FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00081912 102 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Monique G NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Diaz CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Lukin T. NAME NICKNAME LAST **SUFFIX** Gilliland Jr. **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 824-0522 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/03/2026 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 150 Bexar

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 102

13 C / OH NAME	Diaz, Monique G (The	e Honorable)	14 Filer ID (00081912	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
/ dalilonal r ages	GENERAL			
	J GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
 16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS(OTHER THA	N PLEDGES, LOANS,	
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELE	CTRONICALLY)	\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$ 207,344.17
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 3,526.95	
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 29,955.15
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 222,024.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		l swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
			orable Monique G Dia	
		Signature o	f Candidate or Officeholo	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer	administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			C	OVER SHEET	3 of 102
18 F	ILER NA	ME	19 Filer ID	(Ethics Commissio	n Filers)
D	iaz, Mo	nique G (The Honorable)	00081912		
		E SUBTOTALS SCHEDULE		SUBTOTAL A	MOUNT
- 14	AIVIL OI	SOFIEDOLE			
1	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	203,603.36
2	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	3,740.81
3		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	29,955.15
6		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
1	D. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
1	1.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
1	2.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	v to complete this 1	form.	1 Total pages Schedule A(J)1: Sch: 1/52 Rpt: 4/102
2 FILER NAME Diaz, Moniqu	ue G (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081912
4 Date 06/24/2025	06/24/2025 A Nava & Glander Law Firm 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$500.00	
	San Antonio, TX 78231			
8 Contributor's F	Principal Occupation		9 Contributor's Job Title	•
10 Contributor's 6	employer/law firm		11 Law firm of contributor's sp	spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if	any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/22/2025	05/22/2025 Alvarez, Omar Contributor address; City; State; Zip Code			\$5,000.00
	San Antonio, TX 78258		I o	
	Principal Occupation		Contributor's Job Title	
Attorney	employer/law firm		Attorney Law firm of contributor's sp	anauga (if any)
	& Associates		Law IIIII of Contributor's Sp	spouse (ii aiiy)
	s a child, law firm of parent(s) (if	anyl		
ii continutori.	s a ciliu, iaw iiiii oi paleiii(3) (ii	arry)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/13/2025	Archer, Christian			\$5,000.00
	Contributor address; City; S San Antonio, TX 78212	State; Zip Code		
Contributor's F	rincipal Occupation		Contributor's Job Title	
Consultant			Consultant	
Contributor's	employer/law firm		Law firm of contributor's sp	spouse (if any)
Self Employe	ed			
If contributor is	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 2/52 Rpt: 5/102
2	FILER NAME	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)
	06/30/2025	BRANDON WONG & AS	-			\$516.45
		6 Contributor address; City;	State; Zip Code			
		San Antonio, TX 78204				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/05/2025 Bandoske & Butler PLLC.			\$500.00		
		Contributor address; City; San Antonio, TX 78230	J. J			
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2025	Beck, Hannah				\$25.00
		Contributor address; City;				
	Contributorio	San Antonio, TX 78229 Principal Occupation		Contributor's Job Title		
	Consultant	Principal Occupation		Managing Director		
-		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Booz Allen F					, ,,
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/52 Rpt: 6/102
2	FILER NAME	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/16/2025	 5 Full name of contributor Bernstein, Kelly 6 Contributor address; City; 	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		San Antonio, TX 78218				
8		Principal Occupation		9 Contributor's Job Title		
	Therapist			Therapist		
10	Contributor's 6 Self Employe	employer/law firm ed		11 Law firm of contributor's sp	ous	se (if any)
12		s a child, law firm of parent(s) (if	any)	<u>I</u>		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	06/16/2025	Bozada, John Contributor address; City;	<u> </u>		•	\$500.00
		San Antonio, TX 78212		_		
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Bozada PC	employer/law firm		Law firm of contributor's sp	ous	se (If any)
		s a child, law firm of parent(s) (if	· any)			
	ii contributor i	s a ciliiu, iaw iiiiii oi pareiii(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/19/2025	Briones, Ricardo				\$500.00
		Contributor address; City; San Antonio, TX 78210	State; Zip Code			
_	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	The Law Off	ice of Ricardo Briones				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/52 Rpt: 7/102
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Diaz, Moniqu	ue G (The Honorable)			00081912
4	Date 06/18/2025	5 Full name of contributor Brown, Olga6 Contributor address; City;	out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$500.00
		San Antonio, TX 78205			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10		employer/law firm		11 Law firm of contributor's s	spouse (if any)
_		of Olga Brown			
12	If contributor i	s a child, law firm of parent(s) (i	fany)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/28/2025	Butler, Chase			\$516.45
		Contributor address; City;	State: Zip Code		··
		Boerne, TX 78006			
		Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Self Employ	ed 			
	If contributor i	s a child, law firm of parent(s) (i	f any)		
-	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/30/2025	Calfas Law Group PLLC	–		\$500.00
		Contributor address; City;	State; Zip Code		·· <mark> </mark>
L		San Antonio, TX 78205			
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (i	f any)		
_					

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 5/52 Rpt: 8/102
2	FILER NAME	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/09/2025	 5 Full name of contributor Campolo, Paul 6 Contributor address; City; \$ 	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Alamo Heights, TX 7820	9			
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm of Maloney & Campolo LLP		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	05/16/2025	Canales, David (The Hol Contributor address; City; \$				\$100.00
	O a materilla cata and a 1	San Antonio, TX 78259		O antilla de de Tide		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
		employer/law firm		Law firm of contributor's sp	2011	co (if amy)
	David Canal			Law iiiii oi contiibatoi 3 3	Jou	se (ii diiy)
		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/28/2025	Carabin & Shaw PC Contributor address; City; \$	State; Zip Code			\$2,581.45
		San Antonio, TX 78212				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	ow to complete this f	form.		pages Schedule A(J)1 6/52 Rpt: 9/102	:
2	FILER NAME				3 Filer ID) (Ethics Commission	on Filers)
	Diaz, Moniq	ue G (The Honorable)			00081	1912	
4	Date 06/18/2025	5 Full name of contributor Carrisalez, Albert6 Contributor address; City;	out-of-state PAC (ID#:		7 Amour	nt of Contribution (\$)	\$50.00
		San Antonio, TX 78212					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Public Relat	ions		AVP for Community &	Governmei	nt Relations	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if an	y)	
	University of	Texas at San Antonio					
12	! If contributor i	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amour	nt of Contribution (\$)	
	06/17/2025	Cevallos, Mark					\$500.00
		Contributor address; City;	State: Zip Code				
	Contributor's I	San Antonio, TX 78201 Principal Occupation		Contributor's Job Title			
	Attorney	Throipar Goodpation		Attorney			
_		employer/law firm		Law firm of contributor's s	nouse (if an	w)	
		of Mark A. Cevallos		Law min or contributor 5 5	pouse (ii uii	<i>y)</i>	
		s a child, law firm of parent(s) (i	f any)				
	ii continbutor i	s a clinu, iaw iiiiii oi pareni(s) (i	rany)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amour	nt of Contribution (\$)	
	06/18/2025	Chasnoff Stribling LLP					\$5,000.00
		Contributor address; City;	State; Zip Code				
		San Antonio, TX 78209		T - "			
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if an	у)	
	If contributor i	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/52 Rpt: 10/102
2	FILER NAME Diaz, Moniqi	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/18/2025	5 Full name of contributor Chasnoff, Barry6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		San Antonio, TX 78212				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm ıngia Valkenaar Pepping & S	Striblina LLP	11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if				
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	06/23/2025	Christian & Nisbet PLLC Contributor address; City;	<u> </u>			\$516.45
		San Antonio, TX 78212		T		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2025	Clark, Will				\$5,000.00
		Contributor address; City; San Antonio, TX 78212	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Mission Injui					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/52 Rpt: 11/102
2	FILER NAME	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/18/2025	5 Full name of contributor Cline, Scott6 Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$500.00
		San Antonio, TX 78216				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firm Thornton Biechlin Segrato Reynolds and Guerra 11 Law firm of contributor's sp				oouse	e (if any)
12		s a child, law firm of parent(s) (if				
12	. II CONTINUATOR II	s a cilliu, iaw iiriii oi parerii(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/21/2025	Colemere, Connor	—			\$516.45
		Contributor address; City; San Antonio, TX 78216	State; Zip Code			
_	Contributor's I			Contributor's Job Title		
	Attorney	Principal Occupation		Attorney		
						(15)
	Colemere La	employer/law firm		Law firm of contributor's sp	Jouse	e (II any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2025	Contreras, Floyd	ъ .			\$50.00
		Contributor address; City;	State; Zip Code			
		San Antonio, TX 78238				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney at Law		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Prince Contr	eras PLLC				
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1	_
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 9/52 Rpt: 12/102	
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912)
4	Date 06/13/2025	5 Full name of contributor Cortez, Adam 6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$206	5.70
		San Antonio, TX 78210					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney at Law			
10	10 Contributor's employer/law firm Cortez Law Firm				oous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>			
	Date	Full name of contributor	Out of state DAC (ID#s	,	T	Amount of Contribution (\$)	
	Date Full name of contributor out-of-state PAC (ID#:) 06/18/2025 Crawford, Marco Contributor address; City; State; Zip Code			\$2,500).00		
		San Antonio, TX 78255					
		Principal Occupation		Contributor's Job Title			
	Lawyer			Lawyer			
		employer/law firm		Law firm of contributor's sp	oous	se (if any)	
		ford Law PLLC					
	If contributor is	s a child, law firm of parent(s) (i	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/18/2025	Curl, Paul	_			\$1,000	00.0
		Contributor address; City;	State; Zip Code				
		San Antonio, TX 78205					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney at Law			
		employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	Curl Stahl G	eis PC					
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 10/52 Rpt: 13/102
2	FILER NAME Diaz, Moniqi	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/10/2025	Full name of contributor Davis Law Firm Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78216				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	ee (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/16/2025	De La Rosa, Ashley Contributor address; City;	<u> </u>			\$5,000.00
	Contributorio	San Antonio, TX 78255		Contributor's Job Title		
	Accounting	Principal Occupation		Accountant		
		employer/law firm		Law firm of contributor's sp	20110	o (if any)
	J & P Paving			Law IIIII of Continuator 5 3	Jous	e (ii aiiy)
_		s a child, law firm of parent(s) (i	f any)			
	coatc	o a o ma, iam mm or parom(o) (i	,			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	06/30/2025	Deyeso, Jane	_	·		\$1,548.95
		Contributor address; City; San Antonio, TX 78259	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self Employ	ed				
	If contributor i	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A	\(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	ı	otal pages Schedule A(J)1: ch: 11/52 Rpt: 14/102	
2	FILER NAME				1	iler ID (Ethics Commission	n Filers)
	Diaz, Moniqu	ue G (The Honorable)				0081912	
4	Date 06/18/2025	5 Full name of contributor ESPINOZA, JAVIER6 Contributor address; City;	out-of-state PAC (ID#:)	7 A	mount of Contribution (\$)	\$1,000.00
		San Antonio, TX 78216					
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10	Contributor's 6 Espinoza & I	employer/law firm Brock PLLC		11 Law firm of contributor's sp	oouse	(if any)	
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	1			
	Date	Full name of contributor	out-of-state PAC (ID#:)	А	mount of Contribution (\$)	
	06/30/2025	Edwards, John Contributor address; City;	<u> </u>				\$100.00
		Houston, TX 77009					
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Physician			Physician			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse	(if any)	
	John D Edwa	ards MD PA					
	If contributor is	s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	06/09/2025	Espronceda, Jennifer	_				\$750.00
		Contributor address; City;	State; Zip Code				
-	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney at L			Attorney at Law			
_		employer/law firm		Law firm of contributor's sp	ouse	(if any)	
	Espronceda Law PLLC Norton Rose Fulbright				,		
	If contributor is	s a child, law firm of parent(s) (if	any)	L			

