#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00089224 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Economic Fund Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 341016 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78734 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Les NAME NICKNAME LAST **SUFFIX** Williamson STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1305 W. 11th Street STREET **ADDRESS** #213 (Residence or Business) Austin, TX 77008 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 9762 MAILING **ADDRESS** C/O SCS Seattle, WA 98109 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (508) 423-3328 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 05/29/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other X Runoff 06/07/2025 General Special **GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas Economic Fund			00089224	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ROLANDO PABLOS SAN AN	TONIO MAYO	DR
(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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	89,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	648,011.11
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	127,463.43
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			•	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Les \	Williamson	
		Signature of Ca	mpaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, ti	his the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer adr	ministering oath	Printed name of officer administering oath	Title of offic	er administering oath

### GENERAL-PURPOSE COMMITTEE REPORT:

### FORM GPAC

PURPOSE								Page 3 of 25
12 COMMITTEE NAME							13 Filer ID	(Ethics Commission Filers)
Texas Economic Fund							00089224	(Lunca Commission Filers)
	Ia Caralidada	A Commonted					00009224	
14 COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported						
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	GINA C	ORTIZ JC	NES SA	N ANTC	NIO MAYOR	
	Measures    (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	Officeholders     Assisted							
	(Identify by name or, if applicable, classify by party.)							

### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

					4 of 25
<b>17</b> CO	MMITTE	EE NAME	18 Filer ID	(Ethics Com	mission Filers)
Te	xas Eco	onomic Fund	00089224	•	,
10 SC	HEDIIII	E SUBTOTALS			
l	ME OF	SUBTO	TAL AMOUNT		
1471	IVIL OI				
1.	X	\$	70,000.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	19,000.00
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	648,011.11
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/4 Rpt: 5/25
2	FILER NAME Texas Econo	omic Fund		3 Filer ID (Ethics Commission Filers) 00089224
4	Date 06/03/2025	<ul> <li>Full name of contributor</li></ul>	:)	7 Amount of Contribution (\$) \$1,000.00
8	Principal occu ACCOUNTA	PATION / Job title (See Instructions)	9 Employer (See Instructions SELF-EMPLOYED	<u> </u> 
	Date 06/02/2025	Full name of contributor out-of-state PAC (ID# BAUBLIT, MARK  Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78230	:)	Amount of Contribution (\$) \$1,000.00
		pation / Job title (See Instructions) AL CONSTRUCTION	Employer (See Instructions MARKSMEN GENERAL	
	Date 05/29/2025	Full name of contributor out-of-state PAC (ID# Blanchard, Adam  Contributor address; City; State; Zip Code	:)	Amount of Contribution (\$) \$10,000.00
	Principal occu Business Ov	pation / Job title (See Instructions)	Employer (See Instructions Double Diamond Trans	
	Date 06/03/2025	Full name of contributor out-of-state PAC (ID# CALVERT, JOSEPH Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		Amount of Contribution (\$) \$1,000.00
	Principal occu REAL ESTA	pation / Job title (See Instructions) TE	Employer (See Instructions SELF-EMPLOYED	5)
	Date 05/29/2025	Full name of contributor out-of-state PAC (ID# CAVENDER, RICK Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	:)	Amount of Contribution (\$) \$2,500.00
	•	pation / Job title (See Instructions) AUTO FAMILY	Employer (See Instructions AUTO DEALER	5)

