FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015992 3 COMMITTEE NAME **OFFICE USE ONLY** Deputy Sheriff's Association of Bexar County Political Action Committee Date Received **ELECTRONICALLY FILED** 04/29/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 9200 Broadway, Ste. 106 San Antonio, TX 78217 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Reginald NAME Date Processed **NICKNAME SUFFIX** LAST Worlds Date Imaged CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 9200 Broadway STREET **ADDRESS** Suite 106 (Residence or Business) San Antonio, TX 78217 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 9200 Broadway MAILING **ADDRESS** Suite 106 San Antonio, TX 78217 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (210) 223-2213 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 X May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 03/26/2025 04/25/2025

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Deputy Sheriff's Asso	ciation of Bexar County I	Political Action Committee	00015992	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Misty Spears San Antonio City	Council Dist	rict 9
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,008.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	6,347.73
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	45,589.60
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.	rjury, that the a	accompanying report is d to be reported by me
		Reginal	d Worlds	
		Signature of Car		rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	, tł	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	cer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

							Pa	age 3 of 20
12 COMMITTEE NAME						13 Filer ID	(Ethics Comn	nission Filers)
Deputy Sheriff's Association	on of Bexar County P	olitical Action	Committee			00015992		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ivalis Meza	Gonzalez	San Anto	nio City Coun	cil District 8	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Marc White	San Anto	nio City C	ouncil District	10	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)							

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

4 of 20					
17 COI	MMITTE	(Ethics Commission Filers)			
Dep	outy Sh	00015992			
19 SCH NAM	HEDULI ME OF :		SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 9,008.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	DR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$	
9.	9. SCHEDULE E: LOANS		\$		
10.	10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$ 6,347.73		
11.	1. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$		

MC	ONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A1
The	Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/20	
	R NAME	iff's Association of Bexar County Political Action C	ommittee	3 Filer ID (Ethics Commission Filers) 00015992
4 Date 03/3	31/2025	 Full name of contributor	7 Amount of Contribution (\$) \$9,008.00	
		San Antonio, TX 78217		
8 Princ	cipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	is)

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: 1/15 Rpt: 6/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/17/2025	3D Signs
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,247.04	8015 W 2nd
Expenditure from	
corporate funds	Somerset , TX 78069
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Sign Printing Pro Candidate
	Sign i munig i to Candidate
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Dougo nama
	Payee name
04/14/2025	All American Car
Amount (\$)	Payee address; City; State; Zip Code
\$35.00	4343 Vance Jackson Rd
Expenditure from	
corporate funds	San Antonio, TX 78230
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
-	Expense Check if Austin, TX, officeholder living expense
	Vehicle Expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
D-1-	
Date	Payee name
04/14/2025	Angel's Mexican Haven
Amount (\$)	Payee address; City; State; Zip Code
\$27.15	2302 E Commerce S
Expenditure from	
corporate funds	San Antonio, TX 78203
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
	PAC Meeting
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: 2/15 Rpt: 7/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/03/2025	Angel's Mexican Haven
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20.03	2302 E Commerce S
Expenditure from corporate funds	San Antonio, TX 78203
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 PAC Meeting
	1 Ac wiceting
O Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
04/21/2025	BILL MILLER BBQ
Amount (\$)	Payee address; City; State; Zip Code
\$13.53	1004 SAN PEDRO
Expenditure from corporate funds	SAN ANTONIO, TX 78212
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
	Pac Meeting
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/22/2025	Blanco Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$46.36	1720 Blanco Rd
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule) Food/Reverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Pac Meeting
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

