## CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

#### FORM COR-C/OH

1	Filer ID (Ethi	cs Commission Filers)	2 Total pages filed:	OFFICE LIGE ONLY
	00042411	ics Commission File(s)	74	OFFICE USE ONLY
3	CANDIDATE /	MS / MRS / MR	FIRST MI	Date Received  ELECTRONICALLY FILED
Ü	OFFICEHOLDER	The Honorable	Jose	01/16/2025
	NAME	NICKNAME	LAST SUFFIX	
		IVICITIVALVIL	Menendez	
4	ORIGINAL	X January 15	Runoff Other (specify)	Date Hand-delivered or Date Postmarked
	REPORT TYPE	July 15	Exceeded modified reporting limit	Receipt # Amount
		30th day before election	15th day after campaign treasurer	<u> </u>
		8th day before election	appointment (officeholder only) Final Report (Attach C/OH-FR)	Date Processed
_	ODIOINAL DEDIOD			
5	ORIGINAL PERIOD COVERED	Month Day Yea 07/01/2024	r Month Day Year THROUGH 12/31/2024	Date Imaged
6	EXPLANATION OF C		12/31/2024	
	Contributors were add	ded to the report. At the tin	e of filing the report, I did not have all the contributor in	formation with me to complete the report
	without getting errors.	The difference in the repo	rt is the added contributors with their information.	
	AFFIDAVIT			
′	AFFIDAVIT			erjury, that this corrected report is true
			and correct.	
			Check the box next to any and all app	olicable statements:
			X Semiannual reports: I swea	r, or affirm that the original report
			was made in good faith and with	hout an intent to mislead or to
			misrepresent the information co	лиатеd in the report.
				firm, that I am filing this corrected
			report not later than the 14th bu that the report as originally filed	isiness day after the date I learned
			swear, or affirm, that any error of	or omission in the report as originally
			filed was made in good faith.	
			The Honorable	Jose Menendez
			Signature of Candi	idate or Officeholder
	AFFIX NOTARY ST	AMP / SEAL ABOVE		
	Sworn to and subse	rihed hefore me, by the sai	., ti	his the day
			fy which, witness my hand and seal of office.	uay
	OT	, 20 . to cer		
	01	, 20, to cer	.,,,	
	01	, 20, to cer		
		, 20, to cer	Printed name of officer administering oath	Title of officer administering oath

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

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comple		1 Filer ID (Ethics Commit 00042411		2 Total pages	filed: 74
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Jose			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME			CHEEN	01/16/2025	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	NICKNAME	LAST Menendez		SUFFIX	01/10/2023	
		Merieridez				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 100833					
ADDRESS					Receipt #	Amount
Change of Address	San Antonio, TX 78201				Data Barrand	
					Date Processed	
					Date Imaged	
					Date illiaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER		Estefana		1411		
NAME	IVIS.	LStelalia				
		LAST		SUFFIX		
		Martinez				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO I	BOX PLEASE);	APT	r / SUITE #; CITY	; ST	ATE; ZIP CODE
ADDRESS	114 Olga Dr.					
(Residence or Business)						
	San Antonio, TX 78237					
	ADEA 00DE - BUOM		VTENGION			
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION			
PHONE	(210) 432-2619					
9 DEDODT						
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after c	ampaign treasurer
		J John day belore		L	appointment (of	
	July 15	8th day before 6	election	Exceeded modified	Final Report (At	tach C/OH-FR)
		_		reporting limit	<u> </u>	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	IROUGH	12/31/20	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
			eneral	Special	_	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	T (if known)	
III OFFICE	State Senator District 26 B	ovar		State Senator D		
	State Seriator District 20 Br	CAU		State Seriator E	JISTIICT 20	
		GO T	O PAGE 2			
I						

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

3 of 74

13 C / OH NAME	B C / OH NAME Menendez, Jose (The Honorable)  14 Filer ID 00042411					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus may have been made without equired to report this information	the candidate's or offic	eholder's l	knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ИЕ			
	GENERAL					
		COMMITTEE ADD	DRESS			
	SPECIFIC					
		COMMITTEE CAN	MPAIGN TREASURER NAME			
		COMMITTEE CAM	IPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED BOLITICAL C	ONTRIBUTIONS (OTHER THA	N DI EDGES I OANS	-	
TOTALS			CONTRIBUTIONS MADE ELE		\$	0.00
	\$	130,242.21				
EXPENDITURE TOTALS						
	4. TOTAL POLITIC	CAL EXPENDITURE	ES		\$	95,857.53
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	1,067,227.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
			I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
				orable Jose Menend Candidate or Officeho		
			Signature of	Candidate of Officerit	Jiuei	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		day
of	, 20, to co	ertify which, witness	my hand and seal of office.			
Signature of offi	cer administering	Printed name	of officer administering	Title of office	er administ	ering oath

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

## FORM C/OH COVER SHEET PG 3

4 of 74

				4 01 74
<b>18</b> FILER NAME Menendez, J	lose (The Honorable)	<b>19</b> Filer ID 00042411	(Ethics Co	ommission Filers)
20 SCHEDULE S NAME OF SCI			SUB	TOTAL AMOUNT
1. X S	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	129,974.00
2. X S	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	268.21
3. X S	CHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4. X S	CHEDULE E: LOANS		\$	0.00
5. X S	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	95,857.53
6. X S	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7. X S	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
8. X S	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X S	CHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10. S	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11. S	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS O FILER	RETURNED	\$	21,123.89
			-	

	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: 1/20 Rpt: 5/74	
2	FILER NAME Menendez,	Jose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 07/22/2024	5 Full name of contributor out-of-state PAC (ID#:_ Alcott, Tim (Mr.)  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	San Antonio, TX 78202 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	i illopai occa	pation 7 oob title (oce monucions)	2 Employer (See Managaria	,		
	Date 11/21/2024	Full name of contributor X out-of-state PAC (ID#: CALL All State PAC Contributor address; City; State; Zip Code	C00040253 )		Amount of Contribution (\$)	\$1,000.00
	Deire die alle aus	Northbrook, IL 60062	Frankrije (Contrativation)			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/21/2024	Full name of contributor out-of-state PAC (ID#:_ Anderson, Terri (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
		Coppell, TX 75019				
		pation / Job title (See Instructions) lousing Real Estate Developer	Employer (See Instructions	)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#:_ Apache Corporation PAC Contributor address; City; State; Zip Code  Houston, TX 77043	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#:_ Austin Firefighters Association PAC Contributor address; City; State; Zip Code  Austin, TX 78752	)		Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/20 Rpt: 6/74	
2	FILER NAME Menendez, J	lose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 10/26/2024	Bank of America State and			7	Amount of Contribution (\$)	\$1,500.00
_	Deire sin al access	Wilmington, DE 19808	1.	O Faralas a (O a la destruction	$\overline{\Gamma}$		
8	Principal occu	pation / Job title (See Instructions)	,	9 Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor Beef PAC Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		Amarillo , TX 79106					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/22/2024	Full name of contributor Brimhall, Pegy (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		San Antonio, TX 78210					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 07/17/2024	Full name of contributor Bronfman, Jeremy (Mr.) Contributor address; City; Sta		)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/30/2024	Full name of contributor Burney, Frank (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Martin & Drought	5)		
				<b>3</b> -			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/20 Rpt: 7/74	
2	FILER NAME Menendez, 3	ose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	<ul> <li>Full name of contributor</li></ul>	000002089)	7	Amount of Contribution (\$)	\$1,000.00
		Washington, DC 20001				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 08/27/2024	Full name of contributor out-of-state PAC (ID#:_ Cavender, Richard (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing aggr	San Antonio, TX 78257 pation / Job title (See Instructions)	Employer (Coo Instructions			
	Auto dealer	oalion / Job title (See instructions)	Employer (See Instructions Cavender Auto	)		
	Date 11/05/2024	Full name of contributor x out-of-state PAC (ID#: C00348938 )  Chubb Group Holdings Inc. PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		PHILADELPHIA, IN 19106				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ Cinco Developers LP  Contributor address; City; State; Zip Code  San Antonio, TX 78227	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/05/2024	Full name of contributor X out-of-state PAC (ID#: C Citigroup Inc. PAC Contributor address; City; State; Zip Code  Washington , DC 20004	000039305		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
		I				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/20 Rpt: 8/74	
2	FILER NAME Menendez, 3	ose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 07/18/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Houston, TX 77046 pation / Job title (See Instructions)	9 Employer (See Instructions	) ;)		
				,		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Dobson, Sean (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	CEO		Amherst	',		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Donovon, Rodriguez (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_EDF Action Texas PAC  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	5)		
	Date 10/26/2024	Full name of contributor	C00097568 )		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/20 Rpt: 9/74	
2	FILER NAME Menendez, J	Jose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Enchanted Rock Holdings, LLC Employee PAC</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77002				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Fernandez, Anita (Ms.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occu	San Antonio, TX 78213 pation / Job title (See Instructions)	Employer (See Instructions	:, 		
	Consultant	pation / Job title (See Instituctions)	Self employed	·)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_Foley & Lardner LLP Texas Campaign Fund Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,500.00
		Dallas, TX 75201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ Friends of San Antonio Leaders For University of Contributor address; City; State; Zip Code  San Antonio, TX 78201			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_Garcia, Kathleen (Ms.)  Contributor address; City; State; Zip Code  Georgetown, TX 78633			Amount of Contribution (\$)	\$500.00
	•	pation / Job title (See Instructions) nment Relations	Employer (See Instructions CPS Energy	5)		
			<u> </u>			

