024	Full name of contributor	000	)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDULI	<b>■ A1</b>
	The Instruc	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 26/51 Rpt: 29/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	ı Filers)
4	Date 12/08/2024	<ul> <li>Full name of contributor  out-of-star  Mendiola, Ira Jean</li> <li>Contributor address; City; State; Zip Cod</li> </ul>			7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Harlingen, TX 78552 pation / Job title (See Instructions)	lg	Employer (See Instructions	) 		
Ŭ	Not Employe		ľ	Not Employed	',		
	Date 09/08/2024	Mills, Ronald				Amount of Contribution (\$)	\$25.00
	D: : 1	Wake Village, TX 75501			Ĺ		
	Banker	pation / Job title (See Instructions)		Employer (See Instructions BancorpSouth	5)		
	Date 07/07/2024	Full name of contributor out-of-sta  Montano, Beth  Contributor address; City; State; Zip Cod	ate PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Waco, TX 76708					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/30/2024	Montano, Beth		)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> 5)		
	Date 08/04/2024	Full name of contributor out-of-sta  Nabors Jr, Booker  Contributor address; City; State; Zip Cod  Burlington, NJ 08016	ate PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	<b>--</b>	-					

	MONET	ARY POLITICAL (	CONTRIBUTIO	Ν	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 27/51 Rpt: 30/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)				3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 09/22/2024	<ul><li>5 Full name of contributor Nabors Jr, Booker</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Burlington, NJ 08016 pation / Job title (See Instructions	.) I	_	Employer (See Instructions	·/		
0	Not Employe		·)	ฮ	Not Employed	·)		
	Date 09/30/2024	Full name of contributor Nabors Jr, Booker  Contributor address; City; S			)		Amount of Contribution (\$)	\$10.00
		Burlington, NJ 08016						
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)		Employer (See Instructions Not Employed	5)		
	Date 09/29/2024	Full name of contributor Naramore, Deborah Contributor address; City; S	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$5.00
		Alabaster, AL 35007	<del>,</del>					
	Principal occu Not Employe	pation / Job title (See Instructions ed	s) 		Employer (See Instructions Not Employed	5)		
	Date 07/07/2024	Full name of contributor O'Keefe, Linda Contributor address; City; S  New York, NY 10024	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructionsed	s)		Employer (See Instructions Not Employed	<u>(</u>		
	Date 09/29/2024	Full name of contributor O'Keefe, Linda Contributor address; City; S New York, NY 10024	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructionsed	(5)		Employer (See Instructions Not Employed	s)		
			1					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/51 Rpt: 31/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 12/01/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$2,000.00
_		Dallas, TX 75202				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 07/07/2024	Full name of contributor out-of-state PAC (ID#:_ Olivares, Juventino Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Lavon, TX 75166  pation / Job title (See Instructions)	Employer (See Instructions)	)		
	Not Employe		Not Employed			
	Date 10/06/2024	Full name of contributor out-of-state PAC (ID#:_ Palomares, Roman Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Ft Worth, TX 76120				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions) Not Employed	)		
	Date 09/29/2024	Full name of contributor out-of-state PAC (ID#:_Parra, Gloria  Contributor address; City; State; Zip Code  San Antonio, TX 78210			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions) Not Employed	)		
	Date 08/25/2024	Full name of contributor out-of-state PAC (ID#:_ Perry, Indigo Contributor address; City; State; Zip Code  Middletown, CA 95461			Amount of Contribution (\$)	\$5.00
	Principal occu Program Dire	pation / Job title (See Instructions) ector	Employer (See Instructions) Community Initiatives	)		

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 29/51 Rpt: 32/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	r Filers)
4	Date 09/22/2024	Peshette, Nancy  6 Contributor address; City; State; Zip Cod-			7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Auburn, CA 95604 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Not Employe			Not Employed			
	Date 09/22/2024	Philleo, David		)		Amount of Contribution (\$)	\$25.00
	Dringinal occur	Scotts Vale, CA 95066		Employer (See Instructions	·/_		
	Not employe	pation / Job title (See Instructions) d		Not employed	o)		
	Date 10/06/2024	Full name of contributor out-of-state  Pittenger, Mark  Contributor address; City; State; Zip Code	e	)	•	Amount of Contribution (\$)	\$25.00
		Kent, WA 98042					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/29/2024	Pugh, Don		)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 10/20/2024	Quarles, Laurie		)	•	Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
				<u>-</u>			

	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comple	ete this forn	n.	1	Total pages Schedule A1: Sch: 30/51 Rpt: 33/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 07/07/2024	RIVAS, GASTON "ELLIOT"	PAC (ID#:	)	7	Amount of Contribution (\$)	\$25.00
8	Principal occur	Springfield, MO 65810 pation / Job title (See Instructions)	9	Employer (See Instructions	7		
Ū	Not Employe			Not Employed	')		
	Date 10/06/2024	Ramsey, Alison		)		Amount of Contribution (\$)	\$10.00
	Dringing Lagor	St. Augustine, FL 32080		Frankrian (Cookarationa	_		
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 12/09/2024	Full name of contributor out-of-state  Red Rock Texas PAC  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$4,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 09/08/2024	Reichner, Brian		)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 09/22/2024	Rein, Stanley		)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	i)		
			<b>,</b>				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/51 Rpt: 34/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	n Filers)
4	Date 10/06/2024	5 Full name of contributor out-of-state PAC (ID#:_Remy, Linda 6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$25.00
_	Delicalis al access	Belvedere, CA 94920	10. 5			
8	Principal occu Research	pation / Job title (See Instructions)	9 Employer (See Instructions) UCSF	)		
	Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:_ Richardson Democrats  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occu	Richardson, TX 75080  pation / Job title (See Instructions)	Employer (See Instructions	)		
	T Tillelpai occa	pation 7 oob title (oce instructions)	Employer (See Instructions	,		
	Date 07/14/2024	Full name of contributor out-of-state PAC (ID#:_ Rivers, Constance Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Galveston, TX 77550				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	)		
	Date 08/18/2024	Full name of contributor out-of-state PAC (ID#:_ Rivers, Constance Contributor address; City; State; Zip Code Galveston, TX 77550			Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	)		
	Date 09/15/2024	Full name of contributor out-of-state PAC (ID#:_Rivers, Constance  Contributor address; City; State; Zip Code  Galveston, TX 77550			Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 32/51 Rpt: 35/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 08/21/2024	<ul><li>5 Full name of contributor Rodriguez, Marc</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$2,000.00
_		Austin, TX 78701	10		<u></u>		
8		pation / Job title (See Instructions) Relations Consultant	9	Employer (See Instructions The Offices of Marc A. F		driguez	
	Date 07/21/2024	Full name of contributor Roman, Ivan Contributor address; City; Sta		)		Amount of Contribution (\$)	\$10.00
	Principal occu	Albuquerque, NM 87106 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Teacher	,		APS			
	Date 10/20/2024	Full name of contributor Rosenberg, Beth Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Somerville, MA 02143					
	Principal occu Professor	pation / Job title (See Instructions		Employer (See Instructions Tufts University	5)		
	Date 09/22/2024	Full name of contributor Rosenblum, Ronald Contributor address; City; Sta			•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions ed		Employer (See Instructions Not Employed	5)		
	Date 09/25/2024	Full name of contributor Rydman, John Contributor address; City; Sta Houston, TX 77007	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Spec's	s)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 33/51 Rpt: 36/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 10/15/2024	<ul><li>5 Full name of contributor</li><li>San Antonio Apartment A</li><li>6 Contributor address; City; St</li></ul>			7	Amount of Contribution (\$)	\$2,500.00
		San Antonio, TX 78249					
8	Principal occu	pation / Job title (See Instructions	)	9 Employer (See Instructions	s)		
	Date 12/06/2024	Full name of contributor San Antonio Professional Contributor address; City; St		)	•	Amount of Contribution (\$)	\$2,624.00
	Principal occu	San Antonio, TX 78201 pation / Job title (See Instructions	)	Employer (See Instructions	<u> </u> s)		
	Date 10/13/2024	Full name of contributor Sanders, Nancy Contributor address; City; St Dallas, TX 75229	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Not Employe	pation / Job title (See Instructions	)	Employer (See Instructions Not Employed	<u> </u> s)		
	Date 12/08/2024	Full name of contributor Sanders, Nancy P Contributor address; City; St Dallas, TX 75229				Amount of Contribution (\$)	\$2,000.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	5)		
	Date 09/08/2024	Full name of contributor Scheffer, Michael Contributor address; City; St Portland, OR 97206	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	5)		