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 6/25	
2	FILER NAME Texas Econo	xas Economic Fund			3	Filer ID (Ethics Commission 00089224	on Filers)
4	Date 05/29/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_GOUGER, JAMES</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$1,000.00
ρ	Principal occur	SAN ANTONIO, TX 78209 pation / Job title (See Instructions)	l a	Employer (See Instructions	:, 		
0	ASSISTED L		9	SELF-EMPLOYED	·)		
	Date 05/29/2025	Full name of contributor out-of-state PAC (ID#:_ HARTENSTINE, HARVEY Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$250.00
	Principal occu	SAN ANTONIO, TX 78213 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u> </u> s)		
	BANKING EX	,		BROADWAY BANK	,		
	Date 06/04/2025	Full name of contributor		)		Amount of Contribution (\$)	\$1,000.00
	Discipal	SAN ANTONIO, TX 78212	_	Fundamental Control of the Control o	<u></u>		
	Principal occu PRESIDENT	pation / Job title (See Instructions)		Employer (See Instructions DAN A. HUGHES COM	•	NY	
	Date 06/04/2025	Full name of contributor out-of-state PAC (ID#:_ JOERIS, GARY  Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78216		)		Amount of Contribution (\$)	\$5,000.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions JOERIS GENERAL CO		RACTORS	
	Date 06/03/2025	Full name of contributor out-of-state PAC (ID#:_ JOHNSON, MARK  Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78209		)		Amount of Contribution (\$)	\$1,000.00
		pation / Job title (See Instructions)		Employer (See Instructions			
	W WAGIING	GING DIRECTOR TEXAS CAPITAL BAN					

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 7/25
2	FILER NAME Texas Econo	mic Fund			3	Filer ID (Ethics Commission Filers) 00089224
4	Date 05/30/2025	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$) \$500.00
8	Principal occu	SAN ANTONIO, TX 78216 pation / Job title (See Instructions)	a	Employer (See Instructions	;) 	
_	RETIRED	sation / sob title (see mandenons)		RETIRED	•)	
	Date 06/04/2025	Contributor address; City; State; Zip Code		)		Amount of Contribution (\$) \$30,000.00
	Principal occu	San Antonio, TX 78216 Dation / Job title (See Instructions)		Employer (See Instructions	 s)	
	President			Kahlig Auto Group		
	Date 06/05/2025	Full name of contributor		)		Amount of Contribution (\$) \$5,000.00
	Principal occu	SAN ANTONIO, TX 78825 pation / Job title (See Instructions)		Employer (See Instructions	;) 	
	EXECUTIVE	· · · · · · · · · · · · · · · · · · ·		SPIRE RISK MANAGE	•	NT
	Date 06/09/2025	Full name of contributor out-of-state PAC (ID#:_MOZINGO, DONALD  Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78259				Amount of Contribution (\$) \$50.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)	
	Date 05/29/2025	Full name of contributor out-of-state PAC (ID#:_NAETHING, ROBERT  Contributor address; City; State; Zip Code  SHAVANO PARK, TX 78249		)		Amount of Contribution (\$) \$200.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	5)	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/4 Rpt: 8/25	
2	FILER NAME Texas Econo	omic Fund	nic Fund		Filer ID (Ethics Commission 00089224	on Filers)
4	Date 05/31/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
8			9 Employer (See Instructions			
		Full name of contributor out-of-state PAC (ID#:_POLUNSKY, ALLAN  Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78257  pation / Job title (See Instructions)	Employer (See Instructions	)	Amount of Contribution (\$)	\$5,000.00
	Date 06/05/2025	Full name of contributor out-of-state PAC (ID#:_ TALJE, SAM Contributor address; City; State; Zip Code  HOUSTON, TX 77079	POLUNSKY BEITEL GI	KE	Amount of Contribution (\$)	\$2,500.00
	Principal occu ENGINEER	pation / Job title (See Instructions)	Employer (See Instructions WOOLPERT	)		
	Date 06/04/2025	Full name of contributor out-of-state PAC (ID#:_ WILLAMS, WESLEY Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209			Amount of Contribution (\$)	\$2,000.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	)		

