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** 06/02/2025 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 May 5 August 5 November 5 March 5 September 5 December 5 X June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 04/26/2025 05/25/2025

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	ociation of Bexar County I	Political Action Committee	00015992	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ivaliz Gonzalez San Antonio C	city Council Di	istrict 8
(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		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) t qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,300.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	9,827.44
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	DAY \$	45,007.91
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			I	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that the a mation required	ccompanying report is I to be reported by me
		Reginal	d Worlds	
		Signature of Car		rer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said _	, th	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of offic	er administering oath

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 3 of 19 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Deputy Sheriff's Association of Bexar County Political Action Committee 00015992 14 COMMITTEE ACTIVITY 1. Candidates A. Supported (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) A. Supported 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Grant Moody Bexar County Commissioner Court #3 Assisted (Identify by name or, if applicable, classify by party.

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				4 of 19
17 COMMIT	TEE NAME Sheriff's Association of Bexar County Political Action Committee	18 Filer ID 00015992	(Ethics Con	nmission Filers)
	т —			
	LE SUBTOTALS F SCHEDULE		SUBT	OTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	9,300.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	9. SCHEDULE E: LOANS			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	9,827.44
11.	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 CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A1
The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/19	
FILER NAME Deputy Sher		ommittee	3 Filer ID (Ethics Commission Filers) 00015992
Date 04/29/2025	5 Full name of contributor out-of-state PAC (ID# Deputy Sheriff's Association Members	<i>t</i>)	7 Amount of Contribution (\$) \$9,300.0
	San Antonio, TX 78217		
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	is)
	The Instru FILER NAME Deputy Sher Date 04/29/2025	The Instruction Guide explains how to complete this FILER NAME Deputy Sheriff's Association of Bexar County Political Action C Date 5 Full name of contributor out-of-state PAC (ID# Deputy Sheriff's Association Members 6 Contributor address; City; State; Zip Code	Deputy Sheriff's Association of Bexar County Political Action Committee Date 04/29/2025 5 Full name of contributor out-of-state PAC (ID#:) Deputy Sheriff's Association Members 6 Contributor address; City; State; Zip Code San Antonio, TX 78217