	MONET	ARY POLITICAL		SCHEDULE	A(J)1		
	The Instru	ction Guide explains ho	w to complete this t	form.	1	al pages Schedule A(J)1 1: 12/52 Rpt: 15/102	l:
2	FILER NAME	ue G (The Honorable)			1	r ID (Ethics Commissi 81912	on Filers)
4	Date 06/18/2025	5 Full name of contributor Farrimond Castillo & Bre 6 Contributor address; City;				ount of Contribution (\$)	\$500.00
		San Antonio, TX 78205					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse (if	any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	ount of Contribution (\$)	
	06/17/2025 Fassold, Mark Contributor address; City; State; Zip Code				(,)	\$1,000.00	
		San Antonio, TX 78209					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
	Contributor's Guerra LLP	employer/law firm		Law firm of contributor's sp	oouse (if	any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)	L			
-	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	ount of Contribution (\$)	
	06/30/2025	Fischer, Ashley		·			\$103.45
Contributor address; City; State; Zip Code Liberty Hill, TX 78642							
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u>I</u>		
	Lawyer			Lawyer			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if	any)	
	Tiff's Treats			Law Office of Justin A.	Fischer		
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL CONTR	ONS		SCHEDULE	A(J)1	
	The Instru	ction Guide explains how to comp	lete this f	orm.		ages Schedule A(J)1 3/52 Rpt: 16/102	L:
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			3 Filer ID 00081	(Ethics Commissi 912	on Filers)
4	Date 06/18/2025	 5 Full name of contributor out-of-stage out-of-	ate PAC (ID#:_)	7 Amoun	t of Contribution (\$)	\$2,500.00
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	<u> </u>		
	Attorney			Attorney			
10		employer/law firm Garcia & Curiel PLLC		11 Law firm of contributor's sp	ouse (if any	')	
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-sta	ate PAC (ID#:_)	Amoun	t of Contribution (\$)	
	O6/30/2025 Garcia, Emmanuel Contributor address; City; State; Zip Code Austin, TX 78747					\$250.00	
	Contributor's F	I Principal Occupation		Contributor's Job Title	l		
	Consultant			Co-Owner			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any	<i>'</i>)	
	Seeker Strat	tegies					
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-sta	ate PAC (ID#:_)	Amoun	t of Contribution (\$)	
	06/12/2025	Garza & Associates Pllc					\$1,000.00
		Contributor address; City; State; Zip Cod San Antonio, TX 78229	le				
	Contributor's I	Principal Occupation		Contributor's Job Title			
Contributor's employer/law firm Law firm of contrib			Law firm of contributor's sp	ouse (if any	')		
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL		SCHEDULE A(J)1				
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 14/52 Rpt: 17/102		
2	FILER NAME Diaz. Moniqu	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912		
4	Date 06/18/2025	5 Full name of contributorGibson, Gary6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$350.00		
		San Antonio, TX 78209						
8		Principal Occupation		9 Contributor's Job Title	9			
	Attorney			Attorney				
10	Contributor's 6 Carabin & S	employer/law firm haw PC		11 Law firm of contributor's sp	oous	se (if any)		
12	! If contributor is	s a child, law firm of parent(s) (i	f any)					
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)		
	O6/24/2025 Glander, Troy Contributor address; City; State; Zip Code				\$516.45			
		San Antonio, TX 78260						
		Principal Occupation		Contributor's Job Title				
	Attorney			Attorney				
	Nava & Glar	employer/law firm		Law firm of contributor's sp	oous	se (if any)		
		s a child, law firm of parent(s) (i	f any)					
	ii contributor i	s a ciliu, iaw iiiii oi pareiii(s) (i	i airy)					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	06/30/2025	Golando, Martin				\$258.32		
Contributor address; City; State; Zip Code								
	Contributor's I	San Antonio, TX 78201 Principal Occupation		Contributor's Job Title				
	Lawyer	этпстрат Оссирацоп		Lawyer				
		employer/law firm		Law firm of contributor's sp	วดน	se (if any)		
	Self-employe					()		
	If contributor is	s a child, law firm of parent(s) (i	f any)					

	MONET	ARY POLITICAL	ONS	SCHEDULE A(J)1			
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 15/52 Rpt: 18/102	
2	FILER NAME	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912	
4	Date 06/18/2025	 5 Full name of contributor Gonzales, Roland 6 Contributor address; City; \$ 	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00	
		San Antonio, TX 78249					
8		Principal Occupation		9 Contributor's Job Title			
10	Lawyer	employer/law firm		Lawyer	20110	o (if any)	
10	Germer PLL			11 Law firm of contributor's sp	Jous	e (II arry)	
12	If contributor is	s a child, law firm of parent(s) (if	any)	1			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	06/25/2025 Gonzalez Chiscano Angulo & Kasson P.C. Contributor address; City; State; Zip Code San Antonio, TX 78216				\$500.00		
L	Contributor's I	Principal Occupation		Contributor's Job Title			
	Continuators	-ппсіраї Оссираціон		Continuator 5 300 Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2025 Gonzalez, Andres Contributor address; City; State; Zip Code				\$250.00		
H	Contributor's F	San Antonio, TX 78258 Principal Occupation		Contributor's Job Title	<u> </u>		
	Consultant			Consultant			
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)	
	Self						
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	al pages Schedule A(J)1 n: 16/52 Rpt: 19/102	Ŀ
2	FILER NAME Diaz, Moniqi	ue G (The Honorable)			1	r ID (Ethics Commissi 081912	on Filers)
4	Date 06/18/2025	5 Full name of contributor Guerra LLP6 Contributor address; City;	out-of-state PAC (ID#:		7 Am	ount of Contribution (\$)	\$5,000.00
		San Antonio, TX 78212					
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse (if	any)	
12	! If contributor is	s a child, law firm of parent(s) (if	any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	ount of Contribution (\$)	
	06/11/2025 Guevara Law firm PLLC Contributor address; City; State; Zip Code				\$250.00		
		San Antonio, TX 78207					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if	any)	
	If contributor is	s a child, law firm of parent(s) (i	any)	L			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Am	ount of Contribution (\$)	
	06/11/2025	HUCKABAY, Paul	_				\$2,500.00
		Contributor address; City; San Antonio, TX 78258	State; Zip Code				
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney			General Counsel			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if	any)	
	Aggregate H	laulers					
	If contributor is	s a child, law firm of parent(s) (if	any)	•			

	MONET	ARY POLITICAL		SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 17/52 Rpt: 20/102
2	FILER NAME Diaz. Moniqu	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/12/2025	5 Full name of contributor Haass, Christopher6 Contributor address; City;	out-of-state PAC (ID#:		_	Amount of Contribution (\$) \$1,000.00
		San Antonio, TX 78212				
8		Principal Occupation		9 Contributor's Job Title		
	Consultant			Consultant		
10	Contributor's (The Haass (employer/law firm Group		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (i	f anv)			
		, , , , , , , , , , , , , , , , , , , ,	,			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	06/30/2025	Hakeem Law PLLC				\$250.00
		Contributor address; City; Katy, TX 77450	State, Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2025	Hall, Tom				\$250.00
		Contributor address; City; San Antonio, TX 78216				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	The Law Off	ice of Tom C. Hall				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL		SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 18/52 Rpt: 21/102
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/18/2025	5 Full name of contributor Hennigan, Steve6 Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$1,000.00
		San Antonio, TX 78259				
8		Principal Occupation		9 Contributor's Job Title		
	Managemen			President/CEO		
10	Contributor's e Credit Huma	employer/law firm In		11 Law firm of contributor's sp	oouse	e (if any)
12		s a child, law firm of parent(s) (if	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	<u> </u>	Amount of Contribution (\$)
	O6/30/2025 Hernandez, George Contributor address; City; State; Zip Code			\$250.00		
		San Antonio, TX 78228				
		Principal Occupation		Contributor's Job Title		
L	Retired	employer/law firm		Retired Law firm of contributor's sp	201100	(if any)
	Retired	employer/law lilli		Law iiiii oi continuttoi 3 3	Jouse	s (ii arry)
	If contributor is	s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/27/2025	Herrera, Jorge Contributor address; City;	State; Zip Code			\$2,500.00
		San Antonio, TX 78207				
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	The Herrera	Law Firm				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 19/52 Rpt: 22/102
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/25/2025	Full name of contributor Higdon Hardy and Zufla Contributor address; City;			7	Amount of Contribution (\$) \$1,000.00
		San Antonio, TX 78230				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	05/21/2025	Hill Law Firm Contributor address; City;	<u> </u>			\$2,000.00
		San Antonio, TX 78216				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/19/2025	Hilley & Solis	_			\$2,581.45
Contributor address; City; State; Zip Code						
_	Contributorio	San Antonio, TX 78201		Contributorio Job Titlo		
	Contributors	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this t	form.		pages Schedule A(J) 20/52 Rpt: 23/102	L:
2	FILER NAME				3 Filer I	D (Ethics Commissi	on Filers)
	Diaz, Moniqu	ue G (The Honorable)			0008	1912	
4	Date 06/27/2025	Full name of contributor Holland, RachelContributor address; City;	out-of-state PAC (ID#:_		7 Amou	nt of Contribution (\$)	\$250.00
		San Antonio, TX 78248					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Public Affair	S		Public Affairs			
10	Contributor's of Meta	employer/law firm		11 Law firm of contributor's s	spouse (if ar	ny)	
12	If contributor i	s a child, law firm of parent(s) (i	f any)	1			
_	Date	Full name of contributor	out-of-state PAC (ID#:)	I Amou	nt of Contribution (\$)	
	06/27/2025	Hollis, Nick	out or state 1710 (IBM.		7	0. 00	\$1,032.70
	00,1,72020	Contributor address; City;	State: 7in Code				+=,00=0
		San Antonio, TX 78209					
		Principal Occupation		Contributor's Job Title			
	Retired			Retired			
	Contributor's e	employer/law firm		Law firm of contributor's s	spouse (if ar	ny)	
	If contributor i	s a child, law firm of parent(s) (i	f any)	1			
_	Date	Full name of contributor	out-of-state PAC (ID#:		Т Атон	nt of Contribution (\$)	
	06/30/2025	Janicek Law Firm Pc	U out-of-state FAC (ID#.		Amou	πι οι Continbation (ψ)	\$2,581.45
	00/00/2020	Contributor address; City;	State: 7in Code				Ψ2,001.40
			State, 2.p code				
		San Antonio, TX 78209		T =			
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if ar	ny)	
	If contributor i	s a child, law firm of parent(s) (i	f any)	1			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 21/52 Rpt: 24/102
2	FILER NAME Diaz, Moniqi	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/17/2025	5 Full name of contributor Jefferson Cano6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$1,000.00
		San Antonio, TX 78205				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Jones, Becky Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$103.45		
		Ingleside, TX 78362		1		
	Contributor's Retired	Principal Occupation		Contributor's Job Title Retired		
			Law firm of contributor's sp	oous	e (if any)	
	Date Full name of contributor out-of-state PAC (ID#:) 06/11/2025 Katzman, Alex Contributor address; City; State; Zip Code Shavano Park, TX 78230			Amount of Contribution (\$) \$500.00		
	Contributor's F	Principal Occupation		Contributor's Job Title	1	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
		of Katzman & Katzman PLLC s a child, law firm of parent(s) (i				

	MONET	ARY POLITICAL		SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 22/52 Rpt: 25/102
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 05/21/2025	5 Full name of contributor Kauss, George6 Contributor address; City;	out-of-state PAC (ID#:		↓	Amount of Contribution (\$) \$250.00
		San Antonio, TX 78202				
8		Principal Occupation		9 Contributor's Job Title		
	Investing			Managing Partner		
10	Contributor's 6 Group CMK	employer/law firm LLC		11 Law firm of contributor's sp	oouse	e (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ.	Amount of Contribution (\$)
	06/30/2025 Kelly, Thomas Contributor address; City; State; Zip Code				\$500.00	
	0	Austin, TX 78746		I 0 17 1 1 77		
	Printer	Principal Occupation		Contributor's Job Title Printer		
_		employer/law firm		Law firm of contributor's sp	ากแร	(if any)
	Kelly Graphi					, (3),
		s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)	T .	Amount of Contribution (\$)
	06/04/2025	Kolb, Carl	_			\$1,000.00
		Contributor address; City; Austin, TX 78704	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Carl J. Kolb					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 23/52 Rpt: 26/102
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/24/2025	5 Full name of contributor Koob, Christopher6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$500.00
		Shavano Park, TX 7823	1			
8		Principal Occupation		9 Contributor's Job Title		
	Consulting			Partner		
10	O Contributor's MBA Consul	employer/law firm Iting Group		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/25/2025	Kustoff & Sanders LLP Contributor address; City;	State; Zip Code			\$1,000.00
		San Antonio, TX 78230				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/09/2025	Lane, Neel	_			\$750.00
		Contributor address; City; San Antonio, TX 78210	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp		e (if any)
	Norton Rose	e Fulbright		Espronceda Law PLLC		
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 24/52 Rpt: 27/102
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Diaz, Moniq	ue G (The Honorable)		00081912
4	Date	5 Full name of contributor ut-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)
	06/16/2025	Langley & Banack		\$750.00
		6 Contributor address; City; State; Zip Code		
		San Antonio, TX 78212		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12	2 If contributor i	s a child, law firm of parent(s) (if any)	1	
-	Date	Full name of contributor out-of-state PAC (ID#:	. ,	Amount of Contribution (\$)
	06/30/2025	Law Office of David T. Denton PC	·	\$100.00
	00/30/2023	Contributor address; City; State; Zip Code		
	Contributor's	San Antonio, TX 78209 Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		
	ii contributor i	s a clind, law little of parefuls) (if any)		
F	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	06/30/2025	Law Office of Diane Martinez		\$250.00
		Contributor address; City; State; Zip Code		
		San Antonio, TX 78210		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		
\vdash				