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

### SCHEDULE C1

	The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule C1: Sch: 1/1 Rpt: 9/25
2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Texas Econo	omic Fund	00089224
4	Date	5 Corporation / Labor Organization name	7 Amount of contribution (\$)
	06/03/2025	ABBEY RESIDENTIAL SERVICES INC.	\$1,000.00
		6 Corporation / Labor Organization address; City; State; Zip Code	
		BIRMINGHAM, AL 35242	
	Date	Corporation / Labor Organization name	Amount of contribution (\$)
	06/18/2025	HEALTH TEXAS PAC	\$1,000.00
		Corporation / Labor Organization address; City; State; Zip Code	
		SAN ANTONIO, TX 78230	
	Date	Corporation / Labor Organization name	Amount of contribution (\$)
	06/18/2025	SOUTHWEST BUSINESS CORPORATION	\$5,000.00
		Corporation / Labor Organization address; City; State; Zip Code	
		SAN ANTONIO, TX 78216	
	Date	Corporation / Labor Organization name	Amount of contribution (\$)
	06/06/2025	San Antonio Builders PAC I	\$12,000.00
		Corporation / Labor Organization address; City; State; Zip Code	
		San Antonio, TX 78231	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cd 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: 1/16 Rpt: 10/25	Texas Economic Fund 00089224
4 Date	5 Payee name
05/29/2025	ANEDOT INC.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$559.50	1340 POYDRAS STREET
	SUITE 1770
Expenditure from corporate funds	NEW ORLEANS, LA 70112
8 PURPOSE	(b) 0 · ·
OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Credit Card Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>
Date	Payee name
05/30/2025	ANEDOT INC.
Amount (\$)	Payee address; City; State; Zip Code
\$20.30	1340 POYDRAS STREET
\$23.00	SUITE 1770
Expenditure from	
corporate funds	NEW ORLEANS, LA 70112
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Tayon Complete Schedule T
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
05/31/2025	ANEDOT INC.
Amount (\$)	Payee address; City; State; Zip Code
\$40.30	1340 POYDRAS STREET
Ψ-0.50	SUITE 1770
Expenditure from	
corporate funds	NEW ORLEANS, LA 70112
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<b>y</b>

#### 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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries	Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to c	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/16 Rpt: 11/25	Texas Economic Fund	00089224
4 Date	5 Payee name	•
06/02/2025	ANEDOT INC.	
6 Amount (\$)	7 Payee address; City; State; Zip C	rada
` '	1340 POYDRAS STREET	oue
\$240.60		
Expenditure from	SUITE 1770	
corporate funds	NEW ORLEANS, LA 70112	
8 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
		Credit Card Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	4	
Date	Payee name	
06/03/2025	ANEDOT INC.	
Amount (\$)	Payee address; City; State; Zip C	ode
\$40.30	1340 POYDRAS STREET	
Evponditure from	SUITE 1770	
Expenditure from corporate funds	NEW ORLEANS, LA 70112	
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
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	H.	
Data	Barra maria	
Date	Payee name	
06/04/2025	ANEDOT INC.	
Amount (\$)	Payee address; City; State; Zip C	code
\$40.30	1340 POYDRAS STREET	
	SUITE 1770	
Expenditure from corporate funds	NEW ORLEANS, LA 70112	
PURPOSE	(4) 0	(b) December
OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O		agin Ollide Held

#### 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

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: 3/16 Rpt: 12/25	Texas Economic Fund  00089224
4 Date	5 Payee name
06/05/2025	ANEDOT INC.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.30	1340 POYDRAS STREET
	SUITE 1770
Expenditure from corporate funds	NEW ORLEANS, LA 70112
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Credit Card Fee
	Credit Card Fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/09/2025	ANEDOT INC.
Amount (\$)	Payee address; City; State; Zip Code
` '	, ,
\$2.30	1340 POYDRAS STREET
Expenditure from	SUITE 1770
corporate funds	NEW ORLEANS, LA 70112
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
	Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/02/2025	Bridgecrest Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$89,500.00	5900 Balcones Dr
	Ste 100
Expenditure from	Austin, TX 78731
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Digital Advertising and Texting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Pablos, Rolando San Antonio Mayor

