DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE COVER SHEET PG 1

The DCE Instruction G	The DCE Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00058635					
3 FILER NAME	MS / MRS / MR	MI	OFFICE U	SE ONLY		
	NICKNAME	LAST Texas Freedor	n Network	SUFFIX	Date Received ELECTRONICAI 07/11/2025	LLY FILED
4 FILER ADDRESS	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	Y; STATE;	ZIP CODE	1	
	P.O. Box 1624				Date Hand-delivered or I	
E ELED BLIONE	Austin, TX 78705		TYTENGION		Receipt #	Amount
5 FILER PHONE	AREA CODE PHO (512) 212-5001	ONE NUMBER E	EXTENSION		Date Processed	1
6 REPORT TYPE	January 15 July 15		th day before election a day before election	า	Date Imaged	
			inoff			
7 PERIOD COVERED	Month Day Year 04/24/2025		IROUGH	Month Day 05/28/202	Year 5	
		ı				
8 ELECTION	ELECTION DATE Month Day Year 06/07/2025		rimary eneral	ELECTION T	YPE Other	
9 FILER ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ri	c Galvan San A	ntonio City Council	I D6	
(Attach lists on plain paper to complete this report if		B. Opposed				
necessary.)	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	•	•				
GO TO PAGE 2						

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE COVER SHEET PG 2

0 FILER NAME				11 Filer ID (Ethics Commission Filers)			
Texas Freedom Ne		00058635	00058635				
EXPENDITURE TOTALS	1. TOTAL UNITEM	IIZED POLITICAL EXPENDITURES	\$	0.0			
	2. TOTAL POLIT	ICAL EXPENDITURES	\$	7,051.9			
AFFIDAVIT	I		I				
		I swear, or affirm, under pe true and correct and include under Title 15, Election Cod	enalty of perjury, that the accomp es all information required to be de.	panying report is reported by me			
			Signature of Filer or ual with authority to sign on beha (only if Filer is an entity)	alf of entity			
AFFIX NOTARY STA	AMP / SEAL ABOVE						
Sworn to and subscr	ibed before me, by the sa	id	, this the _	day			
U	, 20, 10 00	rtify which, witness my hand and seal of office.	•				
Signature of office	er administering oath	Printed name of officer administering oath	h Title of officer adn	ninistering oath			

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE ADDENDUM

Page 3 of 11

						1 age 0 01 11
10 FILER NAME					11 Filer ID	(Ethics Commission Filers)
Texas Freedom Networ	k				00058635	
12 COMMITTEE ACTIVITY	1. Candidates (identify by name or, if applicable, classify by party)	A. Supported	Teri Castillo San	Antonio City C	ouncil D5	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (describe by date and location of election and nature of issue)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)					
12 COMMITTEE ACTIVITY	Candidates (identify by name or, if applicable, classify by party)	A. Supported	Randy Campbell	Kelleri SD Plac	ce 1	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (describe by date and location of election and nature of issue)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)					

9	SUB'	TOTAL	S - DC	E						FORM DCE
								(COVER S	SHEET PG 3 4 of 11
	ILER N	AME reedom Ne	etwork					15 Filer ID 00058635		ommission Filers)
								0000000		
		JLE SUBTO F SCHEDU							SUB	TOTAL AMOUNT
1	. Х	SCHED	ULE F1: PO	DLITICAL EX	PENDITUR	ES			\$	7,051.95
2	:	SCHED	ULE F2: UN	NPAID INCUF	RRED OBLI	GATIONS			\$	
3	i	SCHED	ULE F4: E>	(PENDITURE	ES MADE B	Y CREDIT (CARD		\$	
									•	

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
Git/Awards/Memorials Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Nages/Contract Labor OTHER (enter a category not listed above)
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 1/7 Rpt: 5/11	2 FILER NAME Texas Freedom Network	3 Filer ID (Ethics Commission Filers) 00058635
4 Date	5 Payee name	<u> </u>
04/28/2025	Community Labor Administrative Services	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$500.00	77 Sands St #6	
Expenditure from		
corporate funds	New York City, NY 11201	165
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Phone Banking	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Thome Banking	
		Phone Banking Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught Office held onio City Council District
	Galvan, Ric San Anto	onio City Councii District
Date	Payee name	
05/21/2025	Community Labor Administrative Services	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$500.00	77 Sands St	
Expenditure from	#6	
corporate funds	New York City, NY 11201	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Phone Banking	Check if travel outside of Texas. Complete Schedule T.
		Phone Banking Services
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight Office held
expenditure to benefit C/OI	Galvan, Ric San Anto	onio City Council District
Date	Payee name	
04/28/2025	Community Labor Administrative Services	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$500.00	77 Sands St	
Expenditure from	#6	
corporate funds	New York City, NY 11201	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Phone Banking	Check if travel outside of Texas. Complete Schedule T.
		Phone Banking Services
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	^H Campbell, Randy Keller IS	D Place Place 1

