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) 00086577 3 COMMITTEE NAME **OFFICE USE ONLY** Habla Y Vota Action Fund Date Received **ELECTRONICALLY FILED** 07/03/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 19712 Austin, TX 78760 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Dr. Susana NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Carranza CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 40 N. IH35 Apt #4B1 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 40 N. IH35 Apt #481 MAILING **ADDRESS** Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 981-3732 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 05/26/2025 06/25/2025

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

			13 Filer ID	er ID (Ethics Commission Filers)	
			00086577		
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	1		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	0. Management	A Cupported			
	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.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00	
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		0.00	
	4. TOTAL POLITICAL EXPENDITURES		\$	10.00	
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		443.22	
OUTSTANDING LOAN TOTALS		6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			
6 AFFIDAVIT					
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.			
		Dr. Susa	ına Carranza		
		Signature of Co	ampaign Treasure	er	
AFFIX NOTA	RY STAMP / SEAL ABOVE				
Sworn to and subscrib	ped before me, by the said	,	this 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 office	er administering oath	

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			3 of 4
17 COMMIT	FEE NAME Vota Action Fund	18 Filer ID 00086577	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 10.00
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 F TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District - 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: 1/1 Rpt: 4/4	Habla Y Vota Action Fund 00086577		
4 Date	5 Payee name		
05/30/2025	Frost Bank		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$10.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
8 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 fee		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held		