### 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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1: Sch: 4/16 Rpt: 13/25	2 FILER NAME Texas Economic Fund 3 Filer ID (Ethics Commission File 00089224	ers)
4 Date 06/03/2025	5 Payee name Bridgecrest Partners LLC	
6 Amount (\$) \$78,250.00  Expenditure from corporate funds  8 PURPOSE OF EXPENDITURE	7 Payee address; City; State; Zip Code 5900 Balcones Dr Ste 100 Austin, TX 78731  (a) Category (See Categories listed at the top of this schedule)  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Advertising and Texting	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Pablos, Rolando San Antonio Mayor	
Date 06/04/2025	Payee name Bridgecrest Partners LLC	
Amount (\$) \$92,803.10  Expenditure from corporate funds  PURPOSE	Payee address; City; State; Zip Code  5900 Balcones Dr  Ste 100  Austin, TX 78731  (a) Category (See Categories listed at the top of this schedule)  (b) Description	
OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Digital Advertising and Texting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Pablos, Rolando San Antonio Mayor	
Date 06/06/2025	Payee name Bridgecrest Partners LLC	
Amount (\$) \$65,000.00  Expenditure from corporate funds	Payee address; City; State; Zip Code 5900 Balcones Dr Ste 100 Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Digital Advertising and Texting (Opposing Ortiz)	)
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	

### 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/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: 5/16 Rpt: 14/25	Texas Economic Fund 00089224		
4 Date	5 Payee name		
06/06/2025	Bridgecrest Partners LLC		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$18,500.00	5900 Balcones Dr		
	Ste 100		
Expenditure from corporate funds	Austin, TX 78731		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Digital Advertising and Texting (Opposing Ortiz)		
	Digital Advertising and Texting (Opposing Offiz)		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O			
Date	Payee name		
06/05/2025	Bridgecrest Partners LLC		
Amount (\$)	Payee address; City; State; Zip Code		
\$83,500.00	5900 Balcones Dr		
Ψοσ,σσσ.σσ	Ste 100		
Expenditure from			
corporate funds	Austin, TX 78731		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense  Digital Advertising and Texting (Opposing Ortiz)		
	Digital Advertising and Texting (Opposing Oraz)		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH			
Date	Payee name		
06/03/2025	CATALYST ADVISORS GROUP LLC		
Amount (\$)	Payee address; City; State; Zip Code		
\$16,782.78	1108 LAVACA #110-506		
Expenditure from corporate funds	AUSTIN, TX 78701		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Direct Mail (opposing Ortiz)		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O	4		

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

Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/16 Rpt: 15/25	Texas Economic Fund	00089224
4 Date	5 Payee name	·
05/29/2025	CHAIN BRIDGE BANK, N.A.	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$25.00	1445-A LAUGHLIN AVENUE	
- Funanditura from		
Expenditure from corporate funds	MCLEAN, VA 22101	
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.
L/II LIIDI. G.I.L		Check if Austin, TX, officeholder living expense  Bank Fee
		Dalik Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office field
Date	Davisa rasma	
05/29/2025	Payee name CHAIN BRIDGE BANK, N.A.	
Amount (\$)	Payee address; City; State; Zip Code	
\$25.00	1445-A LAUGHLIN AVENUE	
Expenditure from		
corporate funds	MCLEAN, VA 22101	
PURPOSE OF	,	Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bank Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	4	
Date	Payee name	
05/30/2025	CHAIN BRIDGE BANK, N.A.	
Amount (\$)	Payee address; City; State; Zip Code	
\$25.00	1445-A LAUGHLIN AVENUE	
420.00	- 1	
X Expenditure from corporate funds	MCLEAN, VA 22101	
Corporate rands	(5) 0 :	- Description
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Fees	Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	rees	Check if Austin, TX, officeholder living expense
		Bank Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	1	