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Gift/Wards/Memorials Expense Printing Expense printing Expense Salaries/Wages/Contra The Instruction Guide explains how to complete this	, , , , , , , , , , , , , , , , , , , ,
1	Total pages Schodule F1:	·	3 Filer ID (Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 1/14 Rpt: 6/19	Deputy Sheriff's Association of Bexar County Political A	, ,
4	Date	Payee name	•
	05/09/2025	54th Street	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$52.84	1303 IH 35. San Marcos	
	Expenditure from corporate funds	San Marcos, TX 78666	
8	PURPOSE OF EXPENDITURE	Cr	iption ack if travel outside of Texas. Complete Schedule T. ack if Austin, TX, officeholder living expense Meeting
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/21/2025	Academy Sports + Outdoors	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$151.15	2643 Northwest Loop 410	
	Expenditure from corporate funds	San Antonio, TX 78230	
	PURPOSE OF EXPENDITURE	Cr	iption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense ding Shirts Embroidery
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/28/2025	Al Carbon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$73.74	547 Culebra Rd	
	Expenditure from corporate funds	San Antonio, TX 78201	
	PURPOSE OF EXPENDITURE	cr	iption ack if travel outside of Texas. Complete Schedule T. ack if Austin, TX, officeholder living expense Meeting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Exper Gift/Awards/Memorials Legal Services The Instruction G	s Expense		xpens Vages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a c	rict ategory not listed above)
1	Total pages Schedule F1:	2 FILEF	NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/14 Rpt: 7/19	Depu	ty Sheriff's Associatio	n of Bexar Co	ounty P	oliti	cal Action		00015992	
4	Date	5 Payee	e name							
	05/06/2025	All Ar	nerican Car							
6	Amount (\$)	7 Payee	e address; City;	State;	Zip Co	de				
	\$35.01	4343	Vance Jackson Rd							
	Expenditure from corporate funds	San <i>i</i>	Antonio, TX 78230							
8	PURPOSE	(a) Categ	Ory (See Categories listed at	the top of this sched	dule)	(b)	Description			
	OF EXPENDITURE		sportation Equipment	And Related			=		de of Texas. Comp	
	-	Expe	nse				—		officeholder living	expense
							Vehicle Expe	ense	•	
_	Commission ONII V if disposit	Condid	oto/Office balder nome	0.5	: :				Office had	lal
9	Complete ONLY if direct expenditure to benefit C/Oh		ate/Officeholder name	Oi	fice sou	gnt			Office hel	u
	Date	Payee	e name							
	05/12/2025	All Ar	merican Car							
	Amount (\$)	Payee	address; City;	State;	Zip Co	de				
	\$38.00	4343	Vance Jackson Rd							
	Expenditure from corporate funds	San A	Antonio, TX 78230							
	PURPOSE	(a) Categ	Ory (See Categories listed at	the top of this sched	dule)	(b)	Description			
	OF EXPENDITURE		sportation Equipment	And Related			ш		de of Texas. Compl	
	-	Expe	nse				Vehicle Expe		officeholder living	expense
							verlicie Expe	:1156	;	
	Complete ONLY if direct expenditure to benefit C/OH		ate/Officeholder name	Of	fice sou	ght			Office hel	ld
-	Date	Payor	nama							
	04/29/2025		e name co Cafe							
				Stato:	Zin Co	do				
	Amount (\$) \$50.00	,	e address; City; Blanco Rd	Siale,	Zip Co	ue				
	φ50.00	1720	Dialico Ru							
	Expenditure from corporate funds	San <i>i</i>	Antonio, TX 78212							
	PURPOSE	(a) Categ	Ory (See Categories listed at	the top of this sched	dule)	(b)	Description			
	OF EXPENDITURE	Food	/Beverage Expense				므		de of Texas. Compl	
	-						Pac Meeting		officeholder living e	expense
							i ac meening			
\vdash	Complete ONLY if direct	Candid	ate/Officeholder name	Of	fice sou	abt			Office hel	ld
	expenditure to benefit C/O		ale/Oniceholder hande	Oi	1100 30U	grit			Office Hel	u
\vdash										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide e			Contract Labor te this form.		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Fi	ilers)
	Sch: 3/14 Rpt: 8/19	Deputy She	riff's Association of I	Bexar County F	Politi	cal Action		00015992		
4	Date	5 Payee name								
	05/09/2025	Buc-ee's								
6	Amount (\$) \$11.98	7 Payee addres 2760 I-35	ss; City;	State; Zip Co	ode					
	Expenditure from corporate funds	New Braunf	els, TX 78130							
8	PURPOSE OF		e Categories listed at the top	of this schedule)	(b)	Description Check if travel	l outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					Check if Austin		officeholder living	expense	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic	ceholder name	Office sou	ught			Office he	eld	
	Date	Payee name								
	05/08/2025	COA Parkin	g							
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
	\$3.25	2929 Congr	ess							
	Expenditure from corporate funds	Austin , TX	78749							
	PURPOSE	(a) Category (Se	e Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees				-		de of Texas. Com		
						Parking fee		officeholder living		
						r anding rec /	100	r Logisiano	in Meeting	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Office	ceholder name	Office sou	ight			Office he	eld	
	Date	Payee name								
	05/21/2025	Chick-Fil-A								
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
	\$110.53	4455 Frede	ricksburg Rd							
	Expenditure from corporate funds	Balcones H	eights, TX 78201							
	PURPOSE OF		e Categories listed at the top	of this schedule)	(b)	Description				
	EXPENDITURE	Food/Bever	age Expense			ш	n, TX,	de of Texas. Com officeholder living		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic H	ceholder name	Office sou	<u>I</u> ught			Office he	eld	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/14 Rpt: 9/19	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/28/2025	Cracker Barrel
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$27.92	11030 I-10
Expenditure from corporate funds	San Antonio, TX 78230
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
	Tac 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
05/07/2025	Dairy Queen
Amount (\$)	Payee address; City; State; Zip Code
\$5.73	1914 Jackson keller