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains hov	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 6/20 Rpt: 10/74	
2	FILER NAME Menendez, J	lose (The Honorable)				3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 07/22/2024	<ul><li>5 Full name of contributor Garza, Meghan (Ms.)</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$100.00
0	Dringing oggu	San Antonio, TX 78210	<u></u>		Employer (See Instructions	,, 		
8	Owner -	pation / Job title (See Instructions	5)	9	Employer (See Instructions Rise Civic Consulting	·)		
	Date 08/28/2024	Full name of contributor Garza, Rudy (Mr.) Contributor address; City; S			)		Amount of Contribution (\$)	\$250.00
	Principal occu	San Antonio, TX 78258 pation / Job title (See Instructions	3)		Employer (See Instructions	;) 		
	i illoipai oooa	panon / cob mae (coo mondono			Employer (GGC mondoners	,,		
	Date 12/14/2024	Full name of contributor Gonzalez Contributor address; City; S			) O (Mr.)		Amount of Contribution (\$)	\$250.00
	Principal occu	San Antonio, TX 78216 pation / Job title (See Instructions	s)		Employer (See Instructions	 ;)		
	Managing Pa	artner			OCI Group			
	Date 12/12/2024	Full name of contributor Hamer, Jonathan (Mr.) Contributor address; City; S Austin, TX 78735			)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Partner	pation / Job title (See Instructions	s)		Employer (See Instructions Hometown Hero	5)		
	Date 07/25/2024	Full name of contributor Heller, David (Mr.) Contributor address; City; S Boca Raton, FL 33432	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$2,500.00
	Principal occu President &	pation / Job title (See Instructions CEO	5)		Employer (See Instructions The NRP Group	5)		

	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: 7/20 Rpt: 11/74	
2	FILER NAME Menendez,	Jose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/12/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Yoakum, TX 77995 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
•	Fillicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Holland and Knight Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Hull, Dan (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Boerne, TX 78006				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2024	Full name of contributor out-of-state PAC (ID#:_ Huth, Thomas (Mr.)  Contributor address; City; State; Zip Code  Dallas, TX 75240			Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Palladium USA	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ IBAT PAC Contributor address; City; State; Zip Code Austin, TX 78701	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 8/20 Rpt: 12/74	
2	FILER NAME Menendez, 3	lose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	<ul><li>5 Full name of contributor [IEC of Texas PAC Fund</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$750.00
0	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	l <sub>o</sub>	Employer (See Instructions			
0	Pilicipai occu	pation / Job title (See Instructions)	9	Employer (See instructions	)		
	Date 09/18/2024	Full name of contributor INDEPAC Contributor address; City; Sta		)		Amount of Contribution (\$)	\$1,500.00
		Austin, TX 78750					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/18/2024	Full name of contributor  John L. Covert, DDS  Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		San Antonio, TX 78250					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 09/12/2024	Full name of contributor  Kellum, Daniel (Mr.)  Contributor address; City; Sta  San Antonio, TX 78212		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 07/22/2024	Full name of contributor  Kilday, Les (Mr.)  Contributor address; City; Sta  Sugarland, TX 77479				Amount of Contribution (\$)	\$500.00
	Principal occu Developer	pation / Job title (See Instructions)		Employer (See Instructions Kilday Realty	5)		
			<u>'</u>				

	MONEI	ARY POLITICAL C	ONTRIBUTION	15		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 9/20 Rpt: 13/74	
2	FILER NAME Menendez,	Jose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 07/24/2024	Full name of contributor     Latsha, Jean Marie (Ms.)     Contributor address; City; Sta	out-of-state PAC (ID#: tate; Zip Code	)	7	Amount of Contribution (\$)	\$500.00
		Austin, TX 78731					
8	Principal occu Developer	upation / Job title (See Instructions)	) 9	Employer (See Instructions Pedcor Investments	s)		
	Date 09/18/2024	Full name of contributor Lazzari, Anthony (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$2,000.00
	Principal occu	San Antonio, TX 78212 upation / Job title (See Instructions)	;)	Employer (See Instructions	<u> </u> s)		
	President			AML Motors			
	Date 12/14/2024	Full name of contributor Linebarger Goggan Blair & Contributor address; City; Sta		)		Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78760					
	Principal occu	upation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor  Marathon Petroleum Corp  Contributor address; City; Sta			•	Amount of Contribution (\$)	\$2,500.00
	Principal occu	upation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Date 09/18/2024	Full name of contributor Montford, John (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu President	upation / Job title (See Instructions)	)	Employer (See Instructions JTM Consulting, LLC	<u>1</u> S)		
			-				

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete this fo	orı	m.	1	Total pages Schedule A1: Sch: 10/20 Rpt: 14/74	
2	FILER NAME Menendez, J	ose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$1,000.00
8		San Antonio, TX 78248 pation / Job title (See Instructions)	9	Employer (See Instructions Petland	 s)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ Nantucket Housing  Contributor address; City; State; Zip Code  Houston, TX 77043		)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	Date 11/05/2024	Full name of contributor	PΑ	AC .		Amount of Contribution (\$)	\$750.00
	Principal occu	Indianapolis , IN 42665 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#:_ National Association of Social Workers Texas  Contributor address; City; State; Zip Code  Austin, TX 78701				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Texas State PAC Contributor address; City; State; Zip Code Dallas, TX 75202				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
		·					

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/20 Rpt: 15/74	
2	FILER NAME Menendez, J	Jose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	<ul><li>5 Full name of contributor Pape-Dawson Engineers</li><li>6 Contributor address; City; S</li></ul>		)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	San Antonio, TX 78213 pation / Job title (See Instructions	(2)	9 Employer (See Instructions	;) 		
_	- Timolpai ooda	patient, cos tiae (eee metracioni	·1	Campioyer (Geo mondone)	"		
	Date 08/27/2024	Full name of contributor Patel, Pratik (Mr.)  Contributor address; City; S		)		Amount of Contribution (\$)	\$1,000.00
	Dringing age	San Antonio, TX 78255		Employer (Coo Instructions	<u></u>		
	Self	pation / Job title (See Instructions	5)	Employer (See Instructions REM Hospitality	5)		
	Date 07/02/2024	Full name of contributor Polk, Douglas (Mr.) Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78738 pation / Job title (See Instructions	s)	Employer (See Instructions	·)		
	Business Ow		2)	Self	"		
	Date 07/22/2024	Full name of contributor Pollack, Joel (Mr.) Contributor address; City; S San Antonio, TX 78260			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Real Estate	pation / Job title (See Instructions Developer	5)	Employer (See Instructions PMCA Partners	5)		
	Date 07/19/2024	Full name of contributor Rackleff, Neal (Mr.) Contributor address; City; S Houston, TX 77003	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions	S)	Employer (See Instructions self	5)		
			•				

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 12/20 Rpt: 16/74	
2	FILER NAME Menendez, J	lose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 08/28/2024	<ul><li>Full name of contributor Rasti, Kelly (Ms.)</li><li>Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$100.00
_	Duinning Langu	San Antonio, TX 78256	lo.	Franklavar (Caa kastrustiana			
8	Teacher	pation / Job title (See Instructions)	9	Employer (See Instructions Northside ISD	)		
	Date 09/18/2024	Full name of contributor Riegel, Julie (Ms.) Contributor address; City; Sta				Amount of Contribution (\$)	\$100.00
	Principal occu	San Antonio, TX 78256 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	•	,			,		
	Date 09/27/2024	Full name of contributor Rodrguez, Rudy (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$500.00
	Dringing! aggs	San Antonio, TX 78229		Employer (See Instructions	_		
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions R4 Strategies	')		
	Date 12/12/2024	Full name of contributor Ryan LLC PAC Contributor address; City; Sta  Dallas, TX 75240	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 07/24/2024	Full name of contributor Saar, Kathryn (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
			,				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/20 Rpt: 17/74	
2	FILER NAME Menendez, 3	lose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
0	Dringing oggu	San Antonio, TX 78249	Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ San Antonio Police Officers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Dringing agg	San Antonio, TX 78217	Employer (Coo Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ San Antonio Professional Firefighters PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,624.00
		San Antonio, TX 78201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor X out-of-state PAC (ID#: C Sentry Insurance A Mutual Co PAC Contributor address; City; State; Zip Code Stevens Point , WI 54481	00545194 )		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/21/2024	Full name of contributor 🔯 out-of-state PAC (ID#: Cartering Tenaska Employees Texas PAC Contributor address; City; State; Zip Code  Omaha, NE 68154	00479998		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>,</u>		
		l				