	MONEI	ARY POLITICAL (		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 34/51 Rpt: 37/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		olando (The Honorable)	_		L	00062485	
4	Date 08/18/2024	<ul><li>5 Full name of contributor</li><li>Schill, Brian</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$10.00
•	Principal occur	San Antonio, TX 78231 pation / Job title (See Instructions	a I	Employer (See Instructions			
0	Not Employe		·)	Not Employed	o)		
	Date 09/08/2024	Full name of contributor Schneller, Kathy Contributor address; City; S	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$5.00
		Portland, OR 97223			Ĺ		
	Principal occu contractor	pation / Job title (See Instructions	;) 	Employer (See Instructions self	s)		
	Date 10/20/2024	Full name of contributor Schroeck, Pamela Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$15.00
		Poolville, TX 76487					
	Principal occu Not Employe	pation / Job title (See Instructions	5)	Employer (See Instructions Not Employed	5)		
					_	Associated Contribution (A)	
	Date 07/14/2024	Full name of contributor Schwartz, Gary Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
		North Bend, WA 98045					
	Principal occu Not employe	pation / Job title (See Instructions d	5)	Employer (See Instructions Not employed	s)		
	Date 08/04/2024	Full name of contributor out-of-state PAC (ID#:)  Schwartz, Gary  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00	
		North Bend, WA 98045					
	Principal occu Not employe	pation / Job title (See Instructions d	s) 	Employer (See Instructions Not employed	s) 		

	MONET	ARY POLITICAL CONTR		E <b>A1</b>			
	The Instruc	ction Guide explains how to comp	olete this forr	n.	1	Total pages Schedule A1: Sch: 35/51 Rpt: 38/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	r Filers)
4	Date 08/11/2024	Schwartz, Gary	tate PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
8	Principal occur	North Bend, WA 98045	اه	Employer (See Instructions	·/-		
0	Not employe	pation / Job title (See Instructions) d	9	Not employed	)		
	Date 09/01/2024	Full name of contributor out-of-st Schwartz, Gary  Contributor address; City; State; Zip Cod		)		Amount of Contribution (\$)	\$10.00
	Delicalization	North Bend, WA 98045		Faralessa (Cook landoustica)	<u></u>		
	Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed	5)		
	Date 09/15/2024	Full name of contributor out-of-st Schwartz, Gary Contributor address; City; State; Zip Cod	tate PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		North Bend, WA 98045					
	Principal occu Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed	5)		
	Date 09/29/2024	Schwartz, Gary		)		Amount of Contribution (\$)	\$10.00
	Principal occu Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed	5)		
	Date 10/13/2024	Schwartz, Gary		)		Amount of Contribution (\$)	\$10.00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		
			'				

	MONET	ARY POLITICAL CONTRIBU		SCHEDULI	SCHEDULE A1		
	The Instruc	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 36/51 Rpt: 39/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	ı Filers)
4	Date 11/03/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$10.00
_	Delicational	North Bend, WA 98045	la la	Family or (Co. Instruction			
8	Not employe	pation / Job title (See Instructions) d	9	Employer (See Instructions Not employed	5)		
	Date 11/10/2024	Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	North Bend, WA 98045 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Not employe	d		Not employed			
	Date 09/22/2024	Full name of contributor out-of-state PA Sexton, Joe Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Fort Worth, TX 76177					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 10/20/2024	Full name of contributor out-of-state PA Shear, Linda Contributor address; City; State; Zip Code Florham Park, NJ 07932		)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/29/2024	Full name of contributor out-of-state PA Shisler, Michael Contributor address; City; State; Zip Code Port Republic, MD 20676	AC (ID#:		•	Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
			,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 37/51 Rpt: 40/94	
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 12/11/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78701  upation / Job title (See Instructions)	9 Employer (See Instructions			
_	Fillicipal occu	pation / 300 title (3ee instructions)	5 Employer (See Instructions	<i>,</i>		
	Date 10/06/2024	Full name of contributor out-of-state PAC (ID#:_ Snouffer, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Long Grove, IL 60047  upation / Job title (See Instructions)	Employer (See Instructions	)		
	Not Employe		Not Employed	,		
	Date 10/20/2024	Full name of contributor out-of-state PAC (ID#:_ Snouffer, Michael Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Long Grove, IL 60047				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions  Not Employed	)		
	Date 09/08/2024	Full name of contributor out-of-state PAC (ID#:_ Sokulski, Phil Contributor address; City; State; Zip Code  Porter, TX 77365	)		Amount of Contribution (\$)	\$100.00
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions AMST	)		
	Date 09/29/2024	Full name of contributor out-of-state PAC (ID#:_ Sperling, Harry Contributor address; City; State; Zip Code Hollywood, FL 33021	)		Amount of Contribution (\$)	\$5.00
	Principal occu Not employe	pation / Job title (See Instructions)	Employer (See Instructions Not employed	)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUI	LE <b>A1</b>		
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 38/51 Rpt: 41/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 07/21/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Kennesaw, GA 30144 pation / Job title (See Instructions)	T <sub>a</sub>	Employer (See Instructions	<u>''</u>		
0	Attorney	pation / 300 title (3ee instructions)		Lockheed Martin	·)		
	Date 07/21/2024	Full name of contributor out-of-state PAC (ID#: Stand, Eric  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
	Principal occu	Goldens Bridge, NY 10526 pation / Job title (See Instructions)	_	Employer (See Instructions	;) 		
	Not Employe			Not Employed	"		
	Date 11/18/2024	Full name of contributor  out-of-state PAC (ID#: TBA Bank 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	s)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#: TREPAC/Texas Association of Realtors PAC Contributor address; City; State; Zip Code  Austin, TX 78768-2246				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/15/2024	Full name of contributor out-of-state PAC (ID#: TX Chiropractic Association PAC Contributor address; City; State; Zip Code  Austin, TX 78701				Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 39/51 Rpt: 42/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	Filers)
4	Date 10/06/2024	<ul><li>5 Full name of contributor</li></ul>	out-of-state PAC (ID#:ate; Zip Code	)	7	Amount of Contribution (\$)	\$4.00
_	Delicalization	Salem, OR 97317	la la	Faralassa (Ossalastassáis as	<u></u>		
8	Not Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions Not Employed	5)		
	Date 10/13/2024	Full name of contributor Talley, Roger Contributor address; City; Sta				Amount of Contribution (\$)	\$5.00
	Dringing age	Salem, OR 97317		Employer (Coo Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	»)		
	Date 07/14/2024	Full name of contributor Taylor, Antoinette Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code	)		Amount of Contribution (\$)	\$5.00
		Houston, TX 77006					
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		
	Date 08/11/2024	Full name of contributor Taylor, Antoinette Contributor address; City; Sta Houston, TX 77006				Amount of Contribution (\$)	\$5.00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		
	Date 09/15/2024	Full name of contributor Taylor, Antoinette Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	s)		
			·				

	MONET	ARY POLITICAL CO		SCHEDUI	E A1		
	The Instruc	ction Guide explains how to	complete this form	1.	1	Total pages Schedule A1: Sch: 40/51 Rpt: 43/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 10/13/2024	Taylor, Antoinette	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$5.00
8	Dringing! goog	Houston, TX 77006 pation / Job title (See Instructions)	10	Employer (See Instructions			
0	Not employe			Not employed	,		
	Date 11/10/2024	Full name of contributor  Taylor, Antoinette  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu	Houston, TX 77006 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Not employe			Not employed	,		
	Date 12/15/2024	Full name of contributor  Taylor, Antoinette  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Houston, TX 77006					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	)		
	Date 11/14/2024	Full name of contributor Tenet Healthcare Corp. PAC Contributor address; City; State; Dallas, TX 75202	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 11/26/2024	Full name of contributor  Texas Apartment Association  Contributor address; City; State;  Austin, TX 78701				Amount of Contribution (\$)	\$3,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 41/51 Rpt: 44/94		
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)	
4	Date 10/05/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas Association of Pawn Brokers PAC  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$1,000.00	
_		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)			
	Date 12/02/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Beverage Alliance Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Building Branch AGC PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	Austin, TX 78701	Employer (See Instructions				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 10/08/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dairymen PAC Contributor address; City; State; Zip Code  Austin, TX 78711			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dental Associaiton 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	)			