	MONET	TARY POLITICAL CONTRIBUTION)NS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to complete this f	form.		pages Schedule A(J)1 25/52 Rpt: 28/102	ž.
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)		3 Filer II 0008	D (Ethics Commission 1912	on Filers)
4	Date 06/24/2025	 Full name of contributor out-of-state PAC (ID#:_Law Office of John Michael Johnson PLLC Contributor address; City; State; Zip Code 		7 Amou	int of Contribution (\$)	\$500.00
Ļ	O tuille - ytowlo (Spring Branch, TX 78070	To Constitute de Joh Title	<u> </u>		
8	Contributor s r	Principal Occupation	9 Contributor's Job Title			
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	oouse (if ar	ıy)	
12	! If contributor is	is a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:_		Amou	ınt of Contribution (\$)	
	06/24/2025	Law Office of Jon Powell PLLC Contributor address; City; State; Zip Code				\$500.00
<u> </u>		San Antonio, TX 78205		l		
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's 6	employer/law firm	Law firm of contributor's sp	oouse (if ar	ıy)	
	If contributor is	is a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amou	int of Contribution (\$)	
	06/30/2025	Law Office of Monica E. Guerrero				\$250.00
		Contributor address; City; State; Zip Code San Antonio, TX 78260				
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's 6	employer/law firm	Law firm of contributor's sp	oouse (if ar	ıy)	
	If contributor is	is a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	w to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 26/52 Rpt: 29/102
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/19/2025 5 Full name of contributor out-of-state PAC (ID#:) Law Office of Patricia Jay PLLC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$1,000.00	
		San Antonio, TX 78212				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	06/03/2025	Law Offices of Fidel Rod Contributor address; City; S	riguez Jr			\$500.00
		San Antonio, TX 78212		1		
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/19/2025	Law Offices of Rashin Ma	azaheri PC			\$500.00
		Contributor address; City; S San Antonio, TX 78205	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	ouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL CONTRIBU	JTIC	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete	this f	form.	1	Total pages Schedule A(J)1: Sch: 27/52 Rpt: 30/102
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Diaz, Moniq	ue G (The Honorable)			l	00081912
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Law Offices of Thomas G. Kemmy 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$2,500.00		
		San Antonio, TX 78212				
8	Contributor's	I Principal Occupation		9 Contributor's Job Title	<u> </u>	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oou	se (if any)
12	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor ut-of-state PAC	C (ID#:	,	Т	Amount of Contribution (\$)
	06/15/2025	Law office of Matthew J Badders	C (ID#	J	l	\$250.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78215		_		
	Contributor's	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor ut-of-state PAC	C (ID#:)	Π	Amount of Contribution (\$)
	06/18/2025	Law office of Shawn C Brown PC	` -			\$500.00
		Contributor address; City; State; Zip Code				
	Combulloutoulo	San Antonio, TX 78205		Constributorio Joh Title		
	Contributors	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		L		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 28/52 Rpt: 31/102
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/30/2025	5 Full name of contributor Lawson, Clinton6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$516.45
		San Antonio, TX 78212				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm ice of Clinton F. Lawson		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/21/2025	Lisa Duke Law PLLC Contributor address; City;	State; Zip Code			\$500.00
		San Antonio, TX 78218				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2025	Lopez, David	_			\$500.00
		Contributor address; City; San Antonio, TX 78230	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Lopez Law F	-irm				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	w to complete this	form.	1	otal pages Schedule A(J)1: ch: 29/52 Rpt: 32/102	=
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			1	ler ID (Ethics Commission Filers) 0081912	
4	Date 06/26/2025	5 Full name of contributor Lopez, Steven6 Contributor address; City;	out-of-state PAC (ID#:		↓	mount of Contribution (\$) \$1,000.0	0
		San Antonio, TX 78258					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney at Law			
10	Contributor's e Lopez Law F	employer/law firm Firm		11 Law firm of contributor's sp	oouse (if any)	
12	•	s a child, law firm of parent(s) (i	f any)				_
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ai	mount of Contribution (\$)	
	06/18/2025	Lubel Voyles LLP Contributor address; City;	State; Zip Code			\$5,000.C	0
		Houston, TX 77057					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	_
	If contributor is	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Aı	mount of Contribution (\$)	_
	06/30/2025	Lutz, Zachary	_			\$103.4	.5
		Contributor address; City; San Antonio, TX 78216	State; Zip Code				
	Contributor's I	Principal Occupation		Contributor's Job Title			_
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (if any)	
	Self Employe						
	If contributor is	s a child, law firm of parent(s) (i	f any)				
							_

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 30/52 Rpt: 33/102
2	FILER NAME Diaz, Moniqi	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/30/2025			7	Amount of Contribution (\$) \$1,032.70	
		San Antonio, TX 78205				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's 6	employer/law firm ns PC		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (if	anv)			
	. Il continuator i	o a orma, law mm or paremi(s) (ii	u.iy)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/27/2025	Maloney, Janice Contributor address; City;	State; Zip Code			\$2,500.00
		San Antonio, TX 78229				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
		s a child, law firm of parent(s) (if	any)	1		
		I = 11			_	
	Date 05/30/2025	Full name of contributor Maloney, Tim	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$3,000.00
	03/30/2023	Contributor address; City; San Antonio, TX 78205	State; Zip Code			\$5,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	- micipal Occupation		Attorney		
-		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Maloney and					. ,
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 31/52 Rpt: 34/102
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 05/23/2025	5 Full name of contributorMaloney Jr., Pat6 Contributor address; City; \$	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78212				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm of Pat Maloney Jr		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)
	06/16/2025	Maloney Law Group PLL Contributor address; City; \$				\$2,581.45
		San Antonio, TX 78210				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/09/2025	Maltos, Manuel				\$5,000.00
		Contributor address; City; s Helotes, TX 78023				
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Maltos Law	Firm PLLC				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A(J)1			
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 32/52 Rpt: 35/102			
2	FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Diaz, Moniq	ue G (The Honorable)			00081912			
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Manion, Stephen 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$5.00					
		San Antonio, TX 78219						
8	Contributor's	Principal Occupation		9 Contributor's Job Title				
	First respon	der training		CEO				
10	Contributor's of Frontline Su	employer/law firm rvival Inc.		11 Law firm of contributor's s	oouse (if any)			
12	If contributor i	s a child, law firm of parent(s) (if	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)			
	06/24/2025	Marco Bass Law Firm	out or state 1710 (1511.	/	\$3,500.00			
		Contributor address; City; S	tate; Zip Code					
		San Antonio, TX 78212						
	Contributor's	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)			
	If contributor i	s a child, law firm of parent(s) (if	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)			
	05/21/2025	Martin & Drought PC		-	\$1,000.00			
		Contributor address; City; S	tate; Zip Code					
	Ot-iletle -	San Antonio, TX 78205		Occasionate de Tale Tide				
	Contributor's	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	oouse (if any)			
	If contributor i	s a child, law firm of parent(s) (if	any)					

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A	\(J)1
	The Instru	ction Guide explains hov	v to complete this f	form.	I	tal pages Schedule A(J)1: ch: 33/52 Rpt: 36/102	
2	FILER NAME	ue G (The Honorable)			I	er ID (Ethics Commission)	n Filers)
4					nount of Contribution (\$)	\$5,000.00	
		San Antonio, TX 78263					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse (i	f any)	
12	2 If contributor is	s a child, law firm of parent(s) (if	any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:_)	An	nount of Contribution (\$)	
	06/30/2025	Marvel Law Group PLLC Contributor address; City; S				(,,	\$206.70
		San Antonio, TX 78212					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (i	f any)	
	If contributor is	s a child, law firm of parent(s) (if	any)	<u></u>			
	Date	Full name of contributor	out-of-state PAC (ID#:)	An	nount of Contribution (\$)	
	06/30/2025	Marynell Maloney Law Fi Contributor address; City; S					\$2,500.00
		San Antonio, TX 78210					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (i	f any)	
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 34/52 Rpt: 37/102
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/11/2025	5 Full name of contributorMcQuade Leibowitz, Dav6 Contributor address; City; S)	7	Amount of Contribution (\$) \$1,000.00
		San Antonio, TX 78245				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firmThe Law Offices of David McQuade Leibowitz P.C.				oous	se (if any)
12		s a child, law firm of parent(s) (if		L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2025	Menchaca, Gerardo Contributor address; City; \$	State; Zip Code			\$250.00
		San Antonio, TX 78216		T		
		Principal Occupation		Contributor's Job Title		
	Lawyer	employer/law firm		Lawyer Law firm of contributor's sp	2011	on (if any)
	Escamilla &			Law littl of contributors sp	Jous	se (II ally)
		s a child, law firm of parent(s) (if	any)			
_	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/18/2025	Meritz Reddy Law	_			\$2,500.00
		Contributor address; City; S San Antonio, TX 78231	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor 3 i	mopai Occupation		Contributor 3 30b Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	I.		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 35/52 Rpt: 38/102
2	FILER NAME Diaz. Moniqu	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/19/2025	5 Full name of contributor Monnig, James6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$300.00
		San Antonio, TX 78212				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firmLaw Office of James E. Monnig11 Law firm of contributor's sp				oous	se (if any)
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2025 Moreno, Dennis Contributor address; City; State; Zip Code				\$500.00	
		San Antonio, TX 78251				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	<u> </u>		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/30/2025	Nash-Stacey, Addie		,		\$516.45
Contributor address; City; State; Zip Code			•			
	Contributorio	Bellaire, TX 77401		Constributed a Joh Title		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
	Contributor's employer/law firm Law firm of contributor's s				oous	se (if any)
	Self	, , , , , , , , , , , , , , , , , , ,				())
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	form.	1	Total pages Schedule A(J)1: Sch: 36/52 Rpt: 39/102
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/18/2025 5 Full name of contributor out-of-state PAC (ID#:) Nava, Alex 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$2,500.00		
		Shavano Park, TX 78230				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	ANG PLLC	a a shile law firms of payaget(a) (if		BioBridge Global		
12	: II CONTRIBUTOR IS	s a child, law firm of parent(s) (if a	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/18/2025 Norton Rose Fulbright US LLP Texas Committee Contributor address; City; State; Zip Code				\$1,000.00	
	Caratuila utaula I	Houston, TX 77010-3095		Constributoulo Joh Titlo		
	Contributors	Principal Occupation		Contributor's Job Title		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/24/2025	O'Donnell, Michael	_			\$1,000.00
		Contributor address; City; S San Antonio, TX 78212	tate; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp		se (if any)
	Norton Rose	Fulbright US LLP		Haynes and Boone LLF)	
	If contributor is	s a child, law firm of parent(s) (if a	any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 37/52 Rpt: 40/102
2	FILER NAME	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Diaz, Moniq	ue G (The Honorable)			00081912
4	Date 06/30/2025				7 Amount of Contribution (\$) \$5,000.00
		San Antonio, TX 78209			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10	0 Contributor's employer/law firm Guerra LLP / Carabin Shaw				pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	Out of state BAC (ID#:		Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#: 06/19/2025 Ocañas, Gilberto)	\$500.00
Contributor address; City; State; Zip Code			tate; Zip Code		
	Combulloutoulo	San Antonio, TX 78258		Constributorio Joh Titlo	
Contributor's Principal Occupation Contributor's Job Title Business advisor Senior Advisor					
					acuse (if any)
	Self Employ	employer/law firm		Law firm of contributor's sp	ouse (ii ariy)
		s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/16/2025	Ortiz Law Offices	_		\$750.00
Contributor address; City; State; Zip Code		tate; Zip Code			
	0	San Antonio, TX 78216		I a	
	Contributors	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	any)	I	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 38/52 Rpt: 41/102
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/19/2025			7	Amount of Contribution (\$) \$2,500.00	
		San Antonio, TX 78201				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Poling, Mark Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$516.45		
		San Antonio, TX 78218		T		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
	Contributor's e	employer/law firm ollc s a child, law firm of parent(s) (i	f any)	Law firm of contributor's sp	oous	se (if any)
H	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	06/30/2025	Poncio, Adam Contributor address; City; San Antonio, TX 78229				\$600.00
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Poncio Law If contributor is	Offices P.C. s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A	4(J)1
	The Instru	ction Guide explains ho	w to complete this f	orm.	1	otal pages Schedule A(J)1 Sch: 39/52 Rpt: 42/102	
2	FILER NAME Diaz, Moniqu	R NAME Monique G (The Honorable)			1	iler ID (Ethics Commission 0081912	on Filers)
4	Date 06/30/2025	–		7 A	mount of Contribution (\$)	\$1,000.00	
		San Antonio, TX 78216					
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oouse	(if any)		
12	! If contributor is	s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	ТА	mount of Contribution (\$)	
	O6/28/2025 Puente, Robert Contributor address; City; State; Zip Code				`,	\$1,548.95	
	0	San Antonio, TX 78229		I o			
		Principal Occupation		Contributor's Job Title Attorney			
_	Attorney	and a coull according				(if a m.)	
	Self Employe	employer/law firm		Law firm of contributor's sp	ouse	(II ally)	
			i anu)				
	ii contributor i	s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	А	mount of Contribution (\$)	
	06/30/2025	Pulman, Hailey					\$103.45
Contributor address; City; State; Zip Code San Antonio, TX 78248							
-	Contributor's I	I Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
				Law firm of contributor's sp	oouse	(if any)	
Ahmad Zavitsanos and Mensing							
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 40/52 Rpt: 43/102
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/19/2025	5 Full name of contributor Ramirez, Alfred6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		San Antonio, TX 78260				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firmRamirez Law Firm11 Law firm of contributor's sp				oous	se (if any)
12		s a child, law firm of parent(s) (if	anv)			
	- ii contributor i	s a crima, law inini or parent(s) (ii	uny)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/10/2025 Reynaldo L. Diaz Jr. Pc Contributor address; City; State; Zip Code				\$2,500.00	
	Contributor's I	San Antonio, TX 78212 Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/24/2025	Rios, Raul	_			\$1,000.00
		Contributor address; City; San Antonio, TX 78259	State; Zip Code			
	Contributor's I	rincipal Occupation		Contributor's Job Title		
	Attorney			Attorney		
Contributor's employer/law firm Law firm of contributor's s				oous	se (if any)	
	Self Employe	ed				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 41/52 Rpt: 44/102
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/30/2025	5 Full name of contributor Rios, Roberto6 Contributor address; City;	out-of-state PAC (ID#:		↓	Amount of Contribution (\$) \$250.00
		San Antonio, TX 78257				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firm11 Law firm of contributor's spThe Rios Legal Group PLLC					e (if any)
12		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	05/21/2025 Ripper Law PLLC Contributor address; City; State; Zip Code			\$500.00		
	Contributor's I	San Antonio, TX 78213 Principal Occupation		Contributor's Job Title		
	Contributor 3 i	- micipal Occupation		Continuator 3 300 Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/16/2025	Rodriguez, Magdalena	_			\$1,000.00
		Contributor address; City; San Antonio, TX 78222	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Managemen	t		Office Manager		
	Contributor's employer/law firm Law firm of contributor's sp				oouse	e (if any)
	J & P Paving	g Co				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 42/52 Rpt: 45/102
2	FILER NAME	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/10/2025	 5 Full name of contributor Rosenthal Pauerstein S. 6 Contributor address; City; 	-		_	Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78212				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			pouse	e (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$) \$50.00		
		San Antonio, TX 78247				
		Principal Occupation		Contributor's Job Title		
	Attorney	employer/law firm		Attorney Law firm of contributor's sp	201104	o (if any)
		edondo Jr. P.C.		Law IIIII of Contributor's Sp	pouse	e (II ally)
		s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
06/30/2025 Saldana, Barbara Contributor address; City; State; Zip Code San Antonio, TX 78249				\$100.00		
-	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
Contributor's employer/law firm Law firm of contributor's sp			pouse	e (if any)		
	Bexar Count					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