POLITICAL EXPENDITURES SCHEDULE F1 **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Legal Services 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 Filer ID (Ethics Commission Filers) Texas Freedom Network 00058635 Sch: 2/7 Rpt: 6/11 4 Date Payee name 04/30/2025 Facebook Advertising USA 6 Amount (\$) Payee address; City; State; Zip Code \$500.00 1601 Willow Rd Blda 10

Expenditure from corporate funds	Menlo Park, CA 94025-1453	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Facebook Ads
Complete ONLY if direct expenditure to benefit C/OI	1	sought Office held r ISD Place Place 1
Date 05/21/2025	Payee name Facebook Advertising USA	
Amount (\$) \$500.00 Expenditure from corporate funds	Payee address; City; State; Zip 1601 Willow Rd Bldg 10 Menlo Park, CA 94025-1453	o Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Facebook Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		sought Office held r ISD Place Place 1
Date 05/15/2025	Payee name Facebook Advertising USA	
Amount (\$) \$499.79 Expenditure from corporate funds	Payee address; City; State; Zip 1601 Willow Rd Bldg 10 Menlo Park, CA 94025-1453	o Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Facebook Ads
Complete ONLY if direct expenditure to benefit C/Ol		e sought Office held Antonio City Council District

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		g Expense Travel Out of District es/Wages/Contract Labor OTHER (enter a category not listed above)
4 7 1 0 1 1 54	·	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 3/7 Rpt: 7/11	Texas Freedom Network	00058635
4 Date	5 Payee name	
04/24/2025	HEB	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$36.70	646 S Flores St	
4000	0.000.00000	
Expenditure from	Car Antonia TV 70004	
corporate funds	San Antonio, TX 78204	
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.
		Food murchage for stoff
		Food purchase for staff
9 Complete ONLY if direct	Candidate/Officeholder name Office	S .
expenditure to benefit C/OI	H Galvan, Ric San A	ntonio City Council District
Date	Payee name	
04/30/2025	Scale to Win	
Amount (\$)	Payee address; City; State; Zip	Codo
` '		Code
\$369.25	13742 Harper St	
Expenditure from		
corporate funds	Santa Ana, CA 92703	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Texting Service	Check if travel outside of Texas. Complete Schedule T.
LAPENDITORE		
		Texting Service
Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held
expenditure to benefit C/OI	^H Galvan, Ric San A	ntonio City Council District
Date	Payee name	
04/30/2025	Scale to Win	
		0-4-
Amount (\$)	Payee address; City; State; Zip	Code
\$350.35	13742 Harper St	
Expenditure from		
corporate funds	Santa Ana, CA 92703	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Texting Service	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	,	
		Texting Service
Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held
expenditure to benefit C/OI	^H Campbell, Randy Keller	ISD Place Place 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

	Candidate/Officeholder/Politica Credit Card Payment					/ages	/Contract Labor		OTHER (enter a	category not listed a	above)
	,			on Guide explain	s how to co	mple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 4/7 Rpt: 8/11		Texas Freedom Netwo	'k					00058635		
4	Date	5	Payee name				•				
	04/24/2025		TriNet HR III, Inc.								
6	Amount (\$)	7	Payee address; City;	Stat	e; Zip Co	de					
	\$442.30		1 Park Place								
			Suite 600								
Г	Expenditure from corporate funds		Dublin, CA 94568-7983	!							
_	·	(-)			1	(1-)					
8	PURPOSE OF	(a)	Category (See Categories list		chedule)	(D)	Description Check if travel of	nuteir	de of Teyas Com	plete Schedule T.	
	EXPENDITURE		Salaries/Wages/Contra	Ct Labor			onesk ii daver e	Juton	ac or rexas. com	piete Genedale 1.	
							Staff Salaries				
9	Complete ONLY if direct		Candidate/Officeholder nan	ne	Office sou	ght			Office he	eld	
	expenditure to benefit C/O	۱ (Salvan, Ric		San Anto	nio	City Council D	ist	rict		
	Date		Payee name								
	04/28/2025		TriNet HR III, Inc.								
	Amount (\$)		Payee address; City;	Stat	e; Zip Co	de					
	\$156.58		1 Park Place								
			Suite 600								
Г	Expenditure from corporate funds		Dublin, CA 94568-7983	1							
	PURPOSE	(0)				(h)	D				
	OF	(a)	Category (See Categories list		chedule)	(D)	Description Check if travel of	outsio	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Salaries/Wages/Contra	CI Laboi			Ц			,	
							Staff Salaries				
	Complete ONLY if direct		Candidate/Officeholder nan	ne	Office sou	ght			Office he	eld	
	expenditure to benefit C/O	۱ (Salvan, Ric		San Anto	nio	City Council D	ist	rict		
	Date		Payee name								
	05/02/2025		TriNet HR III, Inc.								
	Amount (\$)		Payee address; City;	Stat	e; Zip Co	de					
	\$502.79		1 Park Place								
			Suite 600								
	Expenditure from corporate funds		Dublin, CA 94568-7983	}							
	PURPOSE	(a)				(h)	Description				
	OF	(α)	Category (See Categories list Salaries/Wages/Contra		chedule)	(5)		outsio	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		odianes/vvages/contra	ot Labor			_				
							Staff Salaries				
_		L									
	Complete ONLY if direct		Candidate/Officeholder nan	ne	Office sou	-			Office he	eld	
	expenditure to benefit C/O	¹ (Salvan, Ric		San Anto	nio	City Council D	ist	rict		