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/16 Rpt: 16/25	Texas Economic Fund 00089224
4 Date	5 Payee name
06/02/2025	CHAIN BRIDGE BANK, N.A.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25.00	1445-A LAUGHLIN AVENUE
- Evnanditura from	
X Expenditure from corporate funds	MCLEAN, VA 22101
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank Fee
	Bankree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/02/2025	CHAIN BRIDGE BANK, N.A.
Amount (\$)	Payee address; City; State; Zip Code
\$25.00	1445-A LAUGHLIN AVENUE
— Companditure from	
X Expenditure from corporate funds	MCLEAN, VA 22101
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
	Bank Fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/03/2025	CHAIN BRIDGE BANK, N.A.
Amount (\$)	Payee address; City; State; Zip Code
\$25.00	1445-A LAUGHLIN AVENUE
X Expenditure from corporate funds	MCLEAN, VA 22101
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
	Bank Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to com	plete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 8/16 Rpt: 17/25	Texas Economic Fund		00089224	
4 Date	5 Payee name		•	
06/03/2025	CHAIN BRIDGE BANK, N.A.			
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e		
\$25.00	1445-A LAUGHLIN AVENUE			
X Expenditure from corporate funds	MCLEAN, VA 22101			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>b)</b> Description		
OF EXPENDITURE	Fees		el outside of Texas. Com	plete Schedule T.
EXPENDITURE		ш	tin, TX, officeholder living	g expense
		Bank Fee		
O Commission ONLY if dispose	Condidate/Office helder regree	h.	Office In	al d
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug H	nt	Office he	eia
Date	Payee name			
06/03/2025	CHAIN BRIDGE BANK, N.A.			
Amount (\$)	Payee address; City; State; Zip Cod	e		
\$25.00	1445-A LAUGHLIN AVENUE			
Expenditure from				
X corporate funds	MCLEAN, VA 22101			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>b)</b> Description		
OF EXPENDITURE	Fees		el outside of Texas. Com stin, TX, officeholder living	
		Bank Fee	am, 17, omcendaei nymę	у схренас
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office he	eld
expenditure to benefit C/OI	4			
Date	Payee name			
06/03/2025	CHAIN BRIDGE BANK, N.A.			
Amount (\$)	Payee address; City; State; Zip Cod	e		
\$25.00	1445-A LAUGHLIN AVENUE			
·				
Expenditure from corporate funds	MCLEAN, VA 22101			
PURPOSE		<b>b)</b> Description		
OF	(a) Category (See Categories listed at the top of this schedule)  Fees		el outside of Texas. Com	plete Schedule T.
EXPENDITURE	. 555	ш	tin, TX, officeholder living	g expense
		Bank Fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office he	eld
SAPORALATO TO BOHOR O/OI	•			

#### 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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:				
Sch: 9/16 Rpt: 18/25	Texas Economic Fund 00089224			
4 Date	5 Payee name			
06/04/2025	CHAIN BRIDGE BANK, N.A.			
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 1445-A LAUGHLIN AVENUE			
X Expenditure from corporate funds	MCLEAN, VA 22101			
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			
	Bank Fee			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held			
Date	Davisa nama			
06/05/2025	Payee name CHAIN BRIDGE BANK, N.A.			
Amount (\$) \$25.00	Payee address; City; State; Zip Code  1445-A LAUGHLIN AVENUE			
φ25.00	1440-V FVOCIJEN VAENOE			
X Expenditure from corporate funds	MCLEAN, VA 22101			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
	Bank Fee			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
06/06/2025	CHAIN BRIDGE BANK, N.A.			
Amount (\$)	Payee address; City; State; Zip Code			
\$25.00	1445-A LAUGHLIN AVENUE			
Expenditure from corporate funds	MCLEAN, VA 22101			
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  Bank Fee			
	Dalik Fee			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OF				