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		nmittee	Gift/Awards/Mem Legal Services The Instruction			xpens Wages	se s/Contract Labor		Travel in District Travel Out of Distri OTHER (enter a ca	ct ategory not listed above)
1	Total pages Schedule F1:	2	EII ED NIAME		ac onpiumo				2	Filer ID	(Ethics Commission Filers)
	Sch: 3/15 Rpt: 8/20				ation of Bexar	County F	Politi	ical Action	3	00015992	(Luics Commission Filets)
4	Date	5	Payee name						<u> </u>		
	04/16/2025		Blanco Cafe	e							
6	Amount (\$)	7	Payee addre	ss; City;	State	e; Zip Co	ode				
	\$50.42		1720 Blanc	o Rd							
	Expenditure from corporate funds		San Antonio	o, TX 78212							
8	PURPOSE	(a)	Category (Se	ee Categories liste	d at the top of this sc	hedule)	(b)	Description			
	OF EXPENDITURE		Food/Bever	age Expens	e			=		de of Texas. Comple officeholder living e	
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder nam	e	Office sou	ıght			Office held	d
F	Date		Payee name								
	03/26/2025		Blanco Cafe	9							
┝	Amount (\$)	\vdash	Payee addre	ss; City;	State	e; Zip Co	ode				
	\$66.60		1720 Blanc			, ,					
	Expenditure from corporate funds		San Antonio	o, TX 78212							
	PURPOSE OF	(a)			d at the top of this sc	hedule)	(b)	Description			
	EXPENDITURE		Food/Bever	age Expens	е			<u></u>		de of Texas. Comple officeholder living e	
								PAC Meeting		officeriolaer living c	Apense
								J			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder nam	е	Office sou	ught			Office held	j
	Date		Payee name								
	03/31/2025		Buc-ee's								
	Amount (\$)		Payee addre	ss; City;	State	e; Zip Co	ode				
	\$44.58		2760 I-35								
	Expenditure from corporate funds		New Braunt	fels, TX 7813	30						
	PURPOSE	(a)	Category (Se	ee Categories liste	d at the top of this sc	hedule)	(b)	Description			
	OF EXPENDITURE		Transportat Expense	ion Equipme	ent And Relate	d			ı, TX,	de of Texas. Comple , officeholder living e	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder nam	е	Office sou	ight			Office held	i

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/Officenolder/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: 4/15 Rpt: 9/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
03/31/2025	Buc-ee's
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$22.68	2760 I-35
Expenditure from corporate funds	New Braunfels, TX 78130
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 Food beverage Expense Misc Food
	Food beverage Expense Misc Food
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/16/2025	Chedders
Amount (\$)	Payee address; City; State; Zip Code
\$45.83	15284 Interstate 35 N
Expenditure from corporate funds	Selma , TX 78154
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
	Pac Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to benefit 5/5/	<u> </u>
Date	Payee name
04/23/2025	Chef Don's Catering
Amount (\$)	Payee address; City; State; Zip Code
\$2,847.72	1630 E Houston St
. ,	
Expenditure from corporate funds	San Antonio, TX 78202
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Food Catering for Event Non - Political
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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: 5/15 Rpt: 10/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/21/2025	Circle K
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$60.99	8102 Callaghan Rd
Expenditure from corporate funds	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.
	Expense Check if Austin, TX, officeholder living expense Fuel Expense
	Fuei Experise
O Committee Chillian III	On didn't 10 ff a halden name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to serious experi	
Date	Payee name
03/28/2025	Circle K
Amount (\$)	Payee address; City; State; Zip Code
\$59.65	8102 Callaghan Rd
Expenditure from corporate funds	San Antonio, TX 78230
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense
	Fuel Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit even	
Date	Payee name
04/21/2025	Costco
Amount (\$)	Payee address; City; State; Zip Code
\$75.97	5611 UTSA Boulevard
Expenditure from corporate funds	San Antonio, TX 78249
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVDENDITUDE	Office Supplies
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Pac Office Supplies
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 Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 6/15 Rpt: 11/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/08/2025	Culver's
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$38.48	5836 De Zavala Rd,
Expenditure from corporate funds	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. Check if Austin, TX, officeholder living expense
	PAC Meeting
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/10/2025	DOOR DASH
Amount (\$)	Payee address; City; State; Zip Code
\$163.42	3909 N Interstate 35,
- Cynonditure from	
Expenditure from corporate funds	Austin, TX 78227
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 Misc Food Pac meeting
	inico i coa i do mocang
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/18/2025	Garibaldi's Mexican
Amount (\$)	Payee address; City; State; Zip Code
\$46.97	6938 W. Military
Expenditure from corporate funds	San Antonio, TX 78227
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Pac Meeting
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 7/15 Rpt: 12/20	2 FILER NAME Deputy Sheriff's Association of Bexar County Political Action 3 Filer ID (Ethics Commission Filers) 00015992
4 Date 04/14/2025	5 Payee name Golden Chick
6 Amount (\$) \$21.20	7 Payee address; City; State; Zip Code 2299 NW Military Hwy
Expenditure from corporate funds	Castle Hills, TX 78213
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 04/01/2025	Payee name Golden Chick
Amount (\$) \$25.60	Payee address; City; State; Zip Code 2299 NW Military Hwy
Expenditure from corporate funds	Castle Hills, TX 78213
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC Meeting
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 04/14/2025	Payee name HTEAO
Amount (\$) \$4.10	Payee address; City; State; Zip Code 14423 Northwest Military Highway Shavano Par
Expenditure from corporate funds	San Antonio, TX 78231
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC meeting
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