Expenditure from	Con Antonio TV 70040
corporate funds	San Antonio, TX 78219
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
	MISC Drink Beverages
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to beriefit C/Oi	1
Date	Payee name
05/02/2025	Deputy Sheriff's Association of Bexar County Benefit Fund
Amount (\$)	Payee address; City; State; Zip Code
\$1,200.00	9200 Broadway, Ste. 106
Ψ1,200.00	3200 Bloadway, Ste. 100
Expenditure from	
corporate funds	San Antonio, TX 78217
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
	Jeremy Pain Golf Tournament Golfr Team
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 -

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: 5/14 Rpt: 10/19	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/30/2025	Garcia Mexican Restraurant
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$46.29	842 Fredricksburg
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 Austin, TX, officeholder living expense
	Pac Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff 6/01	'
Date	Payee name
05/12/2025	Garibaldi's Mexican
Amount (\$)	Payee address; City; State; Zip Code
\$64.96	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	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	
Data	
Date	Payee name
05/23/2025	Garibaldi's Mexican
Amount (\$)	Payee address; City; State; Zip Code
\$39.38	6938 W. Military
Evpanditura from	
Expenditure from corporate funds	San Antonio, TX 78227
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
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

Event Expense 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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	
1	Sch: 6/14 Rpt: 11/19	2 FILER NAME Deputy Sheriff's Association of Bexar County Political Action 3 Filer ID (Ethics Commission Filers) 00015992	
4	Date	5 Payee name	_
	05/01/2025	Golden Wok	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$62.53	8822 Wurzbach Rd	
	Expenditure from corporate funds	San Antonio, TX 78240	
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	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	04/28/2025	Grant Moody Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,500.00	18203 Rim Dr	
	Expenditure from corporate funds	San Antonio, TX 78257	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	05/13/2025	Grant Moody Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$2,500.00	18203 Rim Dr	
	Expenditure from corporate funds	San Antonio, TX 78257	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution	_
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Politi 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: 7/14 Rpt: 12/19	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
04/29/2025	HTEAO
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$28.85	14423 Northwest Military Highway Shavano Par
Expenditure from corporate funds	San Antonio, TX 78231
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Pac Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
05/23/2025	Ivaliz Meza Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	8647 Wurzbach Rd
Expenditure from	
corporate funds	San Antonio, TX 78240
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
	1 ontical continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Davisa nama
05/14/2025	Payee name LUBY'S CAFETERIA # 24
Amount (\$) \$50.12	Payee address; City; State; Zip Code 911 N Main Ave
φ30.12	911 N Main Ave
Expenditure from	O A TV 70040
corporate funds	San Antonio, TX 78212
PURPOSE 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	1
İ	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 8/14 Rpt: 13/19	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
05/09/2025	Lowes 01155
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$43.82	7901 Callaghan Rd
Expenditure from corporate funds	San Antonio, TX 78229
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Printing Expense Pro Candidates
	3 Pt - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	David and the second se
05/12/2025	Payee name
	Lowes
Amount (\$)	Payee address; City; State; Zip Code
\$200.74	203 SW Loop 410
Expenditure from corporate funds	San Antonio, TX 78245
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Printing Expense Pro Candidates
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to benefit C/Oi	
Date	Payee name
05/23/2025	Lowes
Amount (\$)	Payee address; City; State; Zip Code
\$25.31	203 SW Loop 410
Expenditure from corporate funds	San Antonio, TX 78245
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Supplies Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Miscellaneous Pac SUPPLIES
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 9/14 Rpt: 14/19	2 FILER NAME Deputy Sheriff's Association of Bexar County Political Action 3 Filer ID (Ethics Commission Filers) 00015992
4 Date	5 Payee name
05/22/2025	Maria Bonita
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$17.25	350 Northaven Dr.
Expenditure from	San Antonia TV 70220
corporate funds	San Antonio, TX 78229
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
ZA ZIIZII GILZ	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