### 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	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/16 Rpt: 19/25	Texas Economic Fund 00089224
4 Date	5 Payee name
06/06/2025	CHAIN BRIDGE BANK, N.A.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25.00	1445-A LAUGHLIN AVENUE
Expenditure from corporate funds	MCLEAN, VA 22101
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  Bank Fee
	Dalik Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
experience to belieff of or	•
Date	Payee name
06/10/2025	CHAIN BRIDGE BANK, N.A.
Amount (\$)	Payee address; City; State; Zip Code
\$2.50	1445-A LAUGHLIN AVENUE
¥=.33	
X Expenditure from	MCL FANL VA 22101
corporate funds	MCLEAN, VA 22101
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank Fee
	Bunktee
Commisto ONII V if divest	Condidate/Office holds
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
06/10/2025	CHAIN BRIDGE BANK, N.A.
Amount (\$)	Payee address; City; State; Zip Code
\$25.00	1445-A LAUGHLIN AVENUE
X Expenditure from corporate funds	MCLEAN, VA 22101
— corporate rands	1
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	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Bank Fee
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 - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/16 Rpt: 20/25 Texas Economic Fund 00089224 4 Date Payee name 06/26/2025 CHAIN BRIDGE BANK, N.A. 6 Amount (\$) Payee address; City; State; Zip Code \$12.00 1445-A LAUGHLIN AVENUE Expenditure from Χ MCLEAN, VA 22101 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Bank Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/06/2025 Campaign HQ Amount (\$) Payee address; State; Zip Code City; \$10,692.00 109 W Front St. PO Box 257 Expenditure from Brooklyn, IA 52211 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Live Calls Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Pablos, Rolando San Antonio Mayor Date Payee name 06/05/2025 Campaign HQ Amount (\$) Payee address: City: State; Zip Code \$20,001.72 109 W Front St. PO Box 257 Expenditure from corporate funds Brooklyn, IA 52211 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Live Calls Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Pablos, Rolando San Antonio Mayor

#### 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 Gitt/Awards/Memorials Expu Legal Services	Office O Polling E ense Printing I Salaries/	Expense Wages/Contract Labor	Tr Tr Tr	ransportation Ed ravel in District ravel Out of Dis	raising Expense quipment & Related Expense trict category not listed above)
1 Total marca Cabadula F1.	The Instruction Guide explains how to complete this form.  Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)					(Ethica Commission Filoro)	
Sch: 12/16 Rpt: 21/25	Texas Ecor					iler ID 0089224	(Ethics Commission Filers)
4 Date	<b>5</b> Payee name						
06/20/2025	GOBER GF						
6 Amount (\$) \$3,000.00	7 Payee addre		State; Zip C	ode			
X Expenditure from corporate funds	AUSTIN, T	X 78734					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Legal Services  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Legal Services						
Complete ONLY if direct expenditure to benefit C/OR		iceholder name	Office so	ught		Office he	eld
Date	Payee name		LTING			<del></del>	
06/02/2025	KATETAN	KERSLEY CONSU	LTING				
Amount (\$)	Payee addre	•	State; Zip C	ode			
\$58,435.00	\$58,435.00 14810 BRAMBLEWOOD						
X Expenditure from corporate funds	HOUSTON	, TX 77079					
PURPOSE OF EXPENDITURE		ee Categories listed at the to /Fundraising Expen		1 <del>  </del>	n, TX, off	ficeholder living	olete Schedule T. expense
Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught		Office he	eld
Date 06/03/2025	Payee name KATE TAN	KERSLEY CONSU	LTING				
Amount (\$) \$17,871.09	Payee addre	ss; City; MBLEWOOD	State; Zip C	ode			
X Expenditure from corporate funds	HOUSTON	, TX 77079					
PURPOSE OF EXPENDITURE	·	ee Categories listed at the to /Fundraising Expen		(b) Description  Check if travel  Check if Austin  Fundraising (	n, TX, off	ficeholder living	olete Schedule T. expense
Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught		Office he	eld

### 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	not listed above)
1 Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID (Ethics	Commission Filers)
Sch: 13/16 Rpt: 22/25		
4 Date	5 Payee name	
06/10/2025	KATE TANKERSLEY CONSULTING	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,200.00	14810 BRAMBLEWOOD	
X Expenditure from corporate funds	HOUSTON, TX 77079	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Sche	edule T.
	Fundraising Consulting	
	Tanadaniy conducting	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
5 :	T	
Date	Payee name	
06/26/2025	KATE TANKERSLEY CONSULTING	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,003.52	2 14810 BRAMBLEWOOD	
— Fire and district from		
X Expenditure from corporate funds	HOUSTON, TX 77079	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete School	edule T.
	Check if Austin, TX, officeholder living expense Fundraising Consulting	
	Fundraising Consulting	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	<b>5</b>	
	1	
Date	Payee name	
05/30/2025	LEX POLITICA PLLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$7,500.00	PO BOX 341016	
X Expenditure from corporate funds	AUSTIN, TX 78734	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Legal Services  Check if travel outside of Texas. Complete Sche	edule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Legal Services	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	OH .	