dvertising Expense Event Expense Loan Repayment/Reimburg (Expense Loan Repayment/Reimburg)

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
3	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/15 Rpt: 13/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/02/2025	HTEAO
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$38.18	14423 Northwest Military Highway Shavano Par
Expenditure from	San Antonio, TX 78231
corporate funds	
8 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
	PAC Meeting
	17.60 Micetally
O Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	
Date	Payee name
03/27/2025	Home Depot #582
Amount (\$)	Payee address; City; State; Zip Code
\$34.07	1066 Central Pkwy
Expenditure from corporate funds	San Antonio, TX 78232
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	PAC Supplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Miscellaneous Pac Supplies
	Wildelia Tedad Tad Galphies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
Date	Payee name
04/25/2025	LUBY'S CAFETERIA # 24
Amount (\$)	Payee address; City; State; Zip Code
\$27.15	911 N Main Ave
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Pac Meeting
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	• • • • • • • • • • • • • • • • • • •

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 9/15 Rpt: 14/20	2 FILER NAME Deputy Sheriff's Association of Bexar County Political Action 3 Filer ID (Ethics Commission Filers) 00015992
4 Date 04/14/2025	5 Payee name LUBY'S CAFETERIA # 24
6 Amount (\$) \$34.57	7 Payee address; City; State; Zip Code 911 N Main Ave
Expenditure from corporate funds	San Antonio, TX 78212
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/21/2025	Laguna madre
Amount (\$) \$27.17	Payee address; City; State; Zip Code 18195 US 281
Expenditure from corporate funds	Selma , TX 78232
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Pac Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 04/24/2025	Payee name Las Palapas
Amount (\$) \$22.60	Payee address; City; State; Zip Code 8005 Callaghan Rd
Expenditure from corporate funds	San Antonio, TX 78230
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Pac Meeting
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