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 42/51 Rpt: 45/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 11/25/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$5,000.00
_	Deignigal	Austin, TX 78703	2. Facility on (Con Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/11/2024	Full name of contributor	)		Amount of Contribution (\$)	\$1,500.00
	Dringinal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See mstructions)	Employer (See instructions	')		
	Date 08/20/2024	Full name of contributor out-of-state PAC (ID#: Texas Medical Association 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	5)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association 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	5)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Optometric PAC Contributor address; City; State; Zip Code  Austin, TX 78705	)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
		· ·				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 43/51 Rpt: 46/94		
2	FILER NAME Gutierrez, R	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)	
4		5 Full name of contributor		7	Amount of Contribution (\$)	\$4,000.00	
_	Deignaignal annu	Austin, TX 78701	O Familia var (Can Instructions				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)			
	Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Austin, TX 78701  pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 10/08/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 11/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 10/02/2024	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 C	SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 44/51 Rpt: 47/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 09/17/2024	<ul><li>5 Full name of contributor The Boeing Company PA</li><li>6 Contributor address; City; St</li></ul>		00142711)	7	Amount of Contribution (\$)	\$1,500.00
		Arlington, VA 22202					
8	Principal occu	pation / Job title (See Instructions	)	9 Employer (See Instructions	s)		
	Date 09/01/2024	Full name of contributor Thomas, Heather Contributor address; City; St	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Dringing agg	Santa Monica, CA 90402	\	Employer (See Instructions	<u></u>		
	actress/write	pation / Job title (See Instructions r	)	Employer (See Instructions Shiksa Enterprises	·)		
	Date 09/24/2024	Full name of contributor x out-of-state PAC (ID#: C00542365 )  4 Toyota Motor North America, Inc PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00	
		Washington, DC 20004			_		
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 11/21/2024	Full name of contributor USAA Employee PAC Contributor address; City; St San Antonio, TX 78288				Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	<u> </u> 5)		
	Date 12/12/2024	Full name of contributor  Valero Political Action Contributor address; City; St  San Antonio, TX 78269				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL C		SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 45/51 Rpt: 48/94	
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	ı Filers)
4	Date 07/21/2024	<ul><li>5 Full name of contributor</li><li>Van Buskirk, Jeanine</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#: ate; Zip Code	)	7	Amount of Contribution (\$)	\$25.00
8	Principal occur	Baton Rouge, LA 70810 pation / Job title (See Instructions	) la	Employer (See Instructions	-, 		
0	Not Employe		,	Not Employed	>)		
	Date 08/18/2024	Full name of contributor Van Buskirk, Jeanine Contributor address; City; St			•	Amount of Contribution (\$)	\$25.00
		Baton Rouge, LA 70810					
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	s)		
	Date 09/15/2024	Full name of contributor Van Buskirk, Jeanine Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$25.00
		Baton Rouge, LA 70810					
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	s)		
	Date 10/20/2024	Full name of contributor Van Buskirk, Jeanine Contributor address; City; St Baton Rouge, LA 70810	out-of-state PAC (ID#: ate; Zip Code	)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions	)	Employer (See Instructions Not Employed	5)		
	Date 11/17/2024	Full name of contributor Van Buskirk, Jeanine Contributor address; City; St Baton Rouge, LA 70810	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions	)	Employer (See Instructions Not Employed	5)		
			1				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instru	ction Guide explains how to c	omplete this forn	1.	1	Total pages Schedule A1: Sch: 46/51 Rpt: 49/94		
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)	
4	Date 11/12/2024	Vaughn, William (Mr.)	ut-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$2,000.00	
_	Dein sin al a sau	San Antonio, TX 78258	lo-	Frankrije (Ozer kretwetiere				
8	Vice Preside	pation / Job title (See Instructions) nt		Employer (See Instructions Kahlig Auto Group	)			
	Date 07/07/2024	Full name of contributor on the original of the original original of the original orig	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00	
	Principal occu	Mandeville, LA 70448 pation / Job title (See Instructions)		Employer (See Instructions	)			
	Engineer/PM PSX			,				
	Date 11/03/2024	Full name of contributor on the contributor of the contributor address; City; State; Z	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00	
		San Antonio, TX 78214						
	Principal occu Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed	)			
					Amount of Contribution (\$)	\$25.00		
			Employer (See Instructions US Navy	)				
	Date 08/25/2024	Viveiros, George	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions US Navy	)			
			•					

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 47/51 Rpt: 50/94		
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	ı Filers)	
4	Date 09/22/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Viveiros, George</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$25.00	
8	Principal occur	North Kingstown, RI 02852 pation / Job title (See Instructions)	Ια	Employer (See Instructions	;) 			
_	Retired	pation / Job title (See Instructions)		US Navy	·)			
	Date 10/20/2024	Full name of contributor out-of-state PAC (ID#:_ Viveiros, George Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00	
	Principal occu	North Kingstown, RI 02852 pation / Job title (See Instructions)		Employer (See Instructions US Navy	<u> </u> s)			
	Date 11/17/2024	Full name of contributor out-of-state PAC (ID#:_Viveiros, George  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00	
		North Kingstown, RI 02852 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)			
	Retired US Navy  Date Full name of contributor out-of-state PAC (ID#:)  07/21/2024 W. Gorfine, Paul  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00			
		Employer (See Instructions Not Employed	<u>                                      </u>					
	Date 09/22/2024	Full name of contributor out-of-state PAC (ID#:_ W. Gorfine, Paul Contributor address; City; State; Zip Code  Newton Centre, MA 02459		)		Amount of Contribution (\$)	\$10.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)			
			-					

MONETARY POLITICAL CONTRIBUTIONS						SCHEDUI	HEDULE <b>A1</b>	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 48/51 Rpt: 51/94			
2	FILER NAME Gutierrez, Ro	plando (The Honorable)			3	Filer ID (Ethics Commission 00062485	on Filers)	
4	Date 10/13/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$10.00	
8		Newton Centre, MA 02459 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)			
	Not Employed  Date Full name of contributor out-of-state PAC (ID#:)  10/27/2024 Washburn, John  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$25.00			
	Hawthorn Woods, IL 60047  Principal occupation / Job title (See Instructions)  Retired  Employer (See Instructions)  None		<u>                                      </u>					
	Date Full name of contributor out-of-state PAC (ID#:)  09/29/2024 Watts, Libby  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
		Radford, VA 24141 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)			
	Instructor  Date Full name of contributor out-of-state PAC (ID#:)  10/20/2024 Westerlund, Trina  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$5.00			
		Employer (See Instructions Not Employed	<u> </u> s)					
	Date Full name of contributor out-of-state PAC (ID#:)  08/21/2024 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	<u>(</u> S)			
			·					

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 49/51 Rpt: 52/94			
2	FILER NAME Gutierrez, Ro	olando (The Honorable)			3	Filer ID (Ethics Commission 00062485	n Filers)	
4	Date 09/29/2024	<ul><li>5 Full name of contributor Wieland, Jeanette</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$10.00	
8	Principal occu	Lake Mary, FL 32746 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>			
	Not Employe			Not Employed				
	Date Full name of contributor out-of-state PAC (ID#:)  08/18/2024 Wolf, Joel  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00			
		Fuquay-Varina, NC 27526						
	Principal occupation / Job title (See Instructions)  cpa/finance  Employer (See Instructions  Retired		i)					
	Date 12/15/2024				Amount of Contribution (\$)	\$250.00		
		Austin, TX 78731						
	Principal occu GR	pation / Job title (See Instructions)		Employer (See Instructions Valero	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  09/29/2024 Wynne, Sandra  Contributor address; City; State; Zip Code  Burlington, VT 05401			Amount of Contribution (\$)	\$250.00			
	Principal occupation / Job title (See Instructions)  Not Employed  Not Employed		Employer (See Instructions Not Employed	· )				
	Date Full name of contributor out-of-state PAC (ID#:)  10/06/2024 Wynne, Sandra  Contributor address; City; State; Zip Code  Burlington, VT 05401			Amount of Contribution (\$)	\$250.00			
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)			
			,					