### 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 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: 14/16 Rpt: 23/25	Texas Economic Fund 00089224		
4 Date	5 Payee name		
06/20/2025	LEX POLITICA PLLC		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$4,288.50	PO BOX 341016		
X Expenditure from corporate funds	AUSTIN, TX 78734		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense  Legal Services		
	Legal Services		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Payee name		
06/02/2025	MISSION VIDEO		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,450.00	5921 EL CAMPO AVENUE		
Ψ1,400.00	SSEE EE STANIE OTTVERSE		
Expenditure from corporate funds	FORT WORTH, TX 76107		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.		
_/	Check if Austin, TX, officeholder living expense		
	Video Production (opposing Ortiz)		
2 1 2 2 1 1 2 1			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
Date	Payee name		
06/02/2025	MISSION VIDEO		
Amount (\$)	Payee address; City; State; Zip Code		
\$15,000.00	5921 EL CAMPO AVENUE		
Expenditure from corporate funds	FORT WORTH, TX 76107		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.		
_/	Check if Austin, TX, officeholder living expense		
	Radio Advertising (opposing Ortiz)		
Complete ONLY if allow	Condidate/Officeholder name		
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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 15/16 Rpt: 24/25	Texas Economic Fund 00089224
4 Date	5 Payee name
06/02/2025	MISSION VIDEO
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,450.00	5921 EL CAMPO AVENUE
Expenditure from corporate funds	FORT WORTH, TX 76107
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Video Production
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Pablos, Rolando San Antonio Mayor
Date	Payee name
06/02/2025	Mobilize the Message LLC
Amount (\$)	Payee address; City; State; Zip Code
\$38,000.00	490 Hanover Port Lane
Evponditure from	
Expenditure from corporate funds	Fort Walton Beach, FL 32547
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Door-to-door Advertising
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Pablos, Rolando San Antonio Mayor
Date	Payee name
06/06/2025	Mobilize the Message LLC
Amount (\$)	Payee address; City; State; Zip Code
\$7,000.00	490 Hanover Port Lane
- Evnanditure from	
Expenditure from corporate funds	Fort Walton Beach, FL 32547
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Door-to-door Advertising
	Door-to-door Advertising
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 E 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		Vages/Contract Labor OTHER (enter a category not listed above)			
		· ·			
1 Total pages Schedule F1: Sch: 16/16 Rpt: 25/25	2 FILER NAME   Texas Economic Fund	3 Filer ID (Ethics Commission Filers) 00089224			
•					
4 Date	5 Payee name				
06/03/2025	SHORT COURSE STRATEGIES LLC				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$3,000.00	PO BOX 9762				
X Expenditure from corporate funds	SEATTLE, WA 98109				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	· · · · · · · · · · · · · · · · · · ·	Check if Austin, TX, officeholder living expense			
		Compliance Consulting			
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	I ght Office held			
expenditure to benefit C/OI	H 				
Date	Payee name				
06/03/2025	VAN WAGNER TWELVE HOLDINGS, LLC				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$12,375.00	800 THIRD AVENUE				
, , , , , , , , , , , , , , , , , , , ,	28TH FLOOR				
Expenditure from					
corporate funds	NEW YORK, NY 10022				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EVENDITUE		Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE		Check if Austin, TX, officeholder living expense			
		Aerial Banner Advertisement			
Complete ONLY if direct	Candidate/Officeholder name Office sou	l ght Office held			
expenditure to benefit C/O	H Pablos, Rolando San Anto	onio Mayor			