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: 10/15 Rpt: 15/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/02/2025	Lowes 01155
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$314.89	7901 Callaghan Rd
Expenditure from corporate funds	San Antonio, TX 78229
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Supplies Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Equipment / Poles for placement signs pro
	Candidate
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/18/2025	Lowes
Amount (\$)	Payee address; City; State; Zip Code
\$13.29	203 SW Loop 410
Funnandikus fis	
Expenditure from corporate funds	San Antonio, TX 78245
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Pac Supplies Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense Office Pac Supplies
	Since I do Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/31/2025	Luby's 0004
Amount (\$)	Payee address; City; State; Zip Code
\$36.62	4541 Fredericksburg Rd
Expenditure from corporate funds	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. Check if Austin, TX, officeholder living expense
	Pac Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 11/15 Rpt: 16/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/23/2025	Mi Celayense
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$63.25	2907 Fredericksburg Rd
— Foresedit ve from	
Expenditure from corporate funds	San Antonio, TX 78201
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
	Pac meeting
	and the state of t
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/15/2025	Mi Celayense
Amount (\$)	Payee address; City; State; Zip Code
\$36.56	2907 Fredericksburg Rd
,	3
Expenditure from corporate funds	San Antonio, TX 78201
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
	PAC Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
04/10/2025	Mi Celayense
Amount (\$)	Payee address; City; State; Zip Code
\$34.42	2907 Fredericksburg Rd
Expenditure from corporate funds	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.
	Check if Austin, TX, officeholder living expense PAC Meeting
	FAC Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 12/15 Rpt: 17/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
03/28/2025	Office Depot #2805
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$32.46	150 N Crossroads Blvd
- "	
Expenditure from corporate funds	Balcones Heights, TX 78201
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Pac Supplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Office PAC Supplies
	Cinco i i i co coppilico
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Davis come
Date 04/14/2025	Payee name QT
Amount (\$)	Payee address; City; State; Zip Code
\$39.43	4710 Fredericksburg Rd
Expenditure from	
corporate funds	San Antonio, TX 78229
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y
Date	Payeo namo
04/01/2025	Payee name Sam's Club
Amount (\$) \$87.76	Payee address; City; State; Zip Code
Φ87.70	5565 Dezavala Rd San Antonio
Expenditure from	0 4 4 5 70 700 10
corporate funds	San Antonio, TX 78249
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Supplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Office PAC Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politice Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
ereak eara'r aymen	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 13/15 Rpt: 18/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/21/2025	Sea Island
6 Amount (\$)	7 Payee address; City; State; Zip Code
` ,	
\$39.48	10303 I-10
Expenditure from	
corporate funds	San Antonio, TX 78230
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Pac Meeting
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
04/04/2025	Shake Shack
Amount (\$)	Payee address; City; State; Zip Code
\$40.00	7427 San Pedro Ave.
* ******	
Expenditure from	
corporate funds	San Antonio, TX 78216
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	PAC Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	d .
Date	Payee name
04/11/2025	TSO Chinese Cherry
Amount (\$)	Payee address; City; State; Zip Code
\$108.79	3909 I H 35North
Expenditure from corporate funds	Austin , TX 78722
PURPOSE	
OF	
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PAC Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenolder/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: 14/15 Rpt: 19/20	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/25/2025	Taste of Asia
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$53.99	300 W Bitters Rd
Expenditure from corporate funds	San Antonio, TX 78216
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 Pac Meeting
	rac weeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxportantaro to sorione or o	
Date	Payee name
04/11/2025	Taste of Asia
Amount (\$)	Payee address; City; State; Zip Code
\$61.70	300 W Bitters Rd
Expenditure from corporate funds	San Antonio, TX 78216
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	PAC Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefft C/Oi	1
Date	Payee name
04/03/2025	The Orginal Donut
Amount (\$)	Payee address; City; State; Zip Code
\$23.40	3307 Fredericksburg Rd
420.10	Soot Frouding Na
Expenditure from corporate funds	San Antonio, TX 78216
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	PAC Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political 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	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: Sch: 15/15 Rpt: 20/20	2 FILER NAME Deputy Sheriff's Association of Bexar County Political Action 3 Filer ID (Ethics Commission Filers) 00015992
3cm 13/13 Kpt. 20/20	
4 Date	5 Payee name
04/21/2025	Twin Liquors
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$194.84	9234 N Loop 1604 W STE 126
Expenditure from corporate funds	San Antonio , TX 78250
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Pac Meeting
	and the same of th
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/28/2025	Whataburger 755
Amount (\$)	Payee address; City; State; Zip Code
\$19.79	2557 Northwest Loop 410
,	
Expenditure from	0 4 4 5 774 70000
corporate funds	San Antonio, TX 78230
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
	Pac Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1