	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: 14/20 Rpt: 18/74	
2	FILER NAME Menendez,	Jose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 11/21/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$500.00
_		Dallas, TX 75254				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Pawn Brokers PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Crawford, TX 76638 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Building Branch AGC PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	)		
		,				
	Date 07/29/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Consumer Credit Coalition PAC  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 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dairymen PAC Contributor address; City; State; Zip Code Austin, TX 78711	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	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: 15/20 Rpt: 19/74	
2	FILER NAME Menendez,	Jose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/12/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$5,000.00
_	Daine in all a second	Austin, TX 78703				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Mortgage Bankers PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,000.00
	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Physical Therapy Assn. PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dringing! goog	Austin, TX 78701	Employer (Co.) Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Society of Architects Committee  Contributor address; City; State; Zip Code  Austin, TX 78702	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Society of Certified Public Accountants P Contributor address; City; State; Zip Code  Addison, TX 75001	AC		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	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: 16/20 Rpt: 20/74	
2	FILER NAME Menendez,	Jose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
_	Deinsinal	Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Towing & Storage Association  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Spring, TX 77386 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/12/2024	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			
	Fillicipal occu	pation / 300 title (3ee instructions)	Employer (See Instructions	<i>)</i>		
	Date 11/21/2024	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	)		
	Date 10/26/2024	Full name of contributor x out-of-state PAC (ID#: \( \text{ID} \)  The Boeing Company PAC  Contributor address; City; State; Zip Code  Arlington, VA 22202	C00142711 )		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ΟN	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 17/20 Rpt: 21/74	
2	FILER NAME Menendez, J	ose (The Honorable)			3	Filer ID (Ethics Commission 00042411	n Filers)
4	Date 08/28/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$1,000.00
_	Daine in a la casa	Boerne, TX 78015	10	Faralassa (Ossalastasstissa			
8	VP	pation / Job title (See Instructions)	9	Employer (See Instructions Ancira	5)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Torres, Kari (Ms.)  Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$100.00
	Principal occu	Austin , TX 78704 pation / Job title (See Instructions)	Т	Employer (See Instructions	;) 		
	i illicipai occu	oduon 7 oob title (oee matidetions)		Employer (See instructions	"		
	Date 11/21/2024	Full name of contributor x out-of-state PAC (ID#:_ Toyota Motor North America, Inc PAC Contributor address; City; State; Zip Code	<u>C0(</u>			Amount of Contribution (\$)	\$2,000.00
	Deire sin al acces	Washington, DC 20004	_	Frankrije (Ozakastian			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ True Flavors LLC  Contributor address; City; State; Zip Code  San Antonio, TX 78204		)	•	Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u> 5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Trueda, Jimmy (Mr.)  Contributor address; City; State; Zip Code  Helotes, TX 78023				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/20 Rpt: 22/74	
2	FILER NAME Menendez, 3	Jose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 11/05/2024	Union Pacific Corporation		vernment	7	Amount of Contribution (\$)	\$3,000.00
Ω	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	. 1	Employer (See Instructions	·/		
0	Fillicipal occu	pation / Job title (See Instructions)		employer (See Instructions	·)		
	Date 12/14/2024	Full name of contributor  Valero PAC  Contributor address; City; Sta	out-of-state PAC (ID#:_ ate; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	San Antonio, TX 78269 pation / Job title (See Instructions		Employer (See Instructions	 ;)		
	Date	Full name of contributor	out-of-state PAC (ID#:_		<u> </u>	Amount of Contribution (\$)	
	09/18/2024	Vexler , Jack (Mr.)  Contributor address; City; Sta	<u> </u>			`,	\$2,500.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Monterrey Metal Recycl		Solutions	
	Date 09/18/2024	Full name of contributor  Vexler, Mary (Ms.)  Contributor address; City; States San Antonio, TX 78212				Amount of Contribution (\$)	\$2,500.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Monterrey Metal Recycl		Solutions	
	Date 07/22/2024	Full name of contributor Walsh, Nicholas (Mr.) Contributor address; City; Sta				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how t	o complete this form	n.	1	Total pages Schedule A1: Sch: 19/20 Rpt: 23/74	
2	FILER NAME Menendez, J	lose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 08/27/2024	<ul><li>5 Full name of contributor Weaver, Rad (Mr.)</li><li>6 Contributor address; City; Stat</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$2,500.00
0	Dringing Loon	San Antonio, TX 78212	lo.	Employer (Coo Instructions			
8	Investor	pation / Job title (See Instructions)	9	Employer (See Instructions Self	)		
	Date 10/26/2024	Full name of contributor [ Weekley, Richard (Mr.) Contributor address; City; Stat		)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	1	Employer (See Instructions	)		
	Founder	panerry cos and (eee mendeners)		Weekley Properties	,		
	Date 12/12/2024	Full name of contributor [ Whipple, Maxwell (Mr.) Contributor address; City; Stat	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78215					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/22/2024	Full name of contributor Whipple, Maxwell (Mr.) Contributor address; City; Stat San Antonio, TX 78215				Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 08/27/2024	Full name of contributor Williams , Elsa (Ms.) Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
			1				

FARY POLITICAL CONTRIBU	SCHEDULE A1	
ıction Guide explains how to complete th	nis form.	1 Total pages Schedule A1: Sch: 20/20 Rpt: 24/74
Jose (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042411
<ul> <li>Full name of contributor</li></ul>	(ID#:)	7 Amount of Contribution (\$) \$2,500.00
San Antonio, TX 78265		
upation / Job title (See Instructions)	9 Employer (See Instruction	s)
	Jose (The Honorable)  5 Full name of contributor  out-of-state PAC ZACOPAC  6 Contributor address; City; State; Zip Code	Jose (The Honorable)  5 Full name of contributor

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 25/74 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Menendez, Jose (The Honorable) 00042411 \$ 0.00 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 12/03/2024 Moak Casey \$268.21 In kind for food, drinks and 7 Contributor address; City; State; Zip Code space rental for fundraising event. Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE B
pages Schedule B: L/1 Rpt: 26/74
C (Ethics Commission Filers)
0.00
nt of   9   In-kind description   (If applicable)
ı k if travel outside of Texas. Complete Schedule T

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how to	o complete this f	orm.	I	ges Schedule E: 1 Rpt: 27/74
2	FILER NAME Menendez, Jose	e (The Honorable)				(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS				\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:	)	9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address; City	y; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruc	ctions)	
14	Description of Coll	lateral		15 Check if personal fund	ds were deposited	l into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	18 Guarantor address; City	/; State;	Zip Code		
20	Principal occupation	on		21 Employer (See Instruc	ctions)	

#### SCHEDULE F1

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

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

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

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/46 Rpt: 28/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	07/02/2024	A-AAA Key Mini storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$176.00	6604 W Interstate 10
		San Antonio, TX 78201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Monthly fee for campaign storage unit
		montally loo for earnpaight elorage and
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/04/2024	A-AAA Key Mini storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$176.00	6604 W Interstate 10
		San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly rental fee for campaign storage unit
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
	Date	Power name
	10/02/2024	Payee name A-AAA Key Mini storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$176.00	6604 W Interstate 10
	ΨΞ. 0.00	
		San Antonio, TX 78201
	PURPOSE	In a second seco
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly rental fee for campaign storage unit
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services			se s/Contract Labor		OTHER (enter a	strict a category not listed above	·)
	Credit Card Payment		The Instruction Gu	ide explains how to co	omple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAM	ME				3	Filer ID	(Ethics Commission	Filers)
	Sch: 2/46 Rpt: 29/74	Menende	z, Jose (The Hono	rable)				00042411		
4	Date	5 Payee nam	ne							
	11/04/2024		ey Mini storage							
6	Amount (\$)	<b>7</b> Payee add	ress; City;	State; Zip Co	ode					
	\$176.00	6604 W Ir	nterstate 10							
		San Anto	nio, TX 78201							
8	PURPOSE	(a) 0 :			(h)	Description				
ľ	OF	Fees	(See Categories listed at th	ne top of this schedule)	(5)		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE	1 003						officeholder livin		
						Monthly renta	al fe	e on campa	aign storage unit	
9	Complete ONLY if direct		Officeholder name	Office sou	ught			Office h	eld	
	expenditure to benefit C/OI	-								
	Date	Payee nan	ne							
	12/02/2024	A-AAA Ke	ey Mini storage							
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode					
	\$176.00	6604 W Ir	nterstate 10							
		San Anto	nio, TX 78201							
	PURPOSE	(a) Category	(See Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees				_			nplete Schedule T.	
						ш		officeholder livin	aign storage unit	
						Wioritiny renta	ai ic	c for camp	aigh Storage and	
_	Complete ONLY if direct	Candidate/C	Officeholder name	Office sou	ıaht			Office h	eld	
	expenditure to benefit C/OI		moenoider riame	O	agiit			01110011	old	
_	Date	Dougo non	20							
	07/23/2024	Payee nan AT&T	ie							
			City II	Chahai Zin Ci	- d -					
	Amount (\$) \$344.12	Payee add		State; Zip Co	oue					
	Ф344.12	P.O. Box	105414							
		Auto de G								
		Atlanta, G	5A 30348							
	PURPOSE OF		(See Categories listed at th	ne top of this schedule)	(b)	Description  Chapter if travel of	outoi	do of Toyon Con	nplete Schedule T.	
	EXPENDITURE	Fees				ш		officeholder livin		
						Phone and in				
	Complete ONLY if direct	Candidate/C	Officeholder name	Office sou	ught			Office h	eld	
	expenditure to benefit C/OI				-					

#### 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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials Legal Services The Instruction Gu	•		ages.	/Contract Labor		Travel Out of D OTHER (enter	istrict a category not listed abov	/e)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 3/46 Rpt: 30/74			Jose (The Hond	orable)					00042411	, 22	-,
4	Date	5	Payee name									
	08/03/2024		AT&T									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de					
	\$176.00		P.O. Box 10									
			Atlanta, GA	30348								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Fees					<b>=</b>			nplete Schedule T.	
	ZA ZHOHOKZ							<b>—</b>		officeholder livin		
								Officenolaer/	can	npaign pho	ne and internet	
_												
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	0	office soug	ght			Office h	neld	
	experiantare to benefit Great											
	Date		Payee name									
	08/24/2024		AT&T									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$302.27		P.O. Box 10	)5414								
			Atlanta, GA			· · · · · · · · · · · · · · · · · · ·						
	PURPOSE OF	(a)		ee Categories listed at th	ne top of this sche	edule)	(b)	Description				
	EXPENDITURE		Fees					<b>=</b>		de of Texas. Cor officeholder livin	mplete Schedule T.	
								ш			ne and internet s	ervices
									J. W. I	- Para Prio		
$\vdash$	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	<u> </u>	office soug	aht			Office h	neld	
	expenditure to benefit C/OI			The state of the s	O	5000	J			200 11	- <del>-</del>	
	Date		Payee name									
	09/20/2024		AT&T									
	Amount (\$)		Payee addres	ss; City;	State:	Zip Cod	de					
	\$336.31		P.O. Box 10		-,							
	,		·· <b>-</b> ·									
			Atlanta, GA	30348			_		_			
	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Rental Exp	oense			ш			mplete Schedule T.	
								_		officeholder livin	ice / equipment.	
								Onicendiael/0	Lan	npaign uevi	ice / equipment.	
	Complete ONLY if allowed	Ļ	Condidate 10 m	achalder record		office a -	ab.			Off: !	vold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Jandidate/Offi	ceholder name	O	office soug	ynt			Office h	ieid	