	MONET	ARY POLITICAL CONTRIBUTI		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 50/51 Rpt: 53/94	
2	FILER NAME Gutierrez, Ro	olando (The Honorable)		3	Filer ID (Ethics Commission 00062485	on Filers)
4	Date 10/18/2024	<ul> <li>Full name of contributor</li></ul>	<del></del>	7	Amount of Contribution (\$)	\$2,500.00
_		San Antonio, TX 78265	I			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	IS)		
	Date 12/08/2024	Contributor address; City; State; Zip Code	<del>'</del> :)		Amount of Contribution (\$)	\$25.00
	Principal occu	San Antonio, TX 78214 pation / Job title (See Instructions)	Employer (See Instructions	ls)		
	Clerk		Emma Hotel			
	Date 09/29/2024	Full name of contributor out-of-state PAC (ID# coughlin, cecilia  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$10.00
		Dumont, NJ 07628				
	Principal occu Not Employe	pation / Job title (See Instructions) d	Employer (See Instructions Not Employed	ıs)		
	Date Full name of contributor out-of-state PAC (ID#:)  09/29/2024 guest, lisa  Contributor address; City; State; Zip Code  long beach, CA 90803			Amount of Contribution (\$)	\$25.00	
Principal occupation / Job title (See Instructions) Employer (See		Employer (See Instructions Not employed	ıs)			
	Date Full name of contributor out-of-state PAC (ID#:)  11/03/2024 kutty, rafiq  Contributor address; City; State; Zip Code  Northbrook, IL 60062			Amount of Contribution (\$)	\$25.00	
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 51/51 Rpt: 54/94	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Gutierrez, Ro	olando (The Honorable)				00062485	
4	Date 08/04/2024	<ul><li>5 Full name of contributor mendrick, ronald</li><li>6 Contributor address; City; States</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$100.00
		honeoye falls, NY 14472					
8	Principal occu consultant	pation / Job title (See Instructions)	9	Employer (See Instructions self	s) 		
	Date 09/29/2024	Full name of contributor peeters, eric  Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$10.00
		fort worth, TX 76177					
	Principal occupation / Job title (See Instructions)  Employer (See Instructions)			s)			
		Senior Manager Weaver & Tidwell LLP		_			
	Date Full name of contributor out-of-state PAC (ID#:  10/20/2024 ross, mark  Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$5.00	
		Buffalo Grove, IL 60089					
		pation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Not Employe	ed 		Not Employed			
	Date 10/13/2024				•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	San Antonio, TX 78220 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u>   S)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/06/2024 valdez, madelyn  Contributor address; City; State; Zip Code  Merced, CA 95340		•	Amount of Contribution (\$)	\$5.00		
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		

### 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/28 Rpt: 55/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	07/29/2024	1Password
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$306.62	4711 Yonge St
		Toronto Ontario M2N6K8 Canada
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office software
		Since Sollware
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/12/2024	Adobe Systems Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.94	345 Park Avenue
		San Jose, CA 95110
	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 software
		Since Sollware
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/22/2024	Adobe Systems Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.11	345 Park Avenue
		San Jose, CA 95110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Office software
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experialitate to benefit 6/61	

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 2/28 Rpt: 56/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	08/12/2024	Adobe Systems Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.94	345 Park Avenue
		San Jose, CA 95110
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Date	Davida nama
	08/21/2024	Payee name Adobe Systems Inc.
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.11	345 Park Avenue
		San Jose, CA 95110
	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 software
		Sind Solitical S
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date 09/12/2024	Payee name
		Adobe Systems Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.94	345 Park Avenue
		San Jose, CA 95110
	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 software
		Office Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising 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

	date/Officeholder/Politica ard Payment	al Committee Legal Services Salaries/ The Instruction Guide explains how to c		es/Contract Labor OTHER (enter a category not listed above)  lete this form.
1 Total pa	ges Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
1	/28 Rpt: 57/94	Gutierrez, Rolando (The Honorable)		00062485
4 Date		5 Payee name		
09/23/2	2024	Adobe Systems Inc.		
6 Amount	(\$)	7 Payee address; City; State; Zip C	ode	
	\$54.11	345 Park Avenue		
		San Jose, CA 95110		
_	POSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF IDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Office software
				Office Software
9 Complet	te ONLY if direct	Candidate/Officeholder name Office so	uaht	Office held
	ture to benefit C/O		ugni	Office field
Data		T -		
Date	1004	Payee name		
10/15/2		Adobe Systems Inc.		
Amount	• •	Payee address; City; State; Zip C	ode	
	\$64.94	345 Park Avenue		
		San Jose, CA 95110		
	POSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF IDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	.5			Check if Austin, TX, officeholder living expense
				Office software
Camanda	to ONII V if divocat	Condidate/Officeledder regree		Office held
	te <u>ONLY</u> if direct ture to benefit C/O	Candidate/Officeholder name Office so	ugnt	Office held
Date		Payee name		
10/21/2		Adobe Systems Inc.		
Amount	` '	Payee address; City; State; Zip C	ode	
	\$54.11	345 Park Avenue		
		San Jose, CA 95110		
	POSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF IDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
LAFLI	DITORL			Check if Austin, TX, officeholder living expense
				Office software
			<u> </u>	- <del> </del>
	te <u>ONLY</u> if direct ture to benefit C/O	Candidate/Officeholder name Office so	ught	Office held
5.tpo.iuii	200 20110110 070	··		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
Ļ			2
1	Total pages Schedule F1: Sch: 4/28 Rpt: 58/94	Gutierrez, Rolando (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062485
4	Date	5 Payee name	
	10/22/2024	Adobe Systems Inc.	
6	Amount (\$) \$714.32	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
ľ	OF	/ / _ ·	outside of Texas. Complete Schedule T.
	EXPENDITURE	Cinice overneda/Nental Expense	TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	11/12/2024	Adobe Systems Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$64.94	345 Park Avenue	
	DUDDOG	San Jose, CA 95110	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	puteido of Toyas, Complete Schodule T
	EXPENDITURE	T Office Overficad/Nertial Experies	outside of Texas. Complete Schedule T.  TX, officeholder living expense
		Office softwa	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/21/2024	Adobe Systems Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$54.11	345 Park Avenue	
		San Jose, CA 95110	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overficad/Nertial Expense	outside of Texas. Complete Schedule T.
	-	Check if Austin Office softwa	TX, officeholder living expense
		Onice soliwa	I C
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Onice field

#### 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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		
1	Total pages Schedule F1: Sch: 5/28 Rpt: 59/94	2 FILER NAME Gutierrez, Rolando (The Honorable)  3 Filer ID (Ethics Commission Filers) 00062485
4	Date 12/12/2024	5 Payee name Adobe Systems Inc.
	12/12/2024	· · · · · · · · · · · · · · · · · · ·
6	Amount (\$) \$64.94	7 Payee address; City; State; Zip Code 345 Park Avenue  San Jose, CA 95110
_	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Office software
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/23/2024	Adobe Systems Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.11	345 Park Avenue
		San Jose, CA 95110
	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 software
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/11/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	1601 Trapelo Rd
		Waltham, MA 02451
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office software
	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 Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/28 Rpt: 60/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	07/22/2024	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo Rd
		Waltham, MA 02451
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 software
		Office Software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	D :	
	Date	Payee name
	08/12/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	1601 Trapelo Rd
		Waltham, MA 02451
	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 software
	Complete ONLY if direct	Condidate/Officeholder name Office pought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/20/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo Rd
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZIIDII GRZ	Check if Austin, TX, officeholder living expense
		Office software
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -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	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: 7/28 Rpt: 61/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	09/11/2024	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$117.26	1601 Trapelo Rd
		Waltham, MA 02451
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 software
		Since Software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	09/20/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.95	1601 Trapelo Rd
		Waltham, MA 02451
	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 software
		Office Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date 10/11/2024	Payee name
		Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	1601 Trapelo Rd
		Waltham, MA 02451
	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 software
		Office Software
_	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 Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 8/28 Rpt: 62/94	Gutierrez, Rolando (The Honorable)		00062485
4	Date	5 Payee name		·
	10/21/2024	Constant Contact		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$79.95	1601 Trapelo Rd		
		Waltham, MA 02451		
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.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Office software
_			<u> </u>	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıght	Office held
	Date	Payee name		
	11/12/2024	Constant Contact		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$117.26	1601 Trapelo Rd		
		Waltham, MA 02451		
	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 software
				Office Software
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht	Office held
	expenditure to benefit C/OI		igiit	Office field
	Data	Pour comme		
	Date	Payee name		
	11/20/2024	Constant Contact		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$79.95	1601 Trapelo Rd		
		Waltham, MA 02451		
	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 software
	Complete ONLY if direct	Candidate/Officeholder name Office sou	L ıght	Office held
	expenditure to benefit C/OI		9.10	SSS Nota
_				