M	ONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
Th	ne Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 43/52 Rpt: 46/102
	ER NAME az, Moniqu	ue G (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081912
4 Dat	site		7 Amount of Contribution (\$) \$5,000.00	
		Shavano Park, TX 78230		
	ntributor's F corney	Principal Occupation	9 Contributor's Job Title Attorney	
	10 Contributor's employer/law firm Law firm of contributor's sp Law Offices of George Salinas PLLC		pouse (if any)	
		s a child, law firm of parent(s) (if any)	1	
Dai 06/	te /27/2025	Full name of contributor out-of-state PAC (ID# Sandoval, Cathleen Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$250.00
		San Antonio, TX 78232		
		Principal Occupation	Contributor's Job Title	
	acher		Teacher	
NIS		employer/law firm	Law firm of contributor's sp Frank D. Sandoval Jr. A	
		s a child, law firm of parent(s) (if any)	Trank D. Sandoval St. 7	attorney at Law
Dat	te	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)
06/	/24/2025	Santoyo Wehmeyer P.C. Contributor address; City; State; Zip Code		\$1,000.00
Coi	ntributor's F	San Antonio, TX 78216 Principal Occupation	Contributor's Job Title	
Coi	ntributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
If c	ontributor is	s a child, law firm of parent(s) (if any)	1	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 44/52 Rpt: 47/102
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 05/28/2025			7	Amount of Contribution (\$) \$2,500.00	
		San Antonio, TX 78216				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firm11 Law firm of contributor's specianoTinsman & Sciano			oous	e (if any)	
12		s a child, law firm of parent(s) (if	· anv)			
	. Il contributor i	s a crima, law inini or parcria(s) (ii	uny)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2025 Serna Jr., Baltazar Contributor address; City; State; Zip Code			\$500.00		
		San Antonio, TX 78205				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Self Employe					
	If contributor is	s a child, law firm of parent(s) (if	any)			
_	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/24/2025	Shaw Law PLLC	_			\$500.00
		Contributor address; City; San Antonio, TX 78209	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
		тторы Сосиралот				
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	L		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 45/52 Rpt: 48/102
2	FILER NAME	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/30/2025	5 Full name of contributor Shimerda, Philip6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$103.45
		San Antonio, TX 78250				
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired		
10	10 Contributor's employer/law firm				oous	e (if any)
12		s a child, law firm of parent(s) (i	f any)			
	Date O6/18/2025 Full name of contributor out-of-state PAC (ID#:) Skemp, Andrew Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,032.70		
	Contributor's F	San Antonio, TX 78209 Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's e	employer/law firm r Firm		Law firm of contributor's sp	oous	e (if any)
		s a child, law firm of parent(s) (if	f any)	<u> </u>		
	Date 06/27/2025	Full name of contributor Smyth, Lauren Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$2,581.45
	O antilla tanka	San Antonio, TX 78205		Occasionate Internal		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
				Law firm of contributor's sp	oous	e (if any)
		s a child, law firm of parent(s) (if	f any)	<u>I</u>		

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1	ages Schedule A(J)1 6/52 Rpt: 49/102	:
2	FILER NAME				3 Filer ID	(Ethics Commission	on Filers)
	Diaz, Moniqu	ue G (The Honorable)			000819	912	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount	t of Contribution (\$)	
	05/22/2025	The Aguirre Law Firm					\$2,500.00
		6 Contributor address; City; St	ate; Zip Code				
		San Antonio, TX 78231					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	ouse (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (if a	ny)				
╞	D.t.	Full control of control of the			I A	1 - (Ο t-il (Δ)	
	Date 06/17/2025	Full name of contributor The Gamez Law Firm	out-of-state PAC (ID#:_)	Amount	t of Contribution (\$)	\$5,000.00
	00/1//2025	Contributor address; City; St					\$5,000.00
	Contributor's I	San Antonio, TX 78230 Principal Occupation		Contributor's Job Title			
H	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if a	ny)				
F	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	t of Contribution (\$)	
	06/30/2025	The Gordon Law Firm P.C					\$258.32
		Contributor address; City; St	ate; Zip Code				
	San Antonio, TX 78201						
Contributor's Principal Occupation Contributor's Job Title		Contributor's Job Title					
Contributor's employer/law firm			Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if a	ny)	<u> </u>			
\vdash							

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A(J)1			
	The Instru	ction Guide explains how to cor	nplete this f	orm.	1 Total pages Sche Sch: 47/52 Rpt:	
2	FILER NAME Diaz, Moniqu	ue G (The Honorable)			3 Filer ID (Ethics 00081912	Commission Filers)
4	Date 06/13/2025	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contril	s2,500.00	
8	Contributor's I	San Antonio, TX 78207 Principal Occupation		9 Contributor's Job Title	1	
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oouse (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if any)		<u> </u>		
Date Full name of contributor out-of-state PAC (ID#:_ 06/30/2025 The Morales Firm P.C. Contributor address; City; State; Zip Code			Amount of Contril	s500.00 \$500.00		
San Antonio, TX 78201 Contributor's Principal Occupation		Contributor's Job Title	1			
Contributor's employer/law firm				Law firm of contributor's sp	oouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)				
Date O6/24/2025 Full name of contributor out-of-state PAC (ID#:_ Thomas J Henry Law PLLC Contributor address; City; State; Zip Code San Antonio, TX 78269)	Amount of Contril	stion (\$) \$5,000.00		
	Contributor's I	I Principal Occupation		Contributor's Job Title		
Contributor's employer/law firm			Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 48/52 Rpt: 51/102	
2	FILER NAME Diaz, Monigi	ue G (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081912	
4	Date 06/30/2025	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$) \$250.00		
		Austin, TX 78704					
8		Principal Occupation		9 Contributor's Job Title			
	Executive			Co-Founder			
10	Contributor's 6 Seeker Strat	employer/law firm egies		11 Law firm of contributor's sp	oous	se (if any)	
12		s a child, law firm of parent(s) (i	f any)	L			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	06/29/2025 Toscano, Andrew Contributor address; City; State; Zip Code			\$2,500.00			
	Cambrilanda	San Antonio, TX 78230		Contributoulo Job Title			
	Contributor's Principal Occupation Contributor's Job Title Attorney Attorney						
-		employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	Gene Tosca					· •	
	If contributor is	s a child, law firm of parent(s) (if	f any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	06/30/2025 Townsend, Joyce Contributor address; City; State; Zip Code			\$100.00			
		San Antonio, TX 78248					
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>		
Retired Retired							
Contributor's employer/law firm Law firm of contributor's sp		oous	se (if any)				
Retired							
	If contributor is	s a child, law firm of parent(s) (if	rany)				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 49/52 Rpt: 52/102
2	FILER NAME	ue G (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081912
4	Date 06/24/2025	ate 5 Full name of contributor out-of-state PAC (ID#:)		_	Amount of Contribution (\$) \$1,000.00	
		San Antonio, TX 78217				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's of Self Employe	employer/law firm ed		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	Quit of state BAC (ID#:	,	Т	Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Truss, James Contributor address; City; State; Zip Code			\$250.00		
		San Antonio, TX 78212				
	Contributor's Principal Occupation Attorney Contributor's Job Title Attorney		•			
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Steptoe & Jo	ohnson PLLC				
	If contributor is	s a child, law firm of parent(s) (if	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	06/30/2025	Valkenaar PLLC	_			\$1,000.00
Contributor address; City; State; Zip Code San Antonio, TX 78209						
-	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Continuation	imopai eccapation		Contributor of God Trace		
Contributor's employer/law firm Law firm of contributor's			oous	e (if any)		
	If contributor is	s a child, law firm of parent(s) (if	any)	I.		