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	al Committee Legal Services Salaries/V The Instruction Guide explains how to co	Vages/Contract Labor mplete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 5/7 Rpt: 9/11	Texas Freedom Network		00058635
4 Date	5 Payee name		
05/17/2025	TriNet HR III, Inc.		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$664.61	1 Park Place		
	Suite 600		
Expenditure from corporate funds	Dublin, CA 94568-7983		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel of	outside of Texas. Complete Schedule T.
	!	Staff Salaries	
		Stan Salanes	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
expenditure to benefit C/OI	H Galvan, Ric San Anto	nio City Council D	District
Date	Payee name		
05/24/2025	TriNet HR III, Inc.		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$617.82	1 Park Place		
·	Suite 600		
Expenditure from	Dublin, CA 94568-7983		
corporate funds		<i>a</i> >	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	Check ii traver t	outside of Texas. Complete Schedule 1.
		Staff Salaries	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
expenditure to benefit C/OI	H Galvan, Ric San Anto	nio City Council D	District
Date	Payee name		
05/28/2025	TriNet HR III, Inc.		
Amount (\$)	Payee address; City; State; Zip Co	nde	
\$471.10	1 Park Place		
, <u></u>	Suite 600		
Expenditure from			
corporate funds	Dublin, CA 94568-7983		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	puteido of Toyon, Complete Schodule T
EXPENDITURE	Salaries/Wages/Contract Labor	Check ii traver t	outside of Texas. Complete Schedule T.
		Staff Salaries	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
expenditure to benefit C/OI		onio City Council I	District
1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

ement Solicitation/Fundraising Expense
transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment		Vages/Contract Labor	OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
Sch: 6/7 Rpt: 10/11	Texas Freedom Network	Texas Freedom Network 00058635					
4 Date	5 Payee name						
04/24/2025	TriNet HR III, Inc.						
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode					
\$170.36	1 Park Place						
	Suite 600						
Expenditure from corporate funds	Dublin, CA 94568-7983						
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.				
		Staff Salaries					
		Stail Salaries	,				
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıght	Office held				
expenditure to benefit C/OI	H Castillo, Teri San Anto	onio City Council E	District				
Date	Payee name						
04/24/2025	TriNet HR III, Inc.						
Amount (\$)	Payee address; City; State; Zip Co	ode					
\$72.88	1 Park Place						
	Suite 600						
Expenditure from corporate funds	Dublin, CA 94568-7983						
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.				
		Staff Salaries					
		Stall Salaties	•				
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıght	Office held				
expenditure to benefit C/OI	1.1	D Place Place 1					
Date	Payee name						
04/28/2025	TriNet HR III, Inc.						
Amount (\$)	Payee address; City; State; Zip Co	ode					
\$65.39	1 Park Place						
	Suite 600						
Expenditure from corporate funds	Dublin, CA 94568-7983						
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
OF	Salaries/Wages/Contract Labor	l <u>—</u>	outside of Texas. Complete Schedule T.				
EXPENDITURE							
		Staff Salaries	5				
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u> </u> aht	Office held				
expenditure to benefit C/OI		D Place Place 1	Cinice Hold				

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 Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal range Calculula E4.	
1 Total pages Schedule F1: Sch: 7/7 Rpt: 11/11	2 FILER NAME Texas Freedom Network 3 Filer ID (Ethics Commission Filers) 00058635
4 Date	5 Payee name
04/29/2025	TriNet HR III, Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$65.39	1 Park Place
Expenditure from	Suite 600
corporate funds	Dublin, CA 94568-7983
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Lahor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor
	Staff Salaries
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
experioration to benefit C/Or	Campbell, Randy Keller ISD Place Place 1
Date	Payee name
05/01/2025	TriNet HR III, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$33.32	1 Park Place
Expenditure from	Suite 600
corporate funds	Dublin, CA 94568-7983
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Staff Salaries
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1 Campbell, Randy Keller ISD Place Place 1
Date	Payee name
05/01/2025	TriNet HR III, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$33.32	1 Park Place
Expenditure from	Suite 600
corporate funds	Dublin, CA 94568-7983
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.
	Staff salary
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefit C/Of	'