### 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 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: 9/28 Rpt: 63/94	Gutierrez, Rolando (The Honorable) 00062485	
4	Date	5 Payee name	_
l	12/11/2024	Constant Contact	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$117.26	1601 Trapelo Rd	
l			
l		Waltham, MA 02451	
8	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.	
l	LAFENDITORE	Check if Austin, TX, officeholder living expense	
l		Office software	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
"	expenditure to benefit C/OI		
⊨	Data		_
l	Date 12/20/2024	Payee name  Constant Contact	
┡			_
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$79.95	1601 Trapelo Rd	
l		M/ HI MA 00454	
L		Waltham, MA 02451	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
l		Office software	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI		
	Date	Payee name	
l	09/03/2024	El Herradero De Jalisco	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$286.86	224 W Main St	
l			
		Uvalde, TX 78801	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
l		Check if Austin, TX, officeholder living expense  Meeting to discuss officeholder issues	
		moduling to anodade official footies	
$\vdash$	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 Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer 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: 10/28 Rpt: 64/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	07/11/2024	FormKeep
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
		Suite 708
		San Francisco, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Office software
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/12/2024	FormKeep
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
		Suite 708
		San Francisco, CA 94025
	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 software
		Office Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davisa sama
	09/11/2024	Payee name FormKeep
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.50	1050 North Point Street
		Suite 708
		San Francisco, CA 94025
	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 software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense

**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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services 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: 11/28 Rpt: 65/94 Gutierrez, Rolando (The Honorable) 00062485 4 Date Payee name 10/11/2024 FormKeep 6 Amount (\$) Payee address; City; State; Zip Code \$19.50 1050 North Point Street Suite 708 San Francisco, CA 94025 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. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office software Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/12/2024 FormKeep Amount (\$) Payee address; City; State; Zip Code \$19.50 1050 North Point Street Suite 708 San Francisco, CA 94025 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office software Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/11/2024 FormKeep Amount (\$) Payee address: City; State; Zip Code \$19.50 1050 North Point Street Suite 708 San Francisco, CA 94025 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office software Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 12/28 Rpt: 66/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	07/10/2024	GM Financial
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.32	P.O. Box 78143
		Phoenix, AZ 85062
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Expense La Check if Austin, TX, officeholder living expense  Campaign vehicle
		Campaign veinois
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
_	Date	Davis same
	07/22/2024	Payee name GM Financial
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,489.50	P.O. Box 78143
		Phoenix, AZ 85062
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense
		Campaigh veriloid
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davis same
	08/26/2024	Payee name GM Financial
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,489.50	P.O. Box 78143
		Phoenix, AZ 85062
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Expense Campaign vehicle
	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 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: 13/28 Rpt: 67/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	10/22/2024	GM Financial
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,514.40	P.O. Box 78143
		Phoenix, AZ 85062
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Expense Check if Austin, TX, officeholder living expense
		Campaign vehicle
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/09/2024	GoDaddy.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$70.32	14455 N. Hayden Rd
		Scottsdale , AZ 85260
	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 Officeholder website hosting
		Officeriolder website floating
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	Daniel and a second
	Date 07/16/2024	Payee name CoDoddy com
		GoDaddy.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.31	14455 N. Hayden Rd
		Scottsdale , AZ 85260
	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
		Website hosting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>

### SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide exp		Vages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Commission File	ers)
_	Sch: 14/28 Rpt: 68/94		- Rolando (The Honorabl	e)				00062485	( 1 11 11 11 11 11 11 11 11 11 11 11 11	-,
4	Date	5 Payee name								
	08/16/2024	GoDaddy.c	om							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$21.31	14455 N. H	ayden Rd							
		Scottsdale	, AZ 85260							
8	PURPOSE OF	(a) Category (S	ee Categories listed at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Expense			_		de of Texas. Comp officeholder living		
						Officeholder \			ехрепзе	
								30.10 1.00til.1g		
9	Complete ONLY if direct		iceholder name	Office sou	l ıght			Office he	ld	
	expenditure to benefit C/OI	7								
	Date	Payee name								
	09/16/2024	GoDaddy.c	om							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$21.31	14455 N. H	ayden Rd							
		Scottsdale	, AZ 85260		•					
	PURPOSE OF	(a) Category (S	ee Categories listed at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Expense			<b>=</b>		de of Texas. Comp officeholder living		
						Officeholder \			ехрепзе	
						Omoonoidor i		Joile Hooting		
	Complete ONLY if direct		iceholder name	Office sou	<u>l</u> ıght			Office he	ld	
	expenditure to benefit C/OI	<b>-</b>								
	Date	Payee name								
	09/25/2024	GoDaddy.c	om							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$88.68	14455 N. H	ayden Rd							
		Scottsdale	, AZ 85260							
	PURPOSE OF	l .	ee Categories listed at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Expense			ш		de of Texas. Comp officeholder living		
						Officeholder v			схрензе	
	Complete ONLY if direct	L Candidate/Off	iceholder name	Office sou	l laht			Office he	ld	
	expenditure to benefit C/O			300 000	9			200 110	-	
l										

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made

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	l Committee Legal Services Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
ᆫ		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 15/28 Rpt: 69/94	2 FILER NAME Gutierrez, Rolando (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062485
Ŀ	·		
4	Date	5 Payee name	
l	07/02/2024	Google LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$96.92	1600 Amphitheatre Pkwy	
l	400.02	2000 / 11.10.11.10.11.10.11	
		Mountain View, CA 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF		el outside of Texas. Complete Schedule T.
l	EXPENDITURE		in, TX, officeholder living expense
l		Office softw	are
9	Complete ONII V if direct	Candidate/Officeholder name Office sought	Office hold
ľ	Complete ONLY if direct expenditure to benefit C/OI		Office held
	Date	Payee name	
	07/02/2024	Google LLC	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$230.26		
	Φ230.20	1600 Amphitheatre Pkwy	
		Mountain View, CA 94043	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		el outside of Texas. Complete Schedule T.
	EXPENDITURE		in, TX, officeholder living expense
		Office softw	are
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
L			
	Date	Payee name	
	08/02/2024	Google LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$129.98	1600 Amphitheatre Pkwy	
		,	
		M	
		Mountain View, CA 94043	
١	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overficad/Nertial Expense	el outside of Texas. Complete Schedule T.
	EXPENDITORE		in, TX, officeholder living expense
1		Office softw	are
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ĺ	expenditure to benefit C/O		
$\vdash$			
ı			

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
_		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 16/28 Rpt: 70/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
L	08/02/2024	Google LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$26.72	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
8	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 software
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/03/2024	Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$92.10	1600 Amphitheatre Pkwy
		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  Office software
		Office Software
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$	Date	Payros namo
	10/02/2024	Payee name Google LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$92.10	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	<b></b>	Check if Austin, TX, officeholder living expense
		Office software
	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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services  The Instruction Guide exp	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
_	T-t-1 C-1 1 - 54	_	<u> </u>		piete tino iorini	_	Ell- ID	(Ethion Commission Eilens)
1	Total pages Schedule F1: Sch: 17/28 Rpt: 71/94	2	Gutierrez, Rolando (The Honorable)	e)		3	Filer ID 00062485	(Ethics Commission Filers)
4	Date	5	Payee name			<u> </u>		
	10/04/2024		Google LLC					
6	Amount (\$) \$92.10	7	Payee address; City; 1600 Amphitheatre Pkwy  Mountain View, CA 94043	State; Zip Cod	e			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of to Office Overhead/Rental Expense	his schedule)	ш	, TX,	de of Texas. Comp	
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name	Office soug	ht		Office he	eld
	Date		Payee name					
	12/02/2024		Google LLC					
	Amount (\$)		Payee address; City;	State; Zip Cod	е			
	\$92.10		1600 Amphitheatre Pkwy  Mountain View, CA 94043					
_	PURPOSE	(2)		10	h) Description			
	OF EXPENDITURE	(a)	Category (See Categories listed at the top of to Office Overhead/Rental Expense	his schedule)	ш	, TX,	de of Texas. Comp	
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name	Office soug	ht		Office he	eld
	Date 08/02/2024		Payee name Hill Country Springs					
	Amount (\$) \$12.98		Payee address; City; 10019 S IH-35 Frontage Rd	State; Zip Cod	е			
L			Austin, TX 78747					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of to Office Overhead/Rental Expense	his schedule)	ш	, TX,	de of Texas. Comp	
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name	Office soug	ht		Office he	eld
<b>-</b>	rms provided by Tayas F	+b:-	o Commission	nice etata ty us				Version V// 1 0 5dd2ace2