	MONET	ARY POLITICAL	CONTRIBUTIO	DNS		SCHEDULE A	A(J)1
	The Instruction Guide explains how to complete this form.				otal pages Schedule A(J)1: ch: 50/52 Rpt: 53/102		
2	FILER NAME				3 F	ller ID (Ethics Commissio	n Filers)
	Diaz, Moniq	ue G (The Honorable)			0	0081912	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 A	mount of Contribution (\$)	
	06/02/2025	Villarreal & Begum Law	Group				\$5,000.00
		6 Contributor address; City; State; Zip Code					
		Brownsville, TX 78526		·			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse	(if any)	
12	If contributor i	s a child, law firm of parent(s) (i	f any)				
_	Dete	Full pages of contributor			Τ,	and the state of Constribution (f)	
	Date	Full name of contributor	out-of-state PAC (ID#:)	A	mount of Contribution (\$)	ቀንፎር ኃን
	06/30/2025	Walker, Cliff Contributor address; City;					\$258.32
		Austin, TX 78701					
	Contributor's Principal Occupation Contributor's Job Title		Contributor's Job Title	-			
	Co-founder			Principal			
	Contributor's	employer/law firm		Law firm of contributor's spouse (if any)			
	Seeker Strat	tegies					
	If contributor i	s a child, law firm of parent(s) (i	f any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	06/22/2025	Watkins & Shattles PLL	c				\$1,000.00
		Contributor address; City;	State; Zip Code		"		
		San Antonio, TX 78216					
	Contributor's I	Principal Occupation		Contributor's Job Title			
Contributor's employer/law firm		Law firm of contributor's s	pouse	(if any)			
_	If contributor i	s a child, law firm of parent(s) (i	f any)				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A(J)1			
	The Instru	ction Guide explains ho	w to complete this t	form.	1	otal pages Schedule A(J)1: ch: 51/52 Rpt: 54/102	
2	FILER NAME	ue G (The Honorable)			1	ler ID (Ethics Commission Filers)	1
4	Date 06/17/2025 5 Full name of contributor out-of-state PAC (ID#:) Wayne Wright LLP 6 Contributor address; City; State; Zip Code				mount of Contribution (\$) \$5,000	0.00	
		San Antonio, TX 78201					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse ((if any)	
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)				
H	Date	Full name of contributor	out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
06/25/2025 Wheeler Law PLLC Contributor address; City; State; Zip Code				\$516	.45		
		San Antonio, TX 78216		_			
Contributor's Principal Occupation			Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse ((if any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)	<u> </u>			
	Date	Full name of contributor	out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	06/30/2025	Wilson Law				\$516	.45
Contributor address; City; State; Zip Code							
		San Antonio, TX 78209		T - 0			
	Contributor's I	Principal Occupation		Contributor's Job Title			
Contributor's employer/law firm Law firm of contribu			Law firm of contributor's sp	ouse ((if any)		
	If contributor is	s a child, law firm of parent(s) (i	f any)	<u> </u>			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A(J)1		
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 52/52 Rpt: 55/102	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Diaz, Moniq	ue G (The Honorable)		00081912	
4		5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
	06/28/2025	Ybarra M.D., Manuel		\$500.00	
		6 Contributor address; City; State; Zip Code San Antonio, TX 78230			
8	Contributor's	Principal Occupation	9 Contributor's Job Title		
	Medicine		Doctor		
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)	
	Self				
12	! If contributor i	is a child, law firm of parent(s) (if any)	·		
_	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	06/17/2025	de los Santos, Hugo Xavier		\$350.00	
		Contributor address; City; State; Zip Code		···[
		San Antonio, TX 78201			
	Contributor's	Principal Occupation	Contributor's Job Title		
Attorney Attorney		Attorney			
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)	
	de los Santo	os Law Firm			
	If contributor i	is a child, law firm of parent(s) (if any)			

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: 56/102 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Diaz, Monique G (The Honorable) 00081912 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/17/2025 Gilliland Jr., Lukin \$3,740.811 "Covered event fees 7 Contributor address; City; State; Zip Code including beverage service, some supplies, and cleaning fees post San Antonio, TX 78209 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 F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi 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	
_	Tatal manage Calculula E4.	O. Files D. MAME
1	Total pages Schedule F1: Sch: 1/46 Rpt: 57/102	2 FILER NAME Diaz, Monique G (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081912
4	Date	5 Payee name
	06/03/2025	ADT Security
6	Amount (\$) \$62.63	7 Payee address; City; State; Zip Code PO Box 371878
		Pittsburgh, PA 15250
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Office Overhead/Rental Expense
	EXPENDITURE	Chick if Austin, TX, officeholder living expense
		Security system for officeholder
		, , , , , , , , , , , , , , , , , , ,
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/05/2025	ADT Security
	Amount (\$)	Payee address; City; State; Zip Code
	\$62.63	PO Box 371878
	Ψ02.00	1 O Box 0/10/0
		Pittsburgh, PA 15250
	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
		Security system for officeholder
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/03/2025	ADT Security
	Amount (\$)	Payee address; City; State; Zip Code
	\$62.63	PO Box 371878
	Ψ02.00	1 O Box 0/10/0
		Pittsburgh, PA 15250
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Security system for officeholder
	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

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: 2/46 Rpt: 58/102	Diaz, Monique G (The Honorable) 00081912
4 Date	5 Payee name
03/03/2025	ADT Security
6 Amount (\$) \$62.63	7 Payee address; City; State; Zip Code PO Box 371878 Pittsburgh, PA 15250
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Security system for officeholder
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/03/2025	ADT Security
Amount (\$) \$62.63	Payee address; City; State; Zip Code PO Box 371878
	Pittsburgh, PA 15250
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Security system for officeholder
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/03/2025	ADT Security
Amount (\$) \$62.63	Payee address; City; State; Zip Code PO Box 371878
	Pittsburgh, PA 15250
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Security system for officeholder
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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: 3/46 Rpt: 59/102	Diaz, Monique G (The Honorable)	00081912
4	Date	5 Payee name	
	02/24/2025	Amazon Prime	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$150.47	325 9th Ave. N.	
		Seattle, WA 98109	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 dod/Beverage Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
			d Supplies for CCDV and Court staff
		0.000,100 a.i.	a capping is. Color and countries.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	05/23/2025	Amazon	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$104.06	325 9th Ave. N.	
	•		
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 000/Develage Expense	outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense CCDV and Court Offices
		Groceries for	CCD v and Court Cinees
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	05/15/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$32.65	325 9th Ave. N.	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	outside of Texas. Complete Schedule T.
	EXI ENDITORE		n, TX, officeholder living expense d Supplies for Jurors and staff
		Giocenes an	a Supplies for Jurois and stail
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Office field
l			

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 Committ

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	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: 4/46 Rpt: 60/102	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	05/05/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$51.38	325 9th Ave. N.
		Seattle, WA 98109
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
		Groceries and Supplies for Jurors and staff
		Crossines and Supplies for various and stain
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Date	Davies same
		Payee name
	04/09/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.98	325 9th Ave. N.
		Seattle, WA 98109
	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.
		Crearing and Supplies for CCDV and Court staff
		Groceries and Supplies for CCDV and Court staff
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	D :	
	Date	Payee name
	04/08/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.85	325 9th Ave. N.
		Seattle, WA 98109
	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.
		Crossing and Supplies for CCDV and Court staff
		Groceries and Supplies for CCDV and Court staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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 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 Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 5/46 Rpt: 61/102	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	03/10/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$61.76	325 9th Ave. N.
		Seattle, WA 98109
8	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
		Groceries and Supplies for CCDV and Court staff
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to belieff C/Of	<u> </u>
	Date	Payee name
	03/05/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.50	325 9th Ave. N.
		Seattle, WA 98109
	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
		Groceries and Supplies for CCDV and Court staff
		Croceries and Supplies for CODV and Court stain
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/04/2025	Amazon
_		
	Amount (\$)	
	\$53.90	325 9th Ave. N.
		Seattle, WA 98109
	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
		Groceries and Supplies for CCDV and Court staff
		Crossing and cappiles for CODY and Count stain
\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)
vertising Expense Event Expense Loan Repayment/Reimbu

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

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

	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: 6/46 Rpt: 62/102	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	02/24/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$53.43	325 9th Ave. N.
		Seattle, WA 98109
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
		Groceries and Supplies for CCDV and Court staff
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/21/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$72.71	325 9th Ave. N.
		Seattle, WA 98109
	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 Groceries and Supplies for CCDV and Court staff
		Glocenes and Supplies for CCDV and Court stan
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Davido namo
	01/07/2025	Payee name
		Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.96	325 9th Ave. N.
		Seattle, WA 98109
	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 Groceries and Supplies for CCDV and Court staff
		Glocelles and Supplies for CCDV and Court stail
	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
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 com	ple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 7/46 Rpt: 63/102	Diaz, Monique G (The Honorable)		00081912
4	Date	5 Payee name		-
	01/06/2025	Amazon		
6	Amount (\$)	7 Payee address; City; State; Zip Code	<u>—</u>	
	\$71.21	325 9th Ave. N.		
		Seattle, WA 98109		
8	PURPOSE		h)	Description
U	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	υ,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 God/Beverage Expense		Check if Austin, TX, officeholder living expense
				Groceries and Supplies for CCDV and Court staff
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	01/03/2025	Amazon		
	Amount (\$)	Payee address; City; State; Zip Code	<u>—</u>	
	\$196.95	325 9th Ave. N.		
		Seattle, WA 98109		
	PURPOSE		h)	Description.
	OF	,	U)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
				Groceries and Supplies for CCDV and Court staff
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	04/15/2025	Best Buy		
	Amount (\$)	Payee address; City; State; Zip Code	e.	
	\$487.11	7601 Penn Avenue South	•	
	¥ .022			
		Richfield, MN 55423		
	PURPOSE OF	, ,	D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
				Computer for Campaign Manager
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/O			
_				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Fees

Event Expense 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		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)
_	Sch: 8/46 Rpt: 64/102		00081912
4	Date	5 Payee name	
	05/01/2025	Bromm, Zayda	
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 5744 watercress	
		San Antonio, TX 78238	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Continuation Dentations wade by	e of Texas. Complete Schedule T. officeholder living expense
		Garrandaes/Grinderioladi// Grinder Gorininaes	n Skit Sponsorship
		Tiesta comyanor	Tokk opensersing
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held
_	Date	Pausa nama	
	05/19/2025	Payee name Clack, Larry	
		•	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$360.00	2290 SH-237	
		Carmine, TX 78954	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 000/Deverage Expense	e of Texas. Complete Schedule T.
			officeholder living expense le event benefiting Ray of Sonshine
		1 ood for chartees	ic event benefiting ray of constinie
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	06/20/2025	Cooper's Meat Market	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$339.06	6002 Broadway	
		Alamo Heights, TX 78209	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		e of Texas. Complete Schedule T. officeholder living expense
		Catering for re-ele	
		Catering for re-en	oodon fariataloof
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to com	nple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 9/46 Rpt: 65/102	Diaz, Monique G (The Honorable)		00081912
4	Date	5 Payee name		
Ļ	06/23/2025	DeFee, Noelle		
6	Amount (\$) \$1,103.33	7 Payee address; City; State; Zip Cod P.O. Box 90883	ie	
	Ψ1,100.00	1 .C. Dox 30000		
		San Antonio, TX 78209		
8	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. Check if Austin, TX, officeholder living expense
				Campaign Management
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
L	expenditure to benefit C/Oi	1		
	Date	Payee name		
L	06/09/2025	DeFee, Noelle		
	Amount (\$) \$567.00	Payee address; City; State; Zip Cod P.O. Box 90883	le	
	\$507.00	P.O. BUX 90003		
		San Antonio, TX 78209		
┝	PURPOSE	T.	(b)	Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense Campaign Management
				Campaign Management
Г	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
L	05/23/2025	DeFee, Noelle		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
l	\$691.39	P.O. Box 90883 1033		
		San Antonio, TX 78209		
┡	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	3		Check if Austin, TX, officeholder living expense
				Campaign Management
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 10/46 Rpt:	Diaz, Monique G (The Honorable)	00081912
4	Date	5 Payee name	•
l	05/12/2025	DeFee, Noelle	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$269.57	P.O. Box 90883	
l			
		San Antonio, TX 78209	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descri	
	EXPENDITURE	Galaries/ Wages/ Cornitact Eabor	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense
		I — I —	aign Management
l			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experiditure to beriefit C/O	П	
	Date	Payee name	
	04/25/2025	DeFee, Noelle	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$645.33	P.O. Box 90883	
l			
L		San Antonio, TX 78209	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Calculation (Magnes (Contract Labor)) Checking (Magnes (Contract Labor))	ption ck if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Calaries/ Wages/ Cornilact Easter	ck if Austin, TX, officeholder living expense
l		Camp	aign Management
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
⊨	<u> </u>		
	Date 04/11/2025	Payee name DeFee, Noelle	
┡			
l	Amount (\$) \$508.33	Payee address; City; State; Zip Code P.O. Box 90883	
	φου.ου	1 .C. Box 30000	
		San Antonio, TX 78209	
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ption
l	OF EXPENDITURE	Salaries/Wages/Contract Labor	ck if travel outside of Texas. Complete Schedule T.
l	LXI ENDITORE	·	ck if Austin, TX, officeholder living expense
		Camp	aign Management
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/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: 11/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	03/31/2025	DeFee, Noelle
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$377.67	P.O. Box 90883
		San Antonio, TX 78209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Management
_	Commission ONII V if disposit	Condidate/Office holds
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/18/2025	DeFee, Noelle
	Amount (\$)	Payee address; City; State; Zip Code
	\$336.00	P.O. Box 90883
		San Antonio, TX 78209
	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.
		Check if Austin, TX, officeholder living expense Campaign Management
		Campaigh Management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davis same
	01/30/2025	Payee name
		Down on Grayson
	Amount (\$)	Payee address; City; State; Zip Code
	\$242.14	303 E Grayson St
_		San Antonio, TX 78215
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	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.
	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. Check if Austin, TX, officeholder living expense
	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.
	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 Team appreciation lunch
	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. Check if Austin, TX, officeholder living expense Team appreciation lunch Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	(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 Team appreciation lunch Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	(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 Team appreciation lunch 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		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ers)
L	Sch: 12/46 Rpt:	Diaz, Monique G (The Honorable) 00081912	
4	Date	5 Payee name	
	04/14/2025	Family Violence Prevention Services	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,500.00	7911 Broadway	
		San Antonio, TX 78209-2601	
8	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 Check if Austin, TX, officeholder living expense Annual Luncheon Sponsorship	
		, unda Editoricon oponsorstip	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
Ĺ	expenditure to benefit C/O		
	Date	Payee name	
	06/12/2025	Fogo De Chao	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$692.81	849 E Commerce St	
		393	
		San Antonio, TX 78205	
	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.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Team Appreciation Lunch for multiple life events	3
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/24/2025	Gonzales, Fernando	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	338 Notre Dame	
		San Antonio, TX 78228	
	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 Check if Austin, TX, officeholder living expense Charitable Golf Team Sponsorship benefitting S	:t
		Paul Paul	ι.
_	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 Commi