05/22/2025	Maria Bonita
Amount (\$)	Payee address; City; State; Zip Code
\$20.30	350 Northaven Dr.
Expenditure from corporate funds	San Antonio, TX 78229
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXPENDITORE	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	
Date	Payee name
05/22/2025	Maria Bonita
Amount (\$)	Payee address; City; State; Zip Code
\$133.09	350 Northaven Dr.
Ψ133.03	330 Northwest Dr.
Expenditure from	
corporate funds	San Antonio, TX 78229
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
Complete CNLV if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
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/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/14 Rpt: 15/19	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
05/13/2025	Merit Shavano Coffee Shop
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10.17	4115 Pond Hill Ln. Ste 101
Expenditure from corporate funds	Shavano , TX 78231
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Misc beverage Drinks Pac Meeting
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/28/2025	Mi Celayense
Amount (\$)	Payee address; City; State; Zip Code
\$35.59	2907 Fredericksburg Rd
,,,,,,	g
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.
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	1
Date	Payee name
05/14/2025	Mi Celayense
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$36.32	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	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
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/O	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 Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
_	Sch: 11/14 Rpt: 16/19	Deputy Sheriff's Association of Bexar County Political Action 00015992
4	Date	5 Payee name
	05/23/2025	Mi Celayense
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.34	2907 Fredericksburg Rd
	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
		, no mosting
a	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
	Date	Payee name
	05/13/2025	Olive Garden
	Amount (\$)	Payee address; City; State; Zip Code
	\$122.78	6155 Northwest Loop 410
_	T Expenditure from	
L	corporate funds	San Antonio, TX 78238
	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
	Computate ONLY if direct	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/19/2025	Peter Piper Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.76	803 SW Military Dr
	T Expenditure from	
	corporate funds	San Antonio, TX 78221
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI LINDITORE	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
	experience to belieff 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/14 Rpt: 17/19	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
05/14/2025	Prestige Printing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,294.67	8 Burwood Ln
Expenditure from corporate funds	San Antonio, TX 78216
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Priming Expense Pro Candidates
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/12/2025	QT
Amount (\$)	Payee address; City; State; Zip Code
\$60.54	4710 Fredericksburg Rd
Expenditure from	
corporate funds	San Antonio, TX 78229
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
	ruei Experise
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/22/2025	QT
Amount (\$)	Payee address; City; State; Zip Code
\$62.33	4710 Fredericksburg Rd
Expenditure from corporate funds	San Antonio, TX 78229
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 Vehicle Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit Gree	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 13/14 Rpt: 18/19	Deputy Sheriff's Association of Bexar County Political Action 00015992	
4 Date	5 Payee name	
05/08/2025	Ray's Pizzaria	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$35.45	5252 Fredericksburg 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	Food/Beverage Expense	
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	H 	
Date	Payee name	
05/06/2025	Sam's Club	
Amount (\$)	Payee address; City; State; Zip Code	_
\$57.90	5565 Dezavala Rd San Antonio	
Expenditure from corporate funds	San Antonio, TX 78249	
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.	
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/O	H 	
Date	Payee name	
05/07/2025	Target	
Amount (\$)	Payee address; City; State; Zip Code	
\$19.30	4522 Fredericksburg Rd	
Expenditure from corporate funds	Balcones Heights, TX 78201	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-
OF	Supplies Check if travel outside of Texas. Complete Schedule T.	
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/O	н	
		_

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 14/14 Rpt: 19/19	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
05/15/2025	The Orginal Donut
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$31.50	3307 Fredericksburg 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 Austin, TX, officeholder living expense PAC Meeting
	PAC Meeting
9 Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H