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 18/28 Rpt: 72/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	09/23/2024	North Texas Tollway Authority
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.00	P.O. Box 260928
		Plano, TX 75026
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  Tolling fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
	Date	Payee name
	10/21/2024	North Texas Tollway Authority
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	P.O. Box 260928
		Plano, TX 75026
	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  Tolling fees
		Tolling lees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/22/2024	RMA Toll Processing
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.54	P.O. Box 734182
		Dallas, TX 75373
	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.
		Check if Austin, TX, officeholder living expense
		Tolling fees
	Operation ONE VIII II	Orandidate (Office leaded as a sure
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

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

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

Fees
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	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 19/28 Rpt: 73/94	Gutierrez, Rolando (The Honorable) 00062485		
4	Date	5 Payee name		
	09/18/2024	RMA Toll Processing		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$20.77	P.O. Box 734182		
		Dallas, TX 75373		
8	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.		
		Check if Austin, TX, officeholder living expense  Tolling fees		
		Tolling lees		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
5	expenditure to benefit C/O			
_	Date	Payee name		
	09/18/2024	RMA Toll Processing		
		-		
	Amount (\$) \$6.49	Payee address; City; State; Zip Code P.O. Box 734182		
	Φυ.+3	P.O. BOX 734102		
		Dallas, TX 75373		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxes, Complete Schedule T		
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
Tolling fee				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	H		
Т	Date	Payee name		
	11/15/2024	RMA Toll Processing		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$16.67	P.O. Box 734182		
		Dallas, TX 75373		
	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.		
	EXPLINDITORL	Check if Austin, TX, officeholder living expense		
		Tolling fees		
	Commission ONLL V if direct	Organization (Office helder neares Office equipht		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

1g 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

	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: 20/28 Rpt: 74/94	Gutierrez, Rolando (The Honorable) 00062485				
4	Date	5 Payee name				
	07/03/2024	Restream				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$19.00	515 Congress Ave				
		Austin, TX 78701				
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 software				
		Office Software				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
ľ	Complete ONLY if direct expenditure to benefit C/OI					
┡	· 					
	Date	Payee name				
	08/05/2024	Restream				
	Amount (\$)	Payee address; City; State; Zip Code				
\$19.00 515 Congress Ave						
		Austin, TX 78701				
	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 software				
L	Operation ONLY if discont	Open Fields (Office health and an annual to the control of the con				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
┕	·					
	Date	Payee name				
L	09/03/2024	Restream				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$19.00	515 Congress Ave				
		Austin, TX 78701				
	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 software				
<u> </u>	Commission ON II V 15 allians	Condidate (Office helder name				
1	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
L						
1						
L						

#### 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	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: 21/28 Rpt: 75/94	Gutierrez, Rolando (The Honorable) 00062485				
4	Date	5 Payee name				
	10/03/2024	Restream				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$19.00	515 Congress Ave				
		Austin, TX 78701				
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 software				
		Office Software				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
ľ	expenditure to benefit C/OI					
⊨	Data					
	Date	Payee name				
L	11/04/2024	Restream				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$19.00 515 Congress Ave					
		Austin, TX 78701				
	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 software				
		Office Software				
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
⊨	Date					
	Date	Payee name				
	12/03/2024	Restream				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$19.00	515 Congress Ave				
		Austin, TX 78701				
	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 software				
		Office Software				
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·				
$\vdash$						

## 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: 22/28 Rpt: 76/94	Gutierrez, Rolando (The Honorable) 00062485				
4	Date	5 Payee name				
	07/08/2024	Spectrum				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$160.83	3151 SE Military Dr				
		San Antonio, TX 78223				
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 utilities				
		Office diffices				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
9	Complete ONLY if direct expenditure to benefit C/OI					
	·					
	Date	Payee name				
	08/07/2024	Spectrum				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$160.83	3151 SE Military Dr				
		San Antonio, TX 78223				
	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 utilities						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·				
-	Date	Payee name				
	09/09/2024	Payee name Spectrum				
		·				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$160.83	3151 SE Military Dr				
		San Antonio, TX 78223				
	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 utilities				
		Office duffices				
_	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	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: 23/28 Rpt: 77/94	Gutierrez, Rolando (The Honorable) 00062485				
4	Date	5 Payee name				
	10/08/2024	Spectrum				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$160.83	3151 SE Military Dr				
		San Antonio, TX 78223				
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 utilities				
		Office utilities				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
ľ	expenditure to benefit C/O					
$\vdash$	Date	Payee name				
	11/08/2024	Spectrum				
_	Amount (\$)	Payee address; City; State; Zip Code				
	\$160.83	3151 SE Military Dr				
	Ψ100.03	5151 SE Williamy Di				
		San Antonio, TX 78223				
	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 utilities					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
	Date	Payee name				
	12/09/2024	Spectrum				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$160.83	3151 SE Military Dr				
		San Antonio, TX 78223				
	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 utilities				
		Office duffices				
_	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

	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: 24/28 Rpt: 78/94	Gutierrez, Rolando (The Honorable) 00062485				
4	Date	5 Payee name				
	07/01/2024	Squarespace				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$24.52	459 Broadway				
		New York , NY 10013				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Officeholder website hosting				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	1				
	Date	Payee name				
	07/10/2024	Squarespace				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$35.18	459 Broadway				
		New York , NY 10013				
	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 Officeholder website hosting				
		Ciliberiolder Website Hesting				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI					
	Date	Payee name				
	08/12/2024	Squarespace				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$35.18	459 Broadway				
		New York , NY 10013				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
		Officeholder website				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					

## SCHEDULE F1

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

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

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

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 25/28 Rpt: 79/94	Gutierrez, Rolando (The Honorable) 00062485				
4	Date	5 Payee name				
	08/29/2024	Squarespace				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$24.52	459 Broadway				
		New York , NY 10013				
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.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Officeholder website hosting				
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				
	09/10/2024	Squarespace				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$35.18	459 Broadway				
		New York , NY 10013				
	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		Officeholder website hosting				
l						
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI					
-	Date	Payee name				
	09/30/2024	Squarespace				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$26.65	459 Broadway				
		New York , NY 10013				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Office Overhead/Rental Expense  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Officeholder website hosting				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	experience to beliefit 6/01	·				

#### 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	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: 26/28 Rpt: 80/94	Gutierrez, Rolando (The Honorable) 00062485
4	Date	5 Payee name
	10/10/2024	Squarespace
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.18	459 Broadway
		New York , NY 10013
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 Officeholder website hosting
		Officeriolder Website Hosting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	10/29/2024	Squarespace
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$26.65	459 Broadway
	Ψ20.03	455 Bloadway
		Now York NV 10012
L		New York , NY 10013
	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 software
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/12/2024	Squarespace
H	Amount (\$)	Payee address; City; State; Zip Code
	\$35.18	459 Broadway
	,,,,,,	
		New York , NY 10013
H	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
		Officeholder website hosting
L		
1	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

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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	omplete this	form.			
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)		
Sch: 27/28 Rpt: 81/94	Gutierrez, Rolando (The Honorable)		00062485			
4 Date	5 Payee name		<u> </u>			
11/29/2024	Squarespace					
6 Amount (\$)	7 Payee address; City; State; Zip C	ode				
\$26.65						
	-					
	New York , NY 10013					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descr	intion			
OF	Office Overhead/Rental Expense		eck if travel outside of Texas. Comple	ete Schedule T.		
EXPENDITURE	production and produc		eck if Austin, TX, officeholder living e	xpense		
		Office	eholder website hosting			
		1				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office so OH	ught	Office held	d		
Date	Payee name					
12/10/2024	Squarespace					
Amount (\$)	Payee address; City; State; Zip C	ode				
\$35.18	459 Broadway					
	New York , NY 10013					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descr	•			
OF EXPENDITURE	Office Overhead/Rental Expense		eck if travel outside of Texas. Comple			
Check if Austin, TX, officeholder living expense  Officeholder website hosting				xperise		
	Officeriolide website floating					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/C		J				
Date	Payee name					
12/30/2024	Squarespace					
Amount (\$)	Payee address; City; State; Zip C	ode				
\$26.65	1 .					
	New York , NY 10013					
PURPOSE		(b) Descr	intion			
OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense	l <u>—</u>	eck if travel outside of Texas. Comple	ete Schedule T.		
EXPENDITURE			eck if Austin, TX, officeholder living e	xpense		
		Office	eholder website hosting			
		1				
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office so	ught	Office held	d		
oxponditure to benefit G/C						