Event Expense Fees Food/Beverage Expense Git/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 Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		xpens Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:							Filer ID	(Ethics Commission Filers)
L	Sch: 13/46 Rpt:	Diaz, Moni	que G (The Honorable)					00081912	
4	Date	5 Payee name							
	06/02/2025	Google Wo	rkspace						
6	Amount (\$)	7 Payee addre	ess; City; S	tate; Zip Co	ode				
	\$76.75	1600 Ampl	nitheatre Parkway						
		Mountain V	iew, CA 94043						
8	PURPOSE	(a) Category (c	iee Categories listed at the top of th	is cabadula)	(b)	Description			
	OF		rhead/Rental Expense	is scriedule)	``	_ ·	outsid	e of Texas. Comp	olete Schedule T.
	EXPENDITURE	000 010.				Check if Austin,	TX, c	officeholder living	expense
						CCDV Google	e Sı	uite	
L									
9	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ught			Office he	eld
L	experioralie to belieff C/Of	1							
	Date	Payee name							
	05/01/2025	Google Wo	rkspace						
	Amount (\$)	Payee addre	ess; City; S	tate; Zip Co	ode				
	\$76.75	1600 Amph	nitheatre Parkway						
		Mountain V	'iew, CA 94043						
	PURPOSE	(a) Category (s	iee Categories listed at the top of th	is schadula)	(b)	Description			
	OF		rhead/Rental Expense	is scriculic)	<u> </u> `´		outsid	e of Texas. Comp	olete Schedule T.
	EXPENDITURE		, , , , , , , , , , , , , , , , , , ,			Check if Austin,	TX, o	officeholder living	expense
						CCDV Google	e Sı	uite	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		iceholder name	Office sou	ught			Office he	eld
L	experience to beliefit 6/01								
	Date	Payee name							
	04/01/2025	Google Wo	rkspace						
	Amount (\$)	Payee addre	ess; City; S	tate; Zip Co	ode				
	\$2.29	1600 Amph	nitheatre Parkway						
		Mountain V	iew, CA 94043						
	PURPOSE	(a) Category (s	see Categories listed at the top of th	is schedule)	(b)	Description			
	OF EXPENDITURE		rhead/Rental Expense		1		outsid	e of Texas. Comp	olete Schedule T.
	EXPENDITURE		•			_		officeholder living	expense
						Officeholder (300	gle Suite	
					<u> </u>				
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ught			Office he	eld
	Superioritate 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 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	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 14/46 Rpt:	Diaz, Monique G (The Honorable)	00081912
4	Date	5 Payee name	
	04/01/2025	Google Workspace	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$76.75	1600 Amphitheatre Parkway	
		Mountain View, CA 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		L	Check if Austin, TX, officeholder living expense
			SCDV Google State
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Since Hold
_	Date	Payee name	
	03/03/2025	Google Workspace	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.68	1600 Amphitheatre Parkway	
	Ψ1.00	1000 Amphilinealie Faikway	
		Mountain View CA 04042	
		Mountain View, CA 94043	
	PURPOSE OF		Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
			Dfficeholder Google Suite
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	03/03/2025	Google Workspace	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$76.75	1600 Amphitheatre Parkway	
		Mountain View, CA 94043	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			CCDV Google Suite
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal 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: 15/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	02/03/2025	Google Workspace
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.68	1600 Amphitheatre Parkway
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Officeholder Google Suite
		Cilicentitudi Google Suite
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	02/03/2025	Google Workspace
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$76.75	1600 Amphitheatre Parkway
L		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CCDV Google Suite
		CODV Coogle Culte
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payso nama
	01/02/2025	Payee name Google Workspace
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.68	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholder Google Suite
		Officeriolder Google Suite
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
L		

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			Legal Services		s/Wage	es/Contract Labor		OTHER (enter a	strict a category not listed abo	ve)
	Credit Card Payment			The Instruction Gu	iide explains how to	comp	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission	n Filers)
	Sch: 16/46 Rpt:		Diaz, Moniq	ue G (The Hond	orable)				00081912		
4	Date	5	Payee name								
	01/02/2025		Google Wor	kspace							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Code					
	\$76.75		1600 Amphi	theatre Parkwa	y						
			·								
			Mountain Vi	ew, CA 94043							
8	PURPOSE	(2)				/h	\ Danawimtian				
°	OF	(a)		e Categories listed at th		(0)	Description Check if travel	outsi	de of Texas Com	nplete Schedule T.	
	EXPENDITURE		Office Over	nead/Rental Exp	Jense				officeholder living		
							CCDV Googl	e S	Suite		
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office s	ought	t		Office h	eld	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	06/24/2025		H-E-B								
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code					
	\$98.04		2416 E. Sixt	•	•						
			Austin, TX 7	8702							
	PURPOSE	(2)				[/h) Description				
	OF	(۵)		e Categories listed at the	ne top of this schedule)	(5)	_ `	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		roou/bever	age Expense			=		officeholder living		
							Groceries for	CC	CDV and Co	ourt Offices	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office s	ought	t		Office h	eld	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	06/24/2025		H-E-B								
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code					
	\$109.60		2416 E. Sixt	h St							
			Austin, TX 7	8702							
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne ton of this schedule)	(b)) Description				
	OF	 ` ´		age Expense	ie top of this scriedule)	` '		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE			J 1					officeholder living		
							Groceries for	CC	CDV and Co	ourt Offices	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Office s	ought	t		Office h	eld	
	experiorare to belieff C/OI	17									

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	06/20/2025	H-E-B
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$42.85	5601 Bandera Rd
		San Antonio, TX 78238
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
		Supplies for re-election fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/17/2025	H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$67.95	2416 E. Sixth St
		Austin, TX 78702
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Event Supplies for fundraiser
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Pouso namo
	06/17/2025	Payee name H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.95	2416 E. Sixth St
	402.30	2410 L. Giruii Gi
		Austin, TX 78702
	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
		Gift Cards for Volunteers
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experientare to benefit C/O	<u>'</u>

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 Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 18/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	06/17/2025	H-E-B
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$140.90	2416 E. Sixth St
		Austin, TX 78702
8	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
		Gift Cards for Volunteers
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	06/11/2025	H-E-B
	Amount (\$) \$33.96	Payee address; City; State; Zip Code 2416 E. Sixth St
	\$33.90	2410 E. SIXIII SI
		Austin, TX 78702
	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
		Groceries and Supplies for CCDV and Court staff
		Sisseries and supplies for Sisteries state.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	06/03/2025	Payee name H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.73	2416 E. Sixth St
		Austin, TX 78702
	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
		Groceries for CCDV and Court Offices
	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 Con

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:	
	Sch: 19/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	06/03/2025	H-E-B
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$109.78	2416 E. Sixth St
		Austin, TX 78702
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 Groceries for CCDV and Court Offices
		Glocelies for GEDV and Gourt Offices
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/Ol	
	Date	Payee name
	05/13/2025	H-E-B
	Amount (\$) \$62.14	Payee address; City; State; Zip Code 2416 E. Sixth St
	Φ02.14	2410 E. SIXIII SI
		A TV 70700
		Austin, TX 78702
	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
		Groceries for CCDV and Court Offices
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/08/2025	H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$81.27	2416 E. Sixth St
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Austin, TX 78702
	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
		Groceries for CCDV and Court Offices
	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 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 comp	lete this form.
1	Total pages Schedule F1: Sch: 20/46 Rpt:	2 FILER NAME Diaz, Monique G (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081912
4	Date 04/24/2025	5 Payee name H-E-B	I
6	Amount (\$) \$99.14	7 Payee address; City; State; Zip Code 2416 E. Sixth St Austin, TX 78702	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Groceries and Supplies for CCDV and Court staff
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 04/01/2025	Payee name H-E-B	
	Amount (\$) \$119.76	Payee address; City; State; Zip Code 2416 E. Sixth St Austin, TX 78702	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Groceries for CCDV and Court Offices
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 03/31/2025	Payee name H-E-B	
	Amount (\$) \$60.61	Payee address; City; State; Zip Code 2416 E. Sixth St	
		Austin, TX 78702	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Groceries and Supplies for CCDV and Court staff
	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 Committ

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 21/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
	Date 03/05/2025	5 Payee name H-E-B
6 /	Amount (\$) \$21.89	7 Payee address; City; State; Zip Code 2416 E. Sixth St
		Austin, TX 78702
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 Groceries and Supplies for CCDV and Court staff
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
(02/28/2025	H-E-B
,	Amount (\$) \$20.58	Payee address; City; State; Zip Code 2416 E. Sixth St
		Austin, TX 78702
	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 Groceries and Supplies for CCDV and Court staff
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
(02/20/2025	H-E-B
,	Amount (\$) \$137.01	Payee address; City; State; Zip Code 2416 E. Sixth St
		Austin, TX 78702
	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 Groceries and Supplies for CCDV and Court staff
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 22/46 Rpt:	Diaz, Monique G (The Honorable)	00081912		
4	Date	5 Payee name			
	01/30/2025	H-E-B			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$47.82	2416 E. Sixth St			
	!				
		Austin, TX 78702			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	1 Courbeverage Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense		
		l	and Supplies for CCDV and Court staff		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OF	Н			
	Date	Payee name			
	01/29/2025	H-E-B			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$128.91	2416 E. Sixth St			
	!				
		Austin, TX 78702			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	T 1 000/Develage Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense		
	!	l	or CCDV and Court Offices		
	!				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OF	н			
	Date	Payee name			
	01/29/2025	H-E-B			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$159.01	2416 E. Sixth St			
		Austin, TX 78702			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	1 000/Develage Expense	vel outside of Texas. Complete Schedule T.		
			stin, TX, officeholder living expense or CCDV and Court Offices		
		Oroccines in	or copy and court offices		
	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 comple	ete this form.
1	, -	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 23/46 Rpt:	Diaz, Monique G (The Honorable)	00081912
4	Date	5 Payee name	
	01/28/2025	H-E-B	
6	Amount (\$) \$63.34	7 Payee address; City; State; Zip Code 2416 E. Sixth St	
_		Austin, TX 78702	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Groceries and Supplies for CCDV and Court staff
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/06/2025	H-E-B	
	Amount (\$) \$550.00	Payee address; City; State; Zip Code 2416 E. Sixth St	
		Austin, TX 78702	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff appreciation belated holiday meal and gift cards
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 01/06/2025	Payee name H-E-B	
	Amount (\$) \$35.32	Payee address; City; State; Zip Code 20935 U.S. Hwy 281 N	
		San Antonio, TX 78258	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cakes for Team Appreciation Lunch
	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 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: 24/46 Rpt:		Diaz, Monique G (The Honorable)		00081912
4	Date	5	Payee name		·
	05/15/2025		HEB #718		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$83.06		516 S Flores St		
			San Antonio, TX 78204-1217		
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.
	LA LIBITORE				Check if Austin, TX, officeholder living expense Groceries and supplies for jurors and staff
					Groceries and supplies for jurors and stan
9	Complete ONLY if direct	Щ,	Candidate/Officeholder name Office so	uaht	Office held
5	expenditure to benefit C/O		Sandidate/Office floride Harrie	ugiit	Office field
_	Date	$\overline{}$	Davida nama		
	05/13/2025		Payee name HEB #718		
		╄		odo	
	Amount (\$)		Payee address; City; State; Zip C 516 S Flores St	oue	
	\$72.44		510 S FIOLES St		
			0 1 1 1 7 7 7000 1 1017		
		上	San Antonio, TX 78204-1217		
	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
					Groceries and supplies for jurors and staff
					,
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	Н			
	Date	T	Payee name		
	04/30/2025		HEB		
	Amount (\$)	\vdash	Payee address; City; State; Zip C	ode	
	\$25.05		12777 IH 10 West		
			San Antonio, TX 78230		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	``	Event Expense	'	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		•		Check if Austin, TX, officeholder living expense
					Items for Senior Fiesta Event
		丄		<u> </u>	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office so	ught	Office held
	·				