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Gift/Awards/Memorials Expense Legal Services  Printing Expense Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.				Travel Out of District OTHER (enter a category not listed above)			
Ļ					Julue explains	now to cor	iihie	te this form.	_		
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
_	Sch: 4/46 Rpt: 31/74	L		Jose (The Hor	norable)					00042411	
4	Date	5	Payee name								
	09/24/2024		AT&T								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Coo	de				
	\$293.12		P.O. Box 10								
	, <del></del>										
			Atlanta, GA	30348							
8	PURPOSE	(a)		ee Categories listed a	t the ten of this cab	aodulo)	(b)	Description			
	OF	``	Fees	ee Calegories iisled a	t the top of this SCN	ieuuie)	,	_ :	outsi	de of Texas. Cor	mplete Schedule T.
	EXPENDITURE		. 000					느		officeholder livir	
								Officeholder/o	can	npaign pho	ne and internet services
9	Complete ONLY if direct		Candidate/Offi	ceholder name	(	 Office souç	ght			Office h	neld
	expenditure to benefit C/OI	Н				`	-				
	Date		Payee name								
	10/24/2024		AT&T								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Coo	de				
	\$410.37		P.O. Box 10	05414							
	¥ :=3:31		·								
			Atlanta CA	20240							
		L	Atlanta, GA	. JUJ48		-					
	PURPOSE OF	(a)	,	ee Categories listed a	t the top of this sch	nedule)	(b)	Description			andata Cabadal T
	EXPENDITURE		Fees					<b></b>		de of Texas. Cor officeholder livir	mplete Schedule T.
								ш			ne and internet services
								Chiccholdel/C	Juil	npaign pilo	ne and internet services
$\vdash$	Complete ONLY if direct	<u> </u>		ceholder name		Office soug	thr			Office h	neld
	expenditure to benefit C/OI		Janulaatt/UIII	ocholael Haille		ome sou(	yı IL			Office I	iciu
_											
	Date		Payee name								
L	12/03/2024	L	AT&T								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Coo	de				
	\$312.21		P.O. Box 10	05414							
			Atlanta, GA	30348							
	PURPOSE	(a)	Category (S	ee Categories listed a	t the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Fees			•		Check if travel of			mplete Schedule T.
	EXPENDITURE							_		officeholder livir	
								Officeholder/o	can	npaign pho	ne and internet services
	Complete ONLY if direct		Candidate/Offi	ceholder name	(	Office sou	ght			Office h	neld
	expenditure to benefit C/OI	H									

### 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)
l	Sch: 5/46 Rpt: 32/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
l	12/26/2024	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$397.36	P.O. Box 105414
l		
		Atlanta, GA 30348
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Officeholder/campaign phone and internet services
Ļ	0 1 0 0 1 1 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┡	·	
l	Date	Payee name
L	11/13/2024	Alamo Colleges Foundation
l	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	2222 N. Alamo Street
		San Antonio, TX 78215
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Sponsorship Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l		Sponsorship for a table at GED Brunch
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/16/2024	Amazon
H	Amount (\$)	Payee address; City; State; Zip Code
l	\$253.40	410 Terry Ave N
l		, and the second
		Seattle, WA 98109
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Office Overhead/Rental Expense  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Artwork for the district office
L		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to beliefit 6/01	·
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: 6/46 Rpt: 33/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/16/2024	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$47.33	410 Terry Ave N
		Seattle, WA 98109
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
		Artwork for the District office
		, and the Bistrict smooth
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/19/2024	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.31	410 Terry Ave N
		Seattle, WA 98109
	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  TV for district office
		TV for district office
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/13/2024	Bedoy's Bakery
H	Amount (\$)	Payee address; City; State; Zip Code
	\$248.40	2714 Hillcrest
		San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Cookies for district Holiday Party
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
Ī		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made 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		
_		· · · · · · · · · · · · · · · · · · ·	$\overline{}$
1	Total pages Schedule F1: Sch: 7/46 Rpt: 34/74	2 FILER NAME   3 Filer ID (Ethics Commission Filers   Menendez, Jose (The Honorable)   00042411	;)
4	Date	5 Payee name	
	08/26/2024	Bexar County Democratic Party	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	1844 Fredericksburg Rd.	
		Con Antonio TV 70004	
_	DUDDOGE	San Antonio, TX 78201	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		donation	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	09/09/2024	Bexar County Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,000.00	1844 Fredericksburg Rd.	
		San Antonio, TX 78201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Conation	
		Johnson Landson	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	н	
	Date	Payee name	
	09/26/2024	Bexar County Family Justice Center	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	126 East Nueva Street	
		San Antonio, TX 78204	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Lunch sponsor for charity golf tournament	
	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 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			ages	/Contract Labor		OTHER (enter a	category not listed abov	/e)
┰	Total pages Schedule F1:		•	÷	1	3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 8/46 Rpt: 35/74	Menendez, Jose (The Honora	able)			3	00042411	(Eurios Commissio	111 11010)
┢	Date	5 Payee name							
	09/23/2024	Biden Victory Fund							
Ļ		<u> </u>							
6	Amount (\$)	Payee address; City;	State; Zip Co	de					
	\$3,300.00	430 South Capitol Street SE							
		Washington, DC 20003							
8	PURPOSE	a) Category (See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Contributions/Donations Mad	e By				de of Texas. Comp		
	LXI LINDITORL	Candidate/Officeholder/Politic	cal Committee		_		officeholder living	expense	
					Donation to c	am	ıpaıgn		
L									
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght			Office he	ld	
	experialitate to benefit 6/01								
	Date	Payee name							
	08/26/2024	Blanco BBQ							
Г	Amount (\$)	Payee address; City;	State; Zip Co	de					
	\$500.00	13259 Blanco Road							
		San Antonio, TX 78216							
Г	PURPOSE	a) Category (See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Food/Beverage Expense	,		<u></u>		de of Texas. Comp		
	EXI ENDITORE				_		officeholder living	expense	
					Food for cons	SUU	uents		
L	2	0 111 1000 111							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	gnt			Office he	ıa	
L	<u>'</u>								
	Date	Payee name							
	12/14/2024	Capitol Gift Shop							
	Amount (\$)	Payee address; City;	State; Zip Co	de					
	\$2,165.00	1400 Congress Avenue							
		Austin, TX 78701							
Г	PURPOSE	a) Category (See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Gift/Awards/Memorials Exper			<b></b>		de of Texas. Comp		
	EXPENDITORE						officeholder living	expense	
					Ornaments fo	or c	onstituents		
ldash									
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght			Office he	ld	
L	Superioritation to beliefft 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

	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: 9/46 Rpt: 36/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	08/29/2024	Care Warriors Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	18411 Cross Praire
		San Antonio, TX 78258
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Sponsorship Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Sponsoring a hole for charity gold scramble
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	12/13/2024	Catering by Celebrations
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,955.35	3307 Hillcrest Drive
		San Antonio , TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Catering for district Holiday Party
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/16/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$699.91	5611 UTSA Boulevard
	,,,,,,	
		San Antonio, TX 78249
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gifts for staff
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services	Sala		iges	/Contract Labor		OTHER (enter	a category not listed a	above)
				The Instruction Gui	ide explains how t	to com	ple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ī					3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 10/46 Rpt: 37/74		Menendez,	Jose (The Hono	rable)					00042411		
4	Date	5	Payee name									
	07/08/2024		Costco									
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Cod	le					
	\$55.62		5611 UTSA	Boulevard								
			San Antonio	o, TX 78249								
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this schedule)	(	(b)	Description				
	OF EXPENDITURE			ion Equipment A				므			mplete Schedule T.	
	LXFLINDITORL		Expense					_		officeholder livir		
								Gas for office	enol	der/campa	ign vehicle	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Office	sougl	ht			Office h	neld	
		_										
	Date		Payee name									
	07/03/2024		Costco									
	Amount (\$)		Payee addres	ss; City;	State; Zip	Cod	le					
	\$56.71		5611 UTSA	Boulevard								
			San Antonio	o, TX 78249								
	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this schedule)	(	(b)	Description				
	OF EXPENDITURE		Travel In Dis					<b>-</b>			mplete Schedule T.	
								<b>—</b>		officeholder livir		
								Gas for office	HOI	uer/campa	ign venicie	
_	Complete ONLY if direct	<u> </u>	Candidato/Offi	ceholder name	Office	sougl	ht			Office h	old	
	expenditure to benefit C/O		Januluale/Oni	centidei name	Onice	sougi	111			Office i	iciu	
_	Date	_										
	Date		Payee name									
	07/19/2024		Costco									
	Amount (\$)		Payee addres		State; Zip	Cod	le					
	\$53.01		5611 UTSA	Boulevard								
			San Antonio	o, TX 78249								
	PURPOSE OF	(a)		ee Categories listed at the	e top of this schedule)	(	(b)	Description				
	EXPENDITURE		Travel In Di	strict						de of Texas. Coi officeholder livir	mplete Schedule T.	
								Gas for office				
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office	sougl	ht			Office h	neld	
	expenditure to benefit C/O				300	9	•			3001		
-												
l												

### SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Salaries/\	xpens Wages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a c	rict category not listed above)
1	Total pages Schedule F1:							Filer ID	(Ethics Commission Filers)
L	Sch: 11/46 Rpt: 38/74	Menendez,	Jose (The Honorable)					00042411	
4	Date	5 Payee name							
	07/30/2024	Costco							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode				
	\$35.64	5611 UTSA	A Boulevard						
		San Antoni	o, TX 78249						
8	PURPOSE	(a) Category (S	iee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In D		,		<b>-</b>		le of Texas. Comp	
						Check if Austin,  Gas for office		officeholder living	
						Gas for utilice	iiUll	uencampaig	III VEIIICIE
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	lapt			Office he	ld .
9	expenditure to benefit C/O		icendiuei name	Office SOL	agrit			Office fie	iu
	Date	Payee name							
	08/02/2024	Costco							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$32.31	5611 UTSA	A Boulevard						
		San Antoni	o, TX 78249						
	PURPOSE	(a) Category (S	see Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In D				ш		le of Texas. Comp	
						Check if Austin, Gas for office		officeholder living	
						Jas IVI VIIILE	11010	uerreampaig	III VEHICIE
_	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	l Jaht			Office he	ld .
	expenditure to benefit C/O		.coordor name	3.1100 300	-9·11			0.1100 110	• ••
H	Date	Payee name							
	09/06/2024	Costco							
_	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$54.90		A Boulevard	Siale, ZIP CC	Jue				
	φυ <b>4.</b> 90	2011 012	, boulevalu						
		San Antoni	o, TX 78249						
	PURPOSE	(a) Category (S	see Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In D	istrict			_		le of Texas. Comp officeholder living	
						Gas for office			
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	<u>l</u> ught			Office he	ld
	expenditure to benefit C/O				J				