## 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 complete this form.	
1	Total pages Schedule F1: Sch: 28/28 Rpt: 82/94	2 FILER NAME Gutierrez, Rolando (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062485
4	Date 07/22/2024	5 Payee name TXTag	
6	Amount (\$) \$110.27	7 Payee address; City; State; Zip Code 12719 Burnet Road  Austin, TX 78727	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 11/15/2024	Payee name TXTag	
	Amount (\$) \$18.12	Payee address; City; State; Zip Code 12719 Burnet Road  Austin, TX 78727	
	PURPOSE OF EXPENDITURE	Haver in District	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought H	Office held

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	Schedule F4: 2 FILER NAME			3 Filer ID (Ethic	3 Filer ID (Ethics Commission Filers)			
	Sch: 1/12 Rpt: 83/94	Gutierrez, Rolando (The Honorable)			00062485				
4	CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED	4			
	ISSUER	America	n Express		DITURES ED TO A CREDIT	<b> \$</b>			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid			
		\$3,667.04	08/01/2024						
7	PAYEE	(a) Payee name	•	(b) Payee a	ıddress;	City,	State,	Zip Code	
		NGPVAN, Inc.		1445 New	York Ave. NW				
L				<u> </u>	on, DC 20005				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript					
	X Political	Advertising Expense	of this serieutie)	Fundraisir	ng software				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	xpenditure to benefit C/OH								
PAYMENT		(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid			
		\$45.00	08/24/2024						
	PAYEE	(a) Payee name		(b) Payee address; City, State, Zip (			Zip Code		
		San Telmo Argentia	an	7718 McF	herson Rd #8				
				Laredo, T	X 78045				
	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting to discuss officeholder issues					
	X Political	T doubeverage Expen	nsc						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	[	Check if Austin, TX,	, officeholder living expense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	xpenditure to benefit C/OH		T	T					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid			
		\$41.58	08/25/2024						
	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code	
		□ Mai-al		104 Babc	ock Rd				
		El Maizal		Suite 101					
L				San Antor	nio, TX 78201				
	PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)		of this cohodule)	(b) Description					
	EXPENDITURE	Food/Beverage Expe		Meeting to	discuss officeh	older issues			
	X Political								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	xpenditure to benefit C/OH								

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission File				sion Filers)
	Sch: 2/12 Rpt: 84/94	Gutierrez, Rolando	00062485					
4	CREDIT CARD ISSUER		ncial institution revious	EXPENI	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
		\$78.90	10/11/2024					
7	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
		Buc-ee's		2760 I-35	;			
L					unfels, TX 78130			
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this cabady (a)	(b) Descrip				
	EXPENDITURE	Transportation Equip		Fuel expe	ense			
	X Political	Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	•	Candidate/Officeholder	name Office	e sought		Office held		
-	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
		\$75.00	10/13/2024					
Г	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
		Bistro 31		87 Highla	and Park			
				Dallas, TX	X 75205			
Г	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Descrip	otion			
	EXPENDITURE			Fuel expe	enses			
	X Political							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office held			
_	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
		\$3,667.04	09/01/2024					
H	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
				1445 New York Ave. NW				
		NGPVAN, Inc.						
				Washingt	on, DC 20005			
	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Fundraising software				
	X Political							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
6	expenditure to benefit C/OH							

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instr	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics C	Commissi	ion Filers)	
Sch: 3/12 Rpt: 85/94	Gutierrez, Rolando	(The Honorable)		00062485			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$3,667.04	07/01/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	NGPVAN, Inc.		1445 New York Ave. NW				
			Washington, DC 20005				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
X Political	Advertising Expense	or this scriedule)	Fundraising software				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense	е		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$3,667.04	08/01/2024					
PAYEE (a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	NGPVAN, Inc.		1445 New York Ave. NW				
			Washington, DC 20005				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE  X Political	(See Categories listed at the top Advertising Expense	of this schedule)	Fundraising software				
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense	e		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$3,667.04	10/01/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			1445 New York Ave. NW				
	NGPVAN, Inc.						
			Washington, DC 20005				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top)	of this sobodule)	(b) Description				
X Political	Advertising Expense	or this scriedule)	Fundraising software				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense	9		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Sch: 4/12 Rpt: 86/94	Gutierrez, Rolando	(The Honorable)		00062485					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid					
	\$3,667.04	11/01/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	NGPVAN, Inc.		1445 New York Ave. NW						
			Washington, DC 20005						
8 PURPOSE OF	(a) Category	of this colored (Is)	(b) Description						
EXPENDITURE (See Categories listed at the top of this schedule)  Advertising Expense  Fundraising software  Fundraising software			Fundraising software						
X Political	J								
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, o			officeholder living expe	nse				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid					
	\$3,667.04	12/01/2024							
PAYEE	(a) Payee name	L	(b) Payee address;	City,	State,	Zip Code			
	NGPVAN, Inc.		1445 New York Ave. NW						
			Washington, DC 20005						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Fundraising software						
X Political	Advertising Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid					
	\$150.00	08/22/2024							
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code			
			17803 La Cantera Terrace	e					
	Uni'Ko Japanese H	ouse	1101						
			San Antonio, TX 78256						
PURPOSE OF	(a) Category (See Categories listed at the top	of this cabadula)	(b) Description						
EXPENDITURE	Food/Beverage Exper	,	Meeting to discuss officeh	older issues					
X Political									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this form		(		,
1 Total pages Schedule F4:	2 FILER NAME			3	Filer ID (Ethic	s Commiss	sion Filers)
Sch: 5/12 Rpt: 87/94	Gutierrez, Rolando	(The Honorable)		oc	0062485		
4 CREDIT CARD ISSUER		ncial institution revious	tion  5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	Card Issuer Pa	aid		
	\$76.68	09/07/2024					
7 PAYEE	(a) Payee name  Circle K/San Antoni	io	(b) Payee address; 3939 CALLAGHA		City,	State,	Zip Code
			San Antonio, TX				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
<u></u>	Transportation Equipr		Fuel expenses				
X Political	Expense						
Non-Political	(c) Great in italian statement in the st				eholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	C	Office held		
expenditure to benefit C/OH	(a) Amazunt Chavarad	(h) Data of Chause	(a) Data(a) Gradit (	Cand Inc. on Da	.:		
PAYMENT	(a) Amount Charged \$65.00	(b) Date of Charge 09/11/2024	(c) Date(s) Credit C	Jard Issuer Pa	aid		
PAYEE	(a) Payee name		(b) Payee address;	; (	City,	State,	Zip Code
	Water Street Oyste	r Bar	309 N Water St				
			Corpus Christi, T	TX 78401			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE  X Political	(See Categories listed at the top Food/Beverage Expe		Meeting to discuss officeholder issues				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check	if Austin, TX, offic	eholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	C	Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$76.02	(b) Date of Charge 09/14/2024	(c) Date(s) Credit C	Card Issuer Pa	aid		
PAYEE	(a) Payee name	I	(b) Payee address;	; (	City,	State,	Zip Code
			310 San Pedro A	Ave			
	QuikTrip						
			San Antonio, TX	78212			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Transportation Equipr	,	Fuel expense				
Non-Political	<del>                                     </del>	of Texas. Complete Schedule T.	Check	r if Austin, TX, offic	eholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	<u> </u>	e sought		Office held		

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 6/12 Rpt: 88/94	Gutierrez, Rolando	(The Honorable)			00062485		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	Paid		
		\$47.00	09/14/2024					
7	PAYEE	(a) Payee name  JW Marriott Austin		(b) Payee 110 E. 2r		City,	State,	Zip Code
				Austin, T				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descrip Meeting t	otion to discuss officeh	older issues		
	X Political							
L	Non-Political	· · · —	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 _	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
۲	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	· Paid		
	TAIMENI	\$439.11	09/15/2024	(c) Daic(s)	Cicuit Card 133uci	T did		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Fairmont Austin		101 Red	River St			
L				Austin, T	X 78701			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Lodging	otion			
	X Political							
	Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	Paid		
		\$111.01	09/30/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Sushi Zushi		1611 W 5	5th St			
L				Austin, T	X 78703			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Descrip Meeting t	otion to discuss officeh	older issues		
	X Political	Food/Beverage Expe	1120					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	<del></del>	Office held		
е	expenditure to benefit C/OH							
l								