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	l 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: 25/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	04/14/2025	Hispanic Law Alumni Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1 Camino Santa Maria St.
		San Antonio, TX 78228
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
		Charitable contribution for annual dinner
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	06/18/2025	Jimmy John's
H	Amount (\$)	Payee address; City; State; Zip Code
	\$42.91	2212 Fox Drive
	,	
		Champaign, IL 61820
	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
		Meeting with CCDV staff re symposium
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	06/13/2025	Jimmy John's
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$52.46	2212 Fox Drive
	402.10	LETE 1 6X BING
		Champaign, IL 61820
	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 Meeting with campaign staff re upcoming event
		wieeung with campaigh stan re upcoming event
\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)

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 comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 26/46 Rpt:	Diaz, Monique G (The Honorable)	00081912
4	Date	5 Payee name	•
	06/13/2025	Jimmy John's	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$16.42	2212 Fox Drive	
		Champaign, IL 61820	
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.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Meeting with campaign staff re upcoming event
Ļ	0 1: 0:::::::::::::::::::::::::::::::::		000
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	d Office held
	·		
	Date	Payee name	
	06/11/2025	Jimmy John's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$52.46	2212 Fox Drive	
		Champaign, IL 61820	
	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
			Meeting with CCDV staff re tasks in progress
_	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
	expenditure to benefit C/OI		
-	Date	Payee name	
	05/22/2025	Jimmy John's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$39.28	2212 Fox Drive	
		Champaign, IL 61820	
	PURPOSE) Description
	OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	- Francisco - Fran	Check if Austin, TX, officeholder living expense
			Meeting with CCDV staff re Symposium
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	Office held
		•	

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 com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 27/46 Rpt:	Diaz, Monique G (The Honorable)		00081912
4	Date	5 Payee name		·
	05/21/2025	Jimmy John's		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$20.12	2212 Fox Drive		
		Champaign, IL 61820		
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 Meeting with campaign staff re upcoming event
				Meeting with earnpaigh stain to appointing event
9	Complete ONLY if direct	Candidate/Officeholder name Office sougl	ht	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·		Cinco nou
_	Date	Payee name		
	05/21/2025	Jimmy John's		
	Amount (\$)	Payee address; City; State; Zip Code	<u></u>	
	\$48.86	2212 Fox Drive		
	Ψ 10.00	ZZZZ FOX BIIIO		
		Champaign, IL 61820		
	PURPOSE	-	'h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	IJ	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Pood/Beverage Expense		Check if Austin, TX, officeholder living expense
				Meeting with staff re campaign planning
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht	Office held
	experientare to benefit Grot	'		
	Date	Payee name		
	05/19/2025	Jimmy John's		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$35.26	2212 Fox Drive		
		Champaign, IL 61820		
	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 for jurors
				1 dod for juriora
H	Complete ONLY if direct	Candidate/Officeholder name Office sougl	ht	Office held
	expenditure to benefit C/OI			333 11014

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 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: 28/46 Rpt:	Diaz, Monique G (The Honorable) 00081912	
4	Date	5 Payee name	
	04/30/2025	Jimmy John's	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$52.15	2212 Fox Drive	
		Champaign, IL 61820	
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 Meeting with CCDV staff re tasks in progress	
		Wiceting With CODV Stall To tasks in progress	
0	Complete ONLV if direct	Candidate/Officeholder name Office sought Office held	
9	Complete ONLY if direct expenditure to benefit C/OH		
L			
	Date	Payee name	
	04/24/2025	Jimmy John's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$191.02	2212 Fox Drive	
		Champaign, IL 61820	
	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	
		Food for training on Civil Family Violence Prevention	
		Program Program	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
-	Data	Pouse name	
	Date 04/07/2025	Payee name	
		Jimmy John's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$38.77	2212 Fox Drive	
L		Champaign, IL 61820	
	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 Meeting with campaign staff re upcoming event	
		iweeting with campaign stan re upcoming event	
	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: 29/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	04/03/2025	Jimmy John's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$36.61	2212 Fox Drive
		Champaign, IL 61820
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 Meeting with CCDV staff re Symposium
		iviceting with CCDV staff re Symposium
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/O	
⊨	Date	Payee name
	03/24/2025	Jimmy John's
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.10	2212 Fox Drive
	φ30.10	ZZIZ FOX DIIVE
		Champaign II 61920
	DUDD005	Champaign, IL 61820
	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
		Meeting with CCDV and Public Health Dept. re task
		in progress
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/05/2025	Jimmy John's
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.04	2212 Fox Drive
		Champaign, IL 61820
	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
		Meeting with CCDV staff re tasks in progress
		mosting man deby stain to tacke in progress
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: 30/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	02/20/2025	Jimmy John's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.32	2212 Fox Drive
		Champaign, IL 61820
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 Meeting with CCDV staff and Domestic Violence
		Task Force
Ļ	Commiste ONII V if dispet	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
_		
	Date	Payee name
	02/20/2025	Jimmy John's
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.04	2212 Fox Drive
		Champaign, IL 61820
	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
		Meeting with CCDV staff and Domestic Violence
		Task Force
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Data	
	Date	Payee name
	02/07/2025	Jimmy John's
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.27	2212 Fox Drive
		Champaign, IL 61820
	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
		Meeting with CCDV, and staff appreciation meal for court staff
	0 1: 0 1: 0	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
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 Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1	2 FILER NAME	3 Filer ID (Ethics Commission Filers
Sch: 31/46 Rpt:	Diaz, Monique G (The Honorable)	00081912
4 Date	5 Payee name	
01/27/2025	Jimmy John's	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$16.28	2212 Fox Drive	
	Champaign, IL 61820	
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 Meeting with CCDV staff re tasks in progress
		Weeting with CCDV staff re tasks in progress
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/0		agii.
Date	Davos namo	
06/11/2025	Payee name NGP VAN	
Amount (\$)	Payee address; City; State; Zip Co	
\$358.17		oue
Ψ550.17	Ste 650	
DUDDOG	Washington, DC 20005-5701	
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	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
		Program for officeholder use
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/0	JH	
Date	Payee name	
04/03/2025	NGP VAN	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$341.12	655 15th St NW	
	Ste 650	
	Washington, DC 20005-5701	
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.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Program for officeholder use
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/0		ugnit Office field

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 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: 32/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	03/05/2025	NGP VAN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$341.12	655 15th St NW
		Ste 650
		Washington, DC 20005-5701
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 Program for officeholder use
		r rogram for officeriolaer ase
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/07/2025	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$341.12	655 15th St NW
		Ste 650
		Washington, DC 20005-5701
	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 Program for officeholder use
		Trogram for omognoider ase
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	01/03/2025	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$341.12	655 15th St NW
		Ste 650
		Washington, DC 20005-5701
	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
		Program for officeholder use
	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 Con-

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		Gift/Awards/Memorials Expense Printing Expense mmittee Legal Services Salaries/Wages/C The Instruction Guide explains how to complete	Contract Labor	Travel Out of District OTHER (enter a category not liste	ed above)
1	Total pages Schedule F1:	T2		3	Filer ID (Ethics Com	mission Filers)
-	Sch: 33/46 Rpt:		Diaz, Monique G (The Honorable)		00081912	mssion Filers)
4	Date 06/02/2025	5	Payee name National Student Leadership Conference			
6	Amount (\$) \$578.00	7	Payee address; City; State; Zip Code 320 W. Ohio St Suite 4W Chicago, IL 60654			
8	PURPOSE OF EXPENDITURE	(a)	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if Austin, TX,	ide of Texas. Complete Schedule T c, officeholder living expense mentee to attend NSLC	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office sought		Office held	
	Date 04/01/2025		Payee name National Student Leadership Conference			
	Amount (\$) \$289.00		Payee address; City; State; Zip Code 320 W. Ohio St Suite 4W Chicago, IL 60654			
	PURPOSE OF EXPENDITURE	(a)	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if Austin, TX,	ide of Texas. Complete Schedule T c, officeholder living expense mentee to attend NSLC	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office sought		Office held	
	Date 04/01/2025		Payee name National Student Leadership Conference			
	Amount (\$) \$289.00		Payee address; City; State; Zip Code 320 W. Ohio St Suite 4W Chicago, IL 60654			
	PURPOSE OF EXPENDITURE	(a)	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if Austin, TX,	ide of Texas. Complete Schedule T , officeholder living expense mentee to attend NSLC	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office sought		Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	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: 34/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	03/03/2025	National Student Leadership Conference
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$289.00	320 W. Ohio St
		Suite 4W
		Chicago, IL 60654
8	PURPOSE	T
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Sponsorship for mentee to attend NSLC
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/30/2025	National Student Leadership Conference
	Amount (\$)	Payee address; City; State; Zip Code
	\$289.00	320 W. Ohio St
	Ψ203.00	Suite 4W
		Chicago, IL 60654
	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 Sponsorship for mentee to attend NSLC
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Dete	
	Date	Payee name
	06/02/2025	Paragon Solution Merch Fees
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,588.90	303 Perimeter Center N
		Ste 600
		Atlanda, GA 30346
	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
		Payment processing fees
	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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee	Gift/Awards/Memorials Legal Services The Instruction Gu		/Wage	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	FILED VI	AME				3	Filer ID	(Ethics Commission Filers)	
ľ	Sch: 35/46 Rpt:		onique G (The Hond	orable)				00081912	(Ethios commission Fliers)	,
4	Date	Payee n	ame							
	05/02/2025		n Solution Merch Fe	es						
6	Amount (\$)	Payee a	ddress; City;	State; Zip C	ode					
	\$25.00		rimeter Center N	, .						
	,	Ste 600								
L		Allanua	, GA 30346							
8	PURPOSE OF	a) Category	(See Categories listed at the	ne top of this schedule)	(b)	Description				
	EXPENDITURE	Fees						ide of Texas. Com		
						Payment pro		, officeholder living	expense	
						rayment pro	CCS	ising ices		
Ļ	Operation Of Walk East	0 ". ! :	10#iII-I	O.'''	1			0′′′′ :	.1.4	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate	e/Officeholder name	Office so	ught			Office he	eld	
F	Date	Payee n	ame							_
	04/02/2025		n Solution Merch Fe	es						
⊢	Amount (\$)	Payee a		State; Zip C	ode.					
	\$25.00	•	rimeter Center N	State, Zip C	Jule					
	\$25.00									
		Ste 600)							
		Atlanda	, GA 30346							
	PURPOSE	a) Category	(See Categories listed at the	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees						ide of Texas. Com		
	_/					ш		, officeholder living	expense	
						Payment pro	ces	sing iees		
L	2	- "	10.65		<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate	e/Officeholder name	Office so	ougnt			Office he	eia	
F	Date	Payee n	ame							_
	03/03/2025	•	n Solution Merch Fe	es						
					_ a a					
	Amount (\$)	Payee a		State; Zip C	oae					
	\$25.00		rimeter Center N							
		Ste 600								
		Atlanda	, GA 30346							
Г	PURPOSE	a) Category	(See Categories listed at the	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees				ш		ide of Texas. Com	•	
	LAFLINDITORL					ш		, officeholder living	expense	
						Payment pro	ces	ssing fees		
L										
	Complete ONLY if direct expenditure to benefit C/O	Candidate	e/Officeholder name	Office so	ught			Office he	eld	
L	experiulture to benefit C/OI									
					_					