### 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		nmittee	Legal Services			es/Contract Labor		OTHER (enter a	strict a category not listed ab	ove)
				The Instruction Gui	de explains how to d	ompl	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ī				3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 12/46 Rpt: 39/74		Menendez,	Jose (The Honor	rable)				00042411		
4	Date	5	Payee name								
	09/09/2024		Costco								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip C	Code					
	\$39.51		5611 UTSA	Boulevard							
			San Antonio	o, TX 78249							
8	PURPOSE	(a)	Category (St	ee Categories listed at the	e ton of this schedule)	(b)	Description				
	OF	` `	Travel In Dis		top of this seriedate)			outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE						<b>—</b>		officeholder livin		
							Gas for office	eho	lder/campai	gn vehicle	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Office so	ought	Ī		Office h	eld	
	experientare to benefit 6/01										
	Date		Payee name								
	10/05/2024		Costco								
	Amount (\$)		Payee addres	ss; City;	State; Zip C	Code					
	\$48.06		5611 UTSA	Boulevard							
			San Antonio	o, TX 78249							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis				<u> </u>			nplete Schedule T.	
							ш		officeholder livin		
							Gas for office	110	iuei/campai	gri veriicie	
	Complete ONLY if direct	<u> </u>	Candidata/Offi	ceholder name	Office so	u abt			Office h	old	
	expenditure to benefit C/O		Januluale/Oni	cendider name	Office Sc	Jugni	L		Office II	eiu	
_		_									
	Date		Payee name								
	10/10/2024	_	Costco								
	Amount (\$)		Payee addres	•	State; Zip C	Code					
	\$50.31		5611 UTSA	Boulevard							
			San Antonio	o, TX 78249							
	PURPOSE OF	(a)		ee Categories listed at the	e top of this schedule)	(b)	Description				
	EXPENDITURE		Travel In Di	strict			ш		de of Texas. Con officeholder livin	nplete Schedule T.	
							Gas for office				
							200 .01 011100			J. 10010	
	Complete ONLY if direct		 Candidate/Offi	ceholder name	Office so	 uaht	<u> </u>		Office h	eld	
	expenditure to benefit C/O				233 00				20011		
1											

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (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: 13/46 Rpt: 40/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/18/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.05	5611 UTSA Boulevard
		San Antonio, TX 78249
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gas for officeholder/campaign vehicle
		- Cao ioi oineanatan paigi teinate
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
J	expenditure to benefit C/O	
_	Date	Davies wares
	10/19/2024	Payee name Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	5611 UTSA Boulevard
		San Antonio, TX 78249
	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  Gas for officeholder/campaign vehicle.
		Cas for officerrotaer/campaign verticle.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
	Date	Payee name
	10/24/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.83	5611 UTSA Boulevard
		San Antonio, TX 78249
	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
		Gas for officeholder/campaign vehicle.
	Complete ONLY if direct	Constitute / Office helds years Office country
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/46 Rpt: 41/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/28/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.10	5611 UTSA Boulevard
		San Antonio, TX 78249
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  Gas for officeholder/campaign vehicle.
		Gas for officeriolaer/campaign verifice.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
	10/31/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.15	5611 UTSA Boulevard
		San Antonio, TX 78249
	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
		Gas for officeholder/campaign vehicle.
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
L		
	Date	Payee name
	11/12/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.67	5611 UTSA Boulevard
		San Antonio, TX 78249
	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
		Gas for officeholder/campaign vehicle.
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

	Credit Cara r dyment	The Instruction Guide explains how to complete this form	n.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 15/46 Rpt: 42/74	Menendez, Jose (The Honorable)	00042411
4	Date	5 Payee name	
	11/14/2024	Costco	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$46.09	5611 UTSA Boulevard	
	I		
	I	San Antonio, TX 78249	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on
	OF EXPENDITURE	Travel In District	f travel outside of Texas. Complete Schedule T.
	1	,	f Austin, TX, officeholder living expense officeholder/campaign vehicle.
	l	3.3.15.1	Sinceriolaen earnpaign vernole.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		555512
H	Date	Payee name	
	11/18/2024	Costco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$45.90	5611 UTSA Boulevard	
	Ψ 10.00	John Statistard	
	I	San Antonio, TX 78249	
_	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if	ON f travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Haver in District	f Austin, TX, officeholder living expense
	l	Gas for o	officeholder/campaign vehicle.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	11/25/2024	Costco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$39.51	5611 UTSA Boulevard	
	I		
	I	San Antonio, TX 78249	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on
	OF EXPENDITURE	Travel In District	f travel outside of Texas. Complete Schedule T.
	EA ENDITOR		f Austin, TX, officeholder living expense officeholder/campaign vehicle.
	l	Gus 101 C	JiliceHoluencampaign venicie.
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
-			

### SCHEDULE F1

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

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

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

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

	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: 16/46 Rpt: 43/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	12/03/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.11	5611 UTSA Boulevard
		San Antonio, TX 78249
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  Gas for officeholder/campaign vehicle.
		Sas for officeriolaci/campaign vehicle.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/O	
-	Date	Dougo nama
	12/14/2024	Payee name
		Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.43	5611 UTSA Boulevard
		San Antonio, TX 78249
	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  Gas for officeholder/campaign vehicle.
		Gas for officerolider/campaign vehicle.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	10/10/2024	Cruz, Pearl (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$209.43	2416 Village Walk
		Austin, TX 78744
	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  Reimbursement for office supplies, parking and lunch
		for staff.
_	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 Candidate/Officeholder/Political Commit

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	arc)
_	Sch: 17/46 Rpt: 44/74	Menendez, Jose (The Honorable)    Strict ID (Ethics Commission File)   00042411	115)
4	Date	5 Payee name	
	12/17/2024	Cruz, Pearl (Ms.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$892.41	2416 Village Walk	
		Austin, TX 78744	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	LXI LINDITORL	Check if Austin, TX, officeholder living expense	
		Campaign services	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	experiantive to benefit cros		
	Date	Payee name	
	09/04/2024	Empower House	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	200 Donaldson Avenue	
		San Antonio, TX 78201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Sponsorship Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Sponsorship of a table at the Butterfly Brunch	
		Sponsorship of a table at the Butterny Brunon	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
H	Date	Payee name	
	09/26/2024	Estrada, Eric (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	118 Oklahoma	
		San Antonio, TX 78237	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder/Political Committee	vent
		Bondaon for 200 darantes recignibula rogether c	
$\vdash$	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 Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla		xpense Vages/Co	ontract Labor this form.	Travel in Distric Travel Out of D OTHER (enter	
1	Total pages Schedule F1:					];	3 Filer ID	(Ethics Commission Filers)
L	Sch: 18/46 Rpt: 45/74	Menendez	, Jose (The Honorable)				00042411	
4	Date	5 Payee name	)					
L	08/12/2024	Event Give	S					
6	Amount (\$)	7 Payee addre	ess; City; St	ate; Zip Co	ode			
	\$319.74	11 Ewall						
		Mount Plea	asant, SC 29464					
8	PURPOSE	(a) Category (s	See Categories listed at the top of this	s schedule)	<b>(b)</b> D	escription		
	OF EXPENDITURE	Fees			[	╛	utside of Texas. Cor	
					╽╶╘	J Check if Austin, Event services	TX, officeholder livin	ng expense
					-	.veni services	,	
9	Complete ONLY if direct	Candidate/∩f	ficeholder name	Office sou	l Iaht		Office h	neld
,	expenditure to benefit C/O		neeriouer name	Office 300	igiit		Office f	iciu
	Date	Payee name						
L	10/03/2024	Fairmont H	lotel Austin					
	Amount (\$)	Payee addre	ess; City; St	ate; Zip Co	ode			
	\$629.72	101 Red R	iver Street					
		Austin, TX	78701					
	PURPOSE	(a) Category (s	See Categories listed at the top of this	s schedule)	(b) D	escription		
	OF EXPENDITURE	Hotel expe				₫	utside of Texas. Cor	
					<u> </u>	_	TX, officeholder livin	mmittee hearing in Austin
					'	iotei experise	to attenu coi	minitee nearing in Austin
$\vdash$	Complete ONLY if direct	Candidate/Off	ficeholder name	Office sou	l Iaht		Office h	neld
	expenditure to benefit C/O		noonolaar name	Onice 300	.gr		Onice	ioid
$\vdash$	Data	Deves ::						
	Date 10/28/2024	Payee name Flag World						
_				oto: 7:- C	nd c			
	Amount (\$)	Payee addre		ate; Zip Co	oae			
	\$175.00	1270 S. Ali	IEHE					
		Aurora, CC	80012					
	PURPOSE	(a) Category (s	See Categories listed at the top of this	s schedule)	<b>(b)</b> D	escription		
	OF EXPENDITURE		s/Memorials Expense		⊑		utside of Texas. Cor	•
	<b></b>					Check if Austin, Tags for cons	TX, officeholder livin	ng expense
						iago iui culis	เนนซาเเอ	
_	Complete ONLY if direct	Candidate/Off	ficeholder name	Office sou	laht Iaht		Office h	neld
	expenditure to benefit C/O		nocholder hanle	Onice Suc	igiit		Office	iciu