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete th	nis form.		,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 7/12 Rpt: 89/94	Gutierrez, Rolando	(The Honorable)			00062485		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$1,000.00	10/03/2024					
7 PAYEE	(a) Payee name  Morgan LaMantia C	Campaign	(b) Payee a 1324 E Ma	adison	City,	State,	Zip Code
			<u> </u>	e, TX 78520			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript				
	Contributions/Donatio	Campaign contribution					
X Political	Candidate/Officeholde	er/Political Committee					
Non-Political				Check if Austin, TX,	officeholder living ex	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH		T	1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$69.68	09/02/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Uncle's Store		2411 US-90				
			Alpine, TX	79830			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Transportation Equipr		Fuel expe	nses			
X Political	Expense	Hent And Neiated					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$124.00	10/11/2024					
PAYEE	(a) Payee name	l	(b) Payee a	ddress;	City,	State,	Zip Code
			1530 Mair	ı St			
	CBD Provisions						
			Dallas, TX	75201			
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper	•	Meeting to	discuss officeh	older issues		
X Political	. Sour Borolago Expoi						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
	1						

# SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Candidate/Officeholder/Politica			alaries/Wages/Contr		THER (enter a categor	y not listed a	bove)
	The Inst	ruction Guide explains ho	w to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 8/12 Rpt: 90/94	Gutierrez, Rolando	(The Honorable)			00062485		
4 CREDIT CARD	Name of final	ncial institution		F UNITEMIZED	1.		
ISSUER	see p	revious	EXPEND	ITURES D TO A CREDIT	<sub>-</sub>  \$		
			CARD	D TO A CILEDIT	'		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	er Paid		
	\$44.38	10/11/2024					
	455						
7 PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
			1321 Com	merce St			
	The Adolphus						
			Dallas, TX	75202			
8 PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE 	(See Categories listed at the top Food/Beverage Expe	,	Meeting to	discuss officel	holder issues		
X Political	· · · · · · · · · · · · · · · · · · ·						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offi	ce sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	er Paid		
	\$1,579.20	10/13/2024					
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	The Westin Dallas Downtown		1220 Elm St				
	The Westin Bailas	Downtown					
	(a) Oatawari		Dallas, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti Lodging	on			
	Travel Out of District	,	Louging				
X Political			_				
Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offi	ce sought		Office held		
	(a) Amount Charged	(h) Data of Chargo	(a) Data(a) (	Credit Card Issue	ar Doid		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Dale(s) C	Credit Card Issue	ri Palu		
	\$182.41	10/12/2024					
PAYEE	(a) Payee name		(b) Payee ac	Hdrass:	City,	State,	Zip Code
TAILL	(a) Fayee name			id Park Village	City,	State,	Zip Code
	The Honor Bar		25 Highlan	iu Faik Village			
			Dallas, TX	75205			
PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top		, ,	discuss officel	holder issues		
X Political	Food/Beverage Expe	nse					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TV	, officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder		ce sought	_ Check ii Austili, TX	Office held		
expenditure to benefit C/OH					233 11014		
·	I						

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 9/12 Rpt: 91/94	Gutierrez, Rolando	(The Honorable)			00062485		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 08/21/2024	(c) Date(s)	Credit Card Issue	er Paid		
7	PAYEE	(a) Payee name Perlas Seafood		(b) Payee 1400 S C Austin, T	Congress	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip		holder issues		
	Non-Political	(*) <b>–</b>	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH	( ) )	[ (1) D ( ) (0)	100000	0 1: 0 11	5		
	PAYMENT	(a) Amount Charged \$90.87	(b) Date of Charge 08/23/2024	(c) Date(s)	Credit Card Issue	er Paid		
	PAYEE	(a) Payee name Circle K		(b) Payee 4340 Ih 3	5 South	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Descrip		J		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$179.01	(b) Date of Charge 09/07/2024	(c) Date(s)	Credit Card Issue	er Paid		
	PAYEE	(a) Payee name Paesano's			address; esanos Pkwy enio, TX 78231	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political Non-Political	(a) Category (See Categories listed at the top Food/Beverage Experior  (c) Check if travel outside	*	(b) Descrip Meeting	to discuss officel	holder issues	ense	
	Complete ONLY if direct	Candidate/Officeholder	·	e sought	L CHECK II Austili, 1A	Office held	C113C	
е	xpenditure to benefit C/OH			- 200giii				

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Co	mmission Filers)	
Sch: 10/12 Rpt: 92/94	Gutierrez, Rolando	(The Honorable)		00062485		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$150.00	09/10/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, S	tate, Zip Cod	el
	Pappasito's Cantina	a	10501 I-10 W			
			San Antonio, TX 78230			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	h -   -		
X Political	Food/Beverage Expe		Meeting to discuss office	noider issues		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH		-				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$89.60	09/11/2024				
PAYEE	PAYEE (a) Payee name		(b) Payee address;	City, S	tate, Zip Cod	le
	Shell Service Static	on	10537 N, TX-359			
			Mathis , TX 78368			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE    X   Political	(See Categories listed at the top Transportation Equipr		Fuel expense			
Non-Political	Expense  (c) Check if travel outside	of Texas. Complete Schedule T.	Chook if Auctin TV	, officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held		
expenditure to benefit C/OH	Carlaidate/Officeriolaer	name ome	5 Sought	Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		_
	\$35.00	09/14/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, S	tate, Zip Cod	le.
	(a) rayee name		110 E. 2nd Street	Oity,	tate, Zip cou	•
	JW Marriott Austin		110 L. Zha Sirect			
			Austin, TX 78701			
PURPOSE OF	(a) Category		(b) Description			_
EXPENDITURE	(See Categories listed at the top	•	Meeting to discuss officel	holder issues		
X Political	Food/Beverage Expe	115 <del>C</del>				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense		_
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

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

Candidate/Officeholder/Politica	-			THER (enter a category	not listed at	oove)	
		ruction Guide explains how	to complete this form.	1			
1 Total pages Schedule F4:				3 Filer ID (Ethics	s Commiss	sion Filers)	
Sch: 11/12 Rpt: 93/94	Gutierrez, Rolando	(The Honorable)		00062485			
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED				
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT	.  \$			
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$70.87	09/28/2024					
	Ψ10.01	00/20/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			310 San Pedro Ave	- 9,	,		
	QuikTrip		010 0411 0410 7 110				
			San Antonio, TX 78212				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Fuel expense				
X Political	Transportation Equipr	ment And Related					
	Expense		<u> </u>				
Non-Political		of Texas. Complete Schedule T.		officeholder living expe	nse		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH			1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$150.00	10/07/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Caban Casinahan		4331 McCullough Ave				
	Sabor Cocinabar						
			San Antonio, TX 78212				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting to discuss officer	nolder issues			
X Political	T 000/Deverage Exper	1130					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$530.00	10/11/2024					
	4000.00	10/11/2021					
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code	
			15900 La Cantera Pkwy	- 9,	,		
	Perry's Steakhouse	& Grille					
			San Antonio, TX 78256				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Meeting to discuss officer	nolder issues			
X Political	Food/Beverage Expe	nse	<u> </u>				
I <b>=</b>	() <b>[</b>		<u> </u>				
Non-Political	· · · ·	of Texas. Complete Schedule T.		officeholder living expe	nse		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							

# SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards	rage Expense     s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego		
		The Insti	uction Guide explains ho	ow to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	ion Filers)
	Sch: 12/12 Rpt: 94/94	Gutierrez, Rolando	(The Honorable)		00062485		
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITE			
	ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CARD			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	ard Issuer Paid		
		\$1,025.00	10/14/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
				P.O. Box 78143			
		GM Financial					
L				Phoenix, AZ 8506	2		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Transportation Equipr		Campaign vehicle	!		
	X Political	Expense					
L	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T		Austin, TX, officeholder living exp	ense	
	Complete ONLY if direct conditure to benefit C/OH	Candidate/Officeholder	name On	ice sought	Office held		