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Gandidate/Officeholder/Political Committee Legal Services

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: Sch: 36/46 Rpt:	2 FILER NAME Diaz, Monique G (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081912				
4	Date 02/03/2025	5 Payee name Paragon Solution Merch Fees				
6	Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 303 Perimeter Center N Ste 600 Atlanda, GA 30346				
8	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 Payment processing fees				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date 01/02/2025	Payee name Paragon Solution Merch Fees				
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 303 Perimeter Center N Ste 600 Atlanda, GA 30346				
	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 Payment processing fees				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date 06/24/2025	Payee name Prestige Printing				
	Amount (\$) \$454.65	Payee address; City; State; Zip Code 8 Burwood Lane				
		San Antonio, TX 78216				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Event Backdrop				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By 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: 37/46 Rpt:	Diaz, Monique G (The Honorable)	00081912
4	Date	5 Payee name	
	06/12/2025	Prestige Printing	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$54.13	8 Burwood Lane	
		San Antonio, TX 78216	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense	outside of Texas. Complete Schedule T.
		Campaign Si	n, TX, officeholder living expense
		Campaign Si	JUNETS
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		Cilice Held
_	Date	Payee name	
	06/12/2025	Prestige Printing	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$286.86	8 Burwood Lane	
	φ200.00	o Bulwood Lalle	
		Can Antonia TV 7001C	
		San Antonio, TX 78216	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if to use	outside of Toyon Complete Caledula T
	EXPENDITURE	I filling Expense	outside of Texas. Complete Schedule T.
		Campaign E	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	I	
	Date	Payee name	
	06/12/2025	Prestige Printing	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$930.95	8 Burwood Lane	
		San Antonio, TX 78216	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense	outside of Texas. Complete Schedule T.
	EXPENDITORE		n, TX, officeholder living expense
		Campaign Ya	ard Signs
	Commission ONU Wife allows	Candidate/Officeholder name	Office held
	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 Commi

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

	Candidate/Officeholder/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: 38/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	06/12/2025	Prestige Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,136.63	8 Burwood Lane
		San Antonio, TX 78216
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
		Campaign Shirts
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/29/2025	Prestige Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.21	8 Burwood Lane
		San Antonio, TX 78216
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Stickers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/27/2025	ReadyRefresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.71	5410 Dietrich Rd

		San Antonio, TX 78219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Water for CCDV and court offices
	0 1. 0	
	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 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		
1	Total pages Caberlula Ed.		_
1	Total pages Schedule F1: Sch: 39/46 Rpt:	2 FILER NAME Diaz, Monique G (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081912	
4	Date	5 Payee name	
	05/21/2025	ReadyRefresh	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$64.71	5410 Dietrich Rd	
		San Antonio, TX 78219	
8	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	
		Water for CCDV and court offices	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
		···	
	Date	Payee name	
	04/16/2025	ReadyRefresh	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$60.93	5410 Dietrich Rd	
		San Antonio, TX 78219	
	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	
		Water for CCDV and court offices	
		Trace to God varia court omoso	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
	Date	Payee name	
	04/09/2025	ReadyRefresh	
	Amount (\$)	Payee address; City; State; Zip Code	-
	\$3.78	5410 Dietrich Rd	
			ĺ
		San Antonio, TX 78219	
	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 Water for CCDV and court offices	
		vvaler for CCDV and court offices	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica			Legal Services	als Expense	Salaries/V		se s/Contract Labor		OTHER (enter a	a category not listed	above)	
	Credit Card Payment			The Instruction	Guide explain	s how to co	mple	ete this form.					
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	ssion Filers)	
	Sch: 40/46 Rpt:		Diaz, Moniq	ue G (The Ho	norable)					00081912			
4	Date	5	Payee name					•	_				
	03/13/2025		ReadyRefre	sh									
6	Amount (\$)	7	Payee addres	ss; City;	Stat	e; Zip Co	de						
	\$22.26		5410 Dietric	h Rd									
			San Antonio	, TX 78219									
8	PURPOSE	(a)	Category (Sa	e Categories listed a	t the ton of this so	chedule)	(b)	Description					
	OF	l`		nead/Rental E		Siledule)	` ′	:	outsi	de of Texas. Con	nplete Schedule T.		
	EXPENDITURE							—		officeholder livin			
Water for CCDV and court of						offices							
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld		
		_											
	Date		Payee name										
	02/13/2025		ReadyRefre	sh									
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de						
	\$39.24		5410 Dietric	h Rd									
			San Antonio	, TX 78219									
	PURPOSE	(a)	Category (Se	e Categories listed a	t the top of this so	chedule)	(b)	Description					
	OF EXPENDITURE		Office Overh	nead/Rental E	xpense						nplete Schedule T.		
								ш	k if Austin, TX, officeholder living expense for CCDV and court offices				
	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld		
	expenditure to benefit C/O						0						
-	Date	Г	Payee name										
	01/16/2025		ReadyRefre	sh									
	Amount (\$)		Payee addres		State	e; Zip Co	nde						
	\$64.71		5410 Dietric		Otat	c, <u>L</u> ip 00	uc						
	40 2		0.120 2.000										
			San Antonio	TX 78219									
	PURPOSE	(0)					(h)	Description					
	OF	(a)		e Categories listed a nead/Rental E		chedule)	(D)	Description Check if travel of	outsi	de of Texas. Con	nplete Schedule T.		
	EXPENDITURE		Office Over	icau/iteritai L	хрепас					officeholder livin			
								Water for CC	DV	and court	offices		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld		
	experiulture to benefit C/Of	Π											
		_					_						

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		mmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpens Vages	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)	
L	Sch: 41/46 Rpt:		Diaz, Monio	ue G (The Hond	orable)				L	00081912		
4	Date	5	Payee name					•				
	01/03/2025		ReadyRefre	sh								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode					_
	\$3.78		5410 Dietric	h Rd								
			San Antonio	o, TX 78219								
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	ne top of this sch	edule)	(b)	Description				_
	OF EXPENDITURE			head/Rental Exp				=		de of Texas. Comp		
	ZAI ZHOHORZ							ш		officeholder living		
								Water for CC	υv	and court o	ilices	
_	Complete ONLY if direct	Ļ	Candidata/Off:	aahaldar nama		office as:	labt			Office ha	.ld	_
9	Complete ONLY if direct expenditure to benefit C/Oh		Januluale/Offi	ceholder name		office sou	aynt 			Office he	au .	
	Date		Payee name					<u> </u>				
	05/14/2025		Robinson, J	ames (Rev.)								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					
	\$500.00		4835 Lord F	Rd								
			2199									
			San Antonio	o, TX 78220								
	PURPOSE	(a)		ee Categories listed at th	ne ton of this scho	edule)	(b)	Description				_
	OF	<u> </u>		ns/Donations Ma		Jauic)	Ĭ.,	_ ·	outsi	de of Texas. Comp	olete Schedule T.	
	EXPENDITURE			Officeholder/Poli		ittee				officeholder living		
								Charitable co	ntri	ibution for ba	ack to school drive	
							Ļ					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	C	office sou	ıght			Office he	eld	
		_										_
	Date		Payee name									
	06/16/2025		Squarespac	e								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode					
	\$54.56		225 Varick	Street								
			12th Floor									
			New York, N	NY 10014								
	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description				_
	OF EXPENDITURE			head/Rental Exp		•		Check if travel		de of Texas. Comp		
	LAI LADITURE							_		officeholder living	expense	
								Officeholder (00ء	ogie Suite		
_	Complete ONLY if direct	Ц	Candidata/Off:	aahaldar nama		office as:	labt			Office he	.ld	_
	Complete ONLY if direct expenditure to benefit C/OH		Januluale/OTI	ceholder name	C	office sou	ıyııl			Onice ne	:iu	
												_

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: 42/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4 Date	5 Payee name
05/15/2025	Squarespace
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$54.56	225 Varick Street
	12th Floor
	New York, NY 10014
8 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 Officeholder Google Suite
	Oniceriolder Google Suite
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
04/15/2025	Squarespace
Amount (\$)	Payee address; City; State; Zip Code
\$54.56	225 Varick Street
	12th Floor
	New York, NY 10014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
LXI LINDITORE	Check if Austin, TX, officeholder living expense
	Officeholder Google Suite
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/20/2025	Squarespace
Amount (\$)	Payee address; City; State; Zip Code
\$15.59	225 Varick Street
	12th Floor
	New York, NY 10014
DUDDOSE	To the state of th
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Officeholder Google Suite
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)
ising Expense Event Expense Loan Repayment/Reimbu

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

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

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

Candidate/Officenoider/Politica Credit Card Payment	at Committee Legal Services Salaries/rvages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 43/46 Rpt:	2 FILER NAME Diaz, Monique G (The Honorable) 3 Filer ID (Ethics Commission Filers 00081912
4 Date	
03/17/2025	5 Payee name Squarespace
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$31.18	225 Varick Street
Ψ01.10	12th Floor
	New York, NY 10014
0 DUDDOCE	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Officeholder Google Suite
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/14/2025	Squarespace
Amount (\$)	Payee address; City; State; Zip Code
\$93.53	225 Varick Street
	12th Floor
	New York, NY 10014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Officeholder Google Suite
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/15/2025	Squarespace
Amount (\$)	Payee address; City; State; Zip Code
\$93.53	225 Varick Street
	12th Floor
	New York, NY 10014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Officeholder Google Suite
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientitie to beliefft 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 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: 44/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	01/27/2025	Texas Bar Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	515 Congress Ave
		Ste. 1755
		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.
		Check if Austin, TX, officeholder living expense
		Dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Data	David and the second
	Date	Payee name Toyog Public Padio
	06/30/2025	Texas Public Radio
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.83	321 W. Commerce Street
		San Antonio, TX 78205
	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
		Charlaste contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· ·
	Date	Payee name
	05/28/2025	Texas Public Radio
	Amount (\$) \$51.83	Payee address; City; State; Zip Code 321 W. Commerce Street
	Φ31.03	321 W. Commerce Street
		Con Antonio TV 70205
		San Antonio, TX 78205
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry Contributions/Donations Made Ry
	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
		Charitable contribution
	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 -

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	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 45/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	04/28/2025	Texas Public Radio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$51.83	321 W. Commerce Street
		San Antonio, TX 78205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Chantable continuution
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	03/28/2025	Texas Public Radio
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.83	321 W. Commerce Street
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Charitable contribution
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialiture to beliefit C/OI	'
	Date	Payee name
l	02/28/2025	Texas Public Radio
	02/28/2025 Amount (\$)	Texas Public Radio Payee address; City; State; Zip Code
	Amount (\$)	
		Payee address; City; State; Zip Code
	Amount (\$)	Payee address; City; State; Zip Code
	Amount (\$) \$51.83	Payee address; City; State; Zip Code 321 W. Commerce Street San Antonio, TX 78205
	Amount (\$) \$51.83 PURPOSE OF	Payee address; City; State; Zip Code 321 W. Commerce Street San Antonio, TX 78205 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	Amount (\$) \$51.83	Payee address; City; State; Zip Code 321 W. Commerce Street San Antonio, TX 78205 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee
	Amount (\$) \$51.83 PURPOSE OF	Payee address; City; State; Zip Code 321 W. Commerce Street San Antonio, TX 78205 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	Amount (\$) \$51.83 PURPOSE OF EXPENDITURE	Payee address; City; State; Zip Code 321 W. Commerce Street San Antonio, TX 78205 (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 Charitable contribution
	Amount (\$) \$51.83 PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee address; City; State; Zip Code 321 W. Commerce Street San Antonio, TX 78205 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Odd Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charitable contribution
	Amount (\$) \$51.83 PURPOSE OF EXPENDITURE	Payee address; City; State; Zip Code 321 W. Commerce Street San Antonio, TX 78205 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Odd Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charitable contribution
	Amount (\$) \$51.83 PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee address; City; State; Zip Code 321 W. Commerce Street San Antonio, TX 78205 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Odd Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charitable contribution

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	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: 46/46 Rpt:	Diaz, Monique G (The Honorable) 00081912
4	Date	5 Payee name
	01/28/2025	Texas Public Radio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$51.83	321 W. Commerce Street
		San Antonio, TX 78205
8	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
		Charlane contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/06/2025	Tower Americas Rest
	Amount (\$)	Payee address; City; State; Zip Code
	\$429.97	739 E Cesar E. Chavez Blvd
		San Antonio, TX 78205
	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 Team Appreciation Lunch
		ream Appreciation Editor
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
I		