### 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	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/46 Rpt: 46/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/29/2024	Garcia Event Center
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$650.00	1400 Callaghan Road
		San Antonio, TX 78228
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Deposit for rental of space for District Holiday Party
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiantare to benefit or or	
	Date	Payee name
	12/10/2024	Garcia Event Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1400 Callaghan Road
		San Antonio, TX 78228
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Balance due on rental space
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	09/26/2024	Gonzales, Sergio (Mr.)
_		Payee address; City; State; Zip Code
	Amount (\$) \$165.08	6326 Spring Time
	\$105.00	oszo spring rinie
		San Antonio, TX 78249
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Reimbursement for food at Neighborhood Leaders Breakfast
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 20/46 Rpt: 47/74	Menendez, Jose (The Honorable)	00042411
4	Date	5 Payee name	•
	10/10/2024	Gonzales, Sergio (Mr.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$190.77	6326 Spring Time	
		San Antonio, TX 78249	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE		Check if Austin, TX, officeholder living expense
			Reimbursement for food at district 26 Community Gathering
_	Opening ONLY if allowed	Out lists to 10 ff as he like a reason to	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/08/2024	Green Vegetarian Cuisine	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$132.48	255 East Basse	
		San Antonio, TX 78209	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Officeholder lunch meeting with constituents
			Ç
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	4	
	Date	Payee name	
	12/19/2024	Green Vegetarian Cuisine	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$166.33	255 East Basse	
		San Antonio, TX 78209	
	PURPOSE		Description
	OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	. coanzorolago zaponeo	Check if Austin, TX, officeholder living expense
			Officeholder lunch with constituents
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Superiord to belief 0/01	•	

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (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: 21/46 Rpt: 48/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	07/29/2024	Gunn Infiniti
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,199.89	12150 IH-10 West
		San Antonio, TX 78230
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.
	EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense
		Lease on officeholder/campaign vehicle
_	Opening the ONE V if direct	Our did at 10 ff as hald a grant Office a south
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Dete	
	Date	Payee name
	08/27/2024	Gunn Infiniti
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,199.89	12150 IH-10 West
		San Antonio, TX 78230
	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 Check if Austin, TX, officeholder living expense Lease on officeholder/campaign vehicle
		Lease on omeenolaen van paign vernole
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/27/2024	Gunn Infiniti
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,199.89	12150 IH-10 West
	Ψ1,133.03	12130 H - 10 West
		San Antonio, TX 78230
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lease on officeholder/campaign vehicle
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>

### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 22/46 Rpt: 49/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/29/2024	Gunn Infiniti
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,199.89	12150 IH-10 West
		San Antonio, TX 78230
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.
	EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense
		Lease on officeholder/campaign vehicle
_	Occupation ONLY if allowed	Openhalte Office held
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/27/2024	Gunn Infiniti
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,199.89	12150 IH-10 West
		San Antonio, TX 78230
	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 Check if Austin, TX, officeholder living expense
		Lease on officeholder/campaign vehicle
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	<u> </u>	
	Date	Payee name
	12/28/2024	Gunn Infiniti
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,199.89	12150 IH-10 West
		San Antonio, TX 78230
	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 Check if Austin, TX, officeholder living expense Lease on officeholder/campaign vehicle.
		Locase on omeendacheampaign vehicle.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>

### SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/46 Rpt: 50/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	12/18/2024	Harold's Art & Framing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$883.71	2743 Roosevelt Ave.
		San Antonio, TX 78214
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Framing fee
		Training too
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/25/2024	Hispanas Unidas
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 15478
	, ,	
		San Antonio, TX 78212
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Recognition at 40th Anniversary Reunion and Conference
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
	Date	Pouso namo
	10/05/2024	Payee name Kamala Harris for President
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 86
	Ψ200.00	1.0.26% 00
		Baltimore, MD 21203
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation to campaign
	Complete ONLY if direct expenditure to benefit C/Ol	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 Committ 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		mmittee	Gift/Awards/Memorial Legal Services  The Instruction G	•		/ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed abo	ve)
1	Total pages Schedule F1:	12	THED NAME		•		•		3	Filer ID	(Ethics Commission	n Eilore)
1		ı			orabla)				3		(Ethics Commission	ni i ileisj
	Sch: 24/46 Rpt: 51/74	╙		Jose (The Hon	orable)					00042411		
4	Date	5	Payee name									
	09/19/2024		Kristian Car	ranza Campaiç	gn							
6	Amount (\$)	7	Payee addres	ss; City;	State:	; Zip Co	de					
	\$5,000.00		P.O. Box 83	1436		·						
	, , , , , , , , ,											
			Can Antonio	TV 70202								
			San Antonio	, IA 70203								
8	PURPOSE OF			e Categories listed at		edule)	(b)	Description				
	EXPENDITURE			s/Donations M				<b>=</b>			plete Schedule T.	
			Candidate/C	Officeholder/Po	litical Comm	littee		_		officeholder living	j expense	
								Donation to c	alli	ipaigri		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	(	Office sou	ght			Office he	eld	
	experialture to benefit C/Or	П										
	Date		Payee name					<del>-</del>				
	07/20/2024		Lands End									
_	Amount (\$)		Payee addres	ss; City;	State	Zip Co	de					
	\$393.88	ı	1 Lands' En		State,	, 21p 00	uc					
	φ393.00		I Lanus En	u Lane								
			Dodgeville,	WI 53595								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Office Overl	nead/Rental Ex	pense			<b>—</b>			plete Schedule T.	
	LXI LINDITORE							<b>—</b>		officeholder living	j expense	
								Office shirts for	or s	staff		
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld	
	expenditure to benefit C/O	П										
	Date		Payee name									
	12/13/2024		Little Bug Fa	ace Painting C	o.,LLC							
	Amount (\$)	⊢	Payee addres			; Zip Co	de					
	\$200.00		i ayee addies	ю, опу,	Siale,	, <u>-</u> ip C0	uC					
	ΦΖ00.00											
L		L	San Antonio	, TX 78244								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Event Expe								plete Schedule T.	
	EXPENDITORE							ш		officeholder living	•	
								Face Painting	g fo	r Holiday Pa	arty	
L		L										
	Complete ONLY if direct		Candidate/Offi	ceholder name	(	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	Н										

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - 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 Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 25/46 Rpt: 52/74 Menendez, Jose (The Honorable) 00042411 4 Date Payee name 08/28/2024 Lopez, Kevin (Mr.) 6 Amount (\$) Payee address; State; Zip Code \$904.95 835 Woodlawn Avenue San Antonio, TX 78212 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. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/06/2024 Lopez, Kevin (Mr.) Amount (\$) Payee address; City; State; Zip Code \$542.97 835 Woodlawn Avenue San Antonio, TX 78212 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/19/2024 Madonna Center, Inc Amount (\$) Payee address: City: State; Zip Code \$1,850.00 1906 Castroville Road San Antonio, TX 78237 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Sponsorship **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsorship for Madonna Center gala. 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/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 26/46 Rpt: 53/74	Menendez, Jose (The Honorable)	00042411
4	Date	5 Payee name	
l	07/27/2024	Mailchimp	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$98.07	512 Mean Street	
l			
l		Alanta, GA 30318	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF	Fees	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
l			Email service fee
L			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	'		
l	Date	Payee name	
L	08/27/2024	Mailchimp	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$98.07	512 Mean Street	
l			
		Alanta, GA 30318	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l			Email service fee
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	10/28/2024	Mailchimp	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
l	\$98.07	512 Mean Street	
l			
l		Alanta, GA 30318	
⊢	PURPOSE	i	Description
l	OF	(a) Category (See Categories listed at the top of this schedule)  Fees	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	1 000	Check if Austin, TX, officeholder living expense
			Email service fee
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experience to beliefit 6/01	•	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 27/46 Rpt: 54/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	11/27/2024	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$98.07	512 Mean Street
		Alanta, GA 30318
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Email service fee
		Littali Service lee
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	12/27/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.07	512 Mean Street
		Alanta, GA 30318
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Email service fee
		Littali Scivice lee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	<b>D</b> .	
	Date	Payee name
	09/27/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.07	512 Mean Street
		Alanta, GA 30318
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Email service fee
	Operation Of the Control of the Cont	Open Highest (Office health an arms)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

### 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 Committ

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Cabadula F1:	<u> </u>	_
_	Total pages Schedule F1: Sch: 28/46 Rpt: 55/74	2 FILER NAME Menendez, Jose (The Honorable)  3 Filer ID (Ethics Commission Filers) 00042411	
4	Date	5 Payee name	
	12/13/2024	Martinez, Veronica (Ms.)	
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 210 Audrey Lane Drive	
	φου.υυ	210 Addies Edite Brive	
		San Antonio, TX 78216	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		DJ services for district Holiday Party	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	09/03/2024	Mexican American Legal Defense and Educational Fund	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	110 Broadway	
		Suite 300	
		San Antonio, TX 78205	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Ad in gala booklet	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/17/2024	Mi Familia at the Rim	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$450.62	18403 W I-10 West	
		San Antonio, TX 78257	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Holiday staff lunch	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	onpenditure to beliefft C/OI	··	

### SCHEDULE F1

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/46 Rpt: 56/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	12/18/2024	Mi Tierra
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$843.75	218 Produce Row
		San Antonio, TX 78207
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Pan Dulce gift for Senators
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	10/21/2024	Mi Tierra
	Amount (\$)	Payee address; City; State; Zip Code
	\$22.91	218 Produce Row
		San Antonio, TX 78207
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Officeholder breakfast meeting to discuss state
		business business
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/08/2024	Office Furniture Liquidations
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,638.90	6838 Bandera Raod
		San Antonio, TX 78238
	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 furniture for district office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/46 Rpt: 57/74	Menendez, Jose (The Honorable)	00042411
4	Date	5 Payee name	•
	09/11/2024	Olmos Park Terrace Neighborhood Assoc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$100.00	233 Wildwood	
		San Antonio, TX 78212	
8	PURPOSE OF	, -	Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeriolder/Political Committee	Donation for Neighbors Together event
			Ç Ç
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	08/02/2024	Ord, Julie (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,300.00	5650 Worth Parkway	
		Apt 1425	
		San Antonio, TX 78257	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE		Check if Austin, TX, officeholder living expense
			Social Media Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	9	Cilide Held
	Date	Payee name	
	08/28/2024	Ord, Julie (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,300.00	5650 Worth Parkway	
	, ,	Apt 1425	
		San Antonio, TX 78257	
	PURPOSE		Description
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Calaires, Mages, Commune Lazer	Check if Austin, TX, officeholder living expense
			Social Media Services -September
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	pondition to bonone o/or		

### SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 31/46 Rpt: 58/74	Menendez, Jose (The Honorable) 00042411	
4	Date	5 Payee name	
	10/03/2024	Ord, Julie (Ms.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,300.00	5650 Worth Parkway	
		Apt 1425	
		San Antonio, TX 78257	
8	PURPOSE		_
Ü	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Social Media services - Oct	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	11/07/2024	Ord, Julie (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,300.00	5650 Worth Parkway	
	Ψ2,300.00		
		Apt 1425	
		San Antonio, TX 78257	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor	
		Social Media services	
	Complete ONLY if direct expenditure to benefit C/Ol	L L Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/05/2024	Ord, Julie (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,700.00	5650 Worth Parkway	
		Apt 1425	
		San Antonio, TX 78257	
	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Social media services	
	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 Conditate/Officebolder/Political Committee

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ore)
1	Sch: 32/46 Rpt: 59/74	2 FILER NAME  Menendez, Jose (The Honorable)  3 Filer ID (Ethics Commission File 00042411	:15)
4	Date	5 Payee name	
	10/22/2024	Peterson, Judy	
6	Amount (\$) \$240.30	7 Payee address; City; State; Zip Code 1830 W Summit Ave	
		San Antonio, TX 78201-4934	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
		Check if Austin, TX, officeholder living expense Reimbursement for food at the district's Commu Gathering #2	nity
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	12/18/2024	Peterson, Judy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$752.70	1830 W Summit Ave	
		San Antonio, TX 78201-4934	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Campaign services	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/13/2024	Photo Busters	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$450.00	6855 De Palma	
		San Antonio, TX 78239	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Photographer services for District Holiday Party	
		Photographier services for District Holliday Party	
	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 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: 33/46 Rpt: 60/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	09/04/2024	RJ Publications LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,400.00	P.O. Box 272
		Helotes, TX 78023
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXI ENDITORE	☐ Check if Austin, TX, officeholder living expense  High school football ads
		nigh school lootball aus
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Payee name
	12/04/2024	RJ Publications LLC
_	Amount (\$)	Payee address; City; State; Zip Code
	\$1,300.00	P.O. Box 272
	Ψ1,000.00	1.0. BOX 212
		Helotes, TX 78023
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		High school basketball ads
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit G/OI	'
	Date	Payee name
	10/11/2024	Respite Care
	Amount (\$)	Payee address; City; State; Zip Code
	\$193.24	605 Belknap Place
		San Antonio, TX 78212
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>'</del>
l		

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		6)
	Sch: 34/46 Rpt: 61/74	Menendez, Jose (The Honorable) 00042411	
4	Date	5 Payee name	
	08/03/2024	Rosarios Mexican Restaurant	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$128.00	722 South St. Mary's Street	
		San Antonio, TX 78205	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
		Check if Austin, TX, officeholder living expense	
		Officeholder lunch meeting with constituents.	
L			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L			
	Date	Payee name	
	09/12/2024	Sammy's Embroidery	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.14	6900 San Pedro Avenue	
		San Antonio, TX 78216	
	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	
		Embroidery for office shirts	
	Commiste ONII V if diseast	Candidate/Officeholder norse	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
⊨	Data	Davida nama	
	Date 07/25/2024	Payee name	
	07/25/2024	San Antonio AFL-CIO	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,950.00	9502 Computer Drive	
		Suite 201	
		San Antonio, TX 78229	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITURE	Check if Austin, TX, officeholder living expense	
		Ad and sponsorship for Special Lunch event honoring Linda Chavez Thompson	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	П	

### 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		mmittee	Gift/Awards/Memorials   Legal Services The Instruction Gu			/ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2	EII ED NIAME						3	Filer ID	(Ethics Commission File	ere)
_	Sch: 35/46 Rpt: 62/74	_		Jose (The Hono	rable)				٦	00042411	(Ethics Commission File	213)
4	Date	5	Payee name									
	09/04/2024			Branch NAACF	•							
6	Amount (\$)	7	Payee addres	-	State;	Zip Co	de					
	\$1,500.00		P.O. Box 20	00225								
			San Antonio	o, TX 78220								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Sponsorship	ס				<b>=</b>			plete Schedule T.	
								_		officeholder living		ام مدر
								Dinner	OI à	a lable and a	ad at the Freedom F	unu
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	0	office sou	ght			Office h	eld	
	experience to benefit of or	'										
	Date		Payee name									
	11/13/2024		San Antonio	Police Departm	nent Associa	ation						
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$500.00		7000 Culeb	ra Road								
			San Antonio	, TX 78238								
	PURPOSE OF	(a)		ee Categories listed at th		edule)	(b)	Description				
	EXPENDITURE			ıs/Donations Ma Officeholder/Polit		ittoo		<b>=</b>		de of Texas. Com officeholder living	plete Schedule T.	
			Candidate/C	Jiliceriolaei/Polii	licai Commi	illee		<b>—</b>			nksgiving meal	
											eggea.	
_	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	0	office sou	aht			Office he	eld.	
	expenditure to benefit C/OI						<u> </u>					
	Date		Payee name									
	09/26/2024		San Antonio	Youth								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$100.00		P. O. Box 7	844								
			San Antonio	o, TX 78207								
	PURPOSE OF	(a)	•	ee Categories listed at th	e top of this sche	edule)	(b)	Description				
	EXPENDITURE		Fees							de of Texas. Com officeholder living	plete Schedule T.	
								<b>—</b>			g expense O years birthday eve	nt
								. 30 IOI HONOL		C. ( ) Guil 4	o , sais sii iiday cvo	
_	Complete ONLY if direct	Щ	Candidate/Offi	ceholder name		office sou	aht			Office he	əld	
	expenditure to benefit C/OI		Januala, Om	oonoider Hairie	O	moc sou	Ailt			Cilice III	oiu.	

### SCHEDULE F1

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

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

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	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: 36/46 Rpt: 63/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	09/26/2024	Society of Professional Journalist San Antonio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	3503 River Way
		San Antonio, TX 78230
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Sponsorship Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Sponsorship of tickets for Gridiron event.
		Sportsorship of tickets for Original event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	12/05/2024	Spaw Senate Account
_	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O. Box 12068
	Ψ200.00	1.0. Box 12000
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	ZA ZHOHOKZ	Candidate/Officeholder/Political Committee
		Benevolence fund
	Complete ONLY if direct	Condidate/Officeholder name Office equality Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/29/2024	St. Timothy Church
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1515 Saltillo
		San Antonio, TX 78207
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Sponsorship Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Sponsored a table for Noche de Amistad Banquet
		Sportsored a table for Noone de Amistad Banquet
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

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

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 37/46 Rpt: 64/74	Menendez, Jose (The Honorable) 00042411	
4	Date	5 Payee name	_
	12/13/2024	Super Awesome Balloon Animals	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$190.00	5002 N. Loop 1604 E.	
		#1106	
		San Antonio, TX 78247	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Event Expense	
		Check if Austin, TX, officeholder living expense  Balloon twister for holiday party	
		Balloon Wister for Hollady party	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	H	
	Date	Payee name	_
	12/02/2024	TJHS Athletic Booster Club	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$200.00	723 Donaldson	
		San Antonio, TX 78201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Basketball ad	
		Backetsan aa	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	<del>1</del>	
	Date	Payee name	_
	12/10/2024	Tellez Tamales & Barbacoa	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$394.50	1802 Bandera Road	
		San Antonio, TX 78228	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Tamales for Senate Holiday party	
		Tamaies for Seriale Holiday party	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
			_

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 38/46 Rpt: 65/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/22/2024	Texas Ethics Commission
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	P.O. Box 12070
		Austin, TX 78711
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Payment of late fees
_	0 1: 01:14 7 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	07/26/2024	Texas Grandparents Raising Grandchildren
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7719 Barhill Post
		San Antonio , TX 78254
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		25100.5110.200.100.210.10
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/19/2024	Texas Public Radio
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		San Antonio, TX 78229
	PURPOSE	(3.2.1)
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiorale to belieff C/O	·

### 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: 39/46 Rpt: 66/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	12/19/2024	Texas Public Radio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
L		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/19/2024	Texas Public Radio
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	<b>2</b> /4 <b>2</b> /12 <b>1</b>	Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to bettern over	<u> </u>
	Date	Payee name
	09/19/2024	Texas Public Radio
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Le	ft/Awards/Memorials Expens gal Services he Instruction Guide ex	Salaries/\	Vages	s/Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2 FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 40/46 Rpt: 67/74		se (The Honorable	e)			00042411	,
4	Date	5 Payee name						
	07/19/2024	Texas Public	Radio					
6	Amount (\$)	7 Payee address	City;	State; Zip Co	nde			
•	\$50.00		nt Dr. Suite 800	Otato, E.p. O.	,			
	Ψ30.00	0401 Datapol	nt Dr. Suite 600					
		San Antonio,	TX 78229					
8	PURPOSE	(a) Category (See	Categories listed at the top o	f this schedule)	(b)	Description		
	OF	Fees	oatogonoo notoa at are top o	. timo odinoudio)		_	side of Texas. Com	plete Schedule T.
	EXPENDITURE					$\Box$	X, officeholder living	
						Monthly sustain	ning members	ship fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Office	holder name	Office sou	ıght		Office he	eld
	Date	Payee name						
	08/19/2024	Texas Public	Radio					
	Amount (\$)	Payee address	City;	State; Zip Co	nde			
	\$50.00		nt Dr. Suite 800	State, Zip Ct	Jue			
	φ50.00	ο401 Δαιαροί	iii Di. Suite 600					
		San Antonio,	TX 78229					
	PURPOSE	(a) Category (See	Categories listed at the top o	f this schedule)	(b)	Description		
	OF EXPENDITURE	Fees		ŕ			side of Texas. Com	
	EXI ENDITORE						X, officeholder living	
						Monthly sustain	ning members	ship fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Office	holder name	Office sou	ıght		Office he	eld
	Date	Payee name						
	12/10/2024	Texas Senate	Democratic Caucu	IS				
	Amount (\$)	Payee address	City;	State; Zip Co	nde			
	\$5,000.00	P. O. Box 120		State, Zip Ct	Juc			
	Ψ5,000.00	1 . O. Box 120	,00					
		Austin, TX 78	711					
	PURPOSE		Categories listed at the top o	f this solve to tel	(h)	Description		
	OF	Fees	categories listed at the top o	i triis scriedule)	(~)	`	side of Texas. Com	plete Schedule T.
	EXPENDITURE	1 003				Check if Austin, TX	X, officeholder living	expense
						Membership Ar	nnual dues	
	Complete ONLY if direct	Candidate/Office	holder name	Office sou	ıght		Office he	eld
	expenditure to benefit C/OI	1						

#### SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee I	Gift/Awards/Memoria Legal Services The Instruction (	·		ages.	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed	above)
1	Total pages Schedule F1:	2	II FR NAME						3	Filer ID	(Ethics Commis	ssion Filers)
•	Sch: 41/46 Rpt: 68/74	l		lose (The Hor	norable)					00042411	(Euros Commi	20.3111 11013)
4	Date	<b>5</b> P	ayee name						_			
	09/19/2024	ı	exas Senat	e								
6	Amount (\$)	<b>7</b> P	ayee addres	s; City;	Stat	te; Zip Co	de					
	\$172.50	P	O. Box 12	068								
		A	ustin, TX 7	8711								
8	PURPOSE	(a) C	ategory (See	e Categories listed a	t the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE	G	Sift/Awards/	Memorials Ex	pense			<b>=</b>			plete Schedule T.	
								Purchase of		officeholder living		
								i dicilase di		as i lags lui	CONSTITUTION	
9	Complete ONLY if direct	L Ca	ındidate/Offic	eholder name		Office sou	aht			Office he	eld	
	expenditure to benefit C/OI		aradato, o mo	01101001 1101110		000 000,	9			000	o.u	
H	Date	Р	ayee name									
	11/13/2024	l	exas Senat	e								
	Amount (\$)	Р	ayee addres	s; City;	Stat	te; Zip Co	de					
	\$1,750.00	P	O. Box 12	068								
			ustin, TX 7									
	PURPOSE OF			Categories listed a		schedule)	(b)	Description		df-T O	onless Cabradula T	
	EXPENDITURE	G	Sift/Awards/	Memorials Ex	pense			<b>—</b>		officeholder living	plete Schedule T. a expense	
								Senate 2025				
	Complete ONLY if direct expenditure to benefit C/O		ndidate/Offic	eholder name		Office sou	ght			Office he	eld	
_	Dete											
	Date	l	ayee name									
	12/04/2024		exas Senat									
	Amount (\$)	l	ayee addres		Stat	te; Zip Co	de					
	\$40.00	P	P.O. Box 12	068								
		_	uctin TV 7	0711								
	DUDDOCE		ustin, TX 7			<del></del>	<i>(</i> L)	<b>5</b>				
	PURPOSE OF	ı		Categories listed a		schedule)	(a)	Description  Check if travel of	OLITSI	de of Texas Com	plete Schedule T.	
	EXPENDITURE		ont/Awards/	Memorials Ex	pense			ш		officeholder living		
								Gavel for a co	ons	tituent		
	Complete ONLY if direct		ndidate/Offic	eholder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/O	<del>-</del>										

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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: 42/46 Rpt: 69/74	2 FILER NAME Menendez, Jose (The Honorable) 3 Filer ID (Ethics Commission Filers) 00042411
4	Date 08/28/2024	5 Payee name The Rose Boutique
6	Amount (\$) \$195.00	7 Payee address; City; State; Zip Code 955 Cincinatti San Antonio, TX 78201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Memorial wreath for constituent.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 12/24/2024	Payee name The Texas Tribune
	Amount (\$) \$51.70	Payee address; City; State; Zip Code 919 Congress Avenue 6th Floor Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Monthly sustaining membership fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/25/2024	Payee name The Texas Tribune
	Amount (\$) \$51.70	Payee address; City; State; Zip Code 919 Congress Avenue 6th Floor Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Monthly sustaining membership fee
	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 Committee

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 43/46 Rpt: 70/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/24/2024	The Texas Tribune
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$51.70	919 Congress Avenue
		6th Floor
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_	Date	Power name
	09/24/2024	Payee name The Texas Tribune
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.70	919 Congress Avenue
		6th Floor
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	07/24/2024	The Texas Tribune
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.70	919 Congress Avenue
		6th Floor
		Austin, TX 78701
	DUDDACE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  [b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 44/46 Rpt: 71/74	Menendez, Jose (The Honorable)  00042411
4	Date	5 Payee name
	08/24/2024	The Texas Tribune
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$51.70	919 Congress Avenue
		6th Floor
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/28/2024	Thompson Neighborhood Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	214 West Academy
		San Antonio, TX 78226
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation for scholarship awards.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit C/O	<u>'</u>
	Date	Payee name
	08/29/2024	Thompson Neighborhood Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	214 West Academy
		San Antonio, TX 78226
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation of Neighbors Together event.
_	Complete ONLY if direct	Candidate/Officeholder name Office county Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ee l	-ood/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpens Vages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2 FILI	ER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 45/46 Rpt: 72/74	Ме	nendez, J	lose (The Honora	able)					00042411	
4	Date	5 Pay	/ee name								
	10/30/2024	US	PS								
6	Amount (\$)	<b>7</b> Pay	/ee addres	s; City;	State;	Zip Co	de				
	\$170.00	106	64 Vance	Jackson							
		Sar	n Antonio	, TX 78201							
8	PURPOSE	(a) Cat	egory (See	e Categories listed at the t	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE	Fee	es					므		de of Texas. Comp	
								Annual fee for		officeholder living	
								/ lillidal icc ioi		O. DOX TOTAL	ui
9	Complete ONLY if direct	Cand	didate/Offic	eholder name	Ω	ffice sou	ght			Office he	ıld
•	expenditure to benefit C/O			onoradi name			9			J55 1.15	
	Date	Pay	/ee name								
	12/11/2024	Yor	ng's Tradi	ng							
	Amount (\$)	Pay	ee addres	s; City;	State;	Zip Co	de				
	\$1,139.76	830	07 Speed	way Drive							
		Sar	n Antonio	, TX 78230							
	PURPOSE	(a) Cat	egory (See	e Categories listed at the t	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE			Memorials Expen				<b>—</b>		de of Texas. Comp	
								Check if Austin, Gifts for const		officeholder living	expense
								Gills for Coris	utu	CIILO	
_	Complete ONLY if direct	Cand	didate/Offic	eholder name		ffice sou	aht			Office he	eld
	expenditure to benefit C/O		2		C		J			200 /10	
<b>-</b>	Date	Day	/ee name								
	09/05/2024	1	uth Do Vo	ite							
$\vdash$	Amount (\$)		ee addres		Stato:	Zip Co	nde				
	\$1,000.00	1		r Sands Drive	State,	Zip C0	ue				
	Ψ1,000.00		_ vv. Jiive	. Julius Dilve							
		Sar	n Antonio	, TX 78216							
	PURPOSE	<b>(a)</b> Cat	egory (See	e Categories listed at the t	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE			s/Donations Made				<b>∟</b>		de of Texas. Comp	
		Cai	ndidate/O	fficeholder/Politic	al Commi	ttee				officeholder living	expense d Poll Worker Fest
									. 00	iii votei alit	a i on worker i est
$\vdash$	Complete ONLY if direct	Cand	didate/Offic	eholder name	<u> </u>	ffice sou	aht			Office he	eld
	expenditure to benefit C/O				J	55 500	3.11			350 110	· <del>-</del>

## SCHEDULE F1

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

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Co	mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services		Polling Expense Printing Expens Salaries/Wages	e /Contract Labor		Travel in Distric Travel Out of Di	
L				The Instruction Guide	explains h	now to comple	ete this form.	_		
1	Total pages Schedule F1:	2	FILER NAME	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 46/46 Rpt: 73/74		Menendez,	Jose (The Honoral	ole)				00042411	
4	Date	5	Payee name							
	10/05/2024			o Communications	Inc					
<u>ا</u>	Amount (\$)	7	Payee addre	ess; City;	State.	Zip Code				
ľ	\$181.54	ľ	-	n Blvd, 6th Floor	Otato,	Zip Couc				
	Ψ101.54		33 / IIIIdaci	ir biva, our rioor						
L		L	San Jose, (	CA 95113						
8	PURPOSE	(a)	Category (S	see Categories listed at the to	o of this sche	edule) (b)	Description			
	OF EXPENDITURE		Fees				_			nplete Schedule T.
							_		, officeholder livin	g expense
							Zoom service	25		
L										
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Off	iceholder name	0	ffice sought			Office h	eld

## INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 74/74 2 FILER NAME Filer ID (Ethics Commission Filers) Menendez, Jose (The Honorable) 00042411 8 Amount (\$) Date 5 Name of person from whom amount is received 12/31/2024 Security Service Federal Credit Union \$484.53 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 Purpose for which amount is received Check if political contribution returned to filer dividend Amount (\$) Date Name of person from whom amount is received 12/31/2024 Security Service Federal Credit Union \$20,636.39 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 Purpose for which amount is received Check if political contribution returned to filer dividend Date Name of person from whom amount is received Amount (\$) 12/31/2024 Security Service Federal Credit Union \$2.97 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 Purpose for which amount is received Check if political contribution returned to filer interest