CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comp	plete this form.	1 Filer ID (Ethics Commi 00054808		2 Total pages fil	led: 67
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE !	JSE ONLY
OFFICEHOLDER NAME	The Honorable	Rafael M.			Date Received	
10 WIL					ELECTRONICA	ALLY EILED
					07/15/2025	ALLI FILLD
	NICKNAME	LAST		SUFFIX	07/15/2025	
		Anchia				
4 CANDIDATE /	ADDRESS / PO BOX; AP	PT / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 4468					
ADDRESS					Receipt #	Amount
Change of Address	Dallas, TX 75208					
					Date Processed	
					Data Incomed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>. </u>	
TREASURER	Mr.	Rick				
NAME	ivii.	THOR				
	NICKNAME			CUETIV		
	NICKNAME	LAST Garza		SUFFIX		
		Gaiza				
C CAMBAICNI	CTREET ADDRESS (AIO D	O DOV DI FACE):		T / CLUTE # CITY		ATE: 710 CODE
6 CAMPAIGN TREASURER	STREET ADDRESS (NO P	O BOX PLEASE);	AP	T / SUITE #; CITY;	SIF	ATE; ZIP CODE
ADDRESS	1314 Kings Hwy.					
(Residence or Business)						
	Dallas, TX 75208					
7 CAMPAIGN	AREA CODE PHO	ONE NUMBER E	EXTENSION			
TREASURER	(817) 793-1026	ME NOMBER E	EXTENSION			
PHONE	(617) 793-1020					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after car	
		<u> </u>			appointment (office	
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2025	TH	IROUGH	06/30/202	:5	
10 ELECTION	ELECTION DATE			ELECTION TYPE	_	
	Month Day Year	Pı	rimary	Runoff	Other	
	11/05/2024	ΧG	eneral	Special		
				_		
11 OFFICE	OFFICE HELD (if any)	<u> </u>		12 OFFICE SOUGHT	(if known)	
	State Representative Dis	strict 103			ative District 103	
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 67

13 C / OH NAME	/ OH NAME Anchia, Rafael M. (The Honorable) 14 Filer ID (00054808					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus may have been made without equired to report this information	the candidate's or offic	ceholder's kr	nowledge or
Additional Pages COMMITTEE TYPE COMMITTEE NAME						
	GENERAL					
		COMMITTEE ADD	RESS			
	SPECIFIC					
		COMMITTEE CAN	MPAIGN TREASURER NAME			
		COMMITTEE CAM	IPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)				s, \$	0.00
		AL CONTRIBUTIO PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	5)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	5,853.01
	4. TOTAL POLITICAL EXPENDITURES					109,839.31
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	177,735.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
			I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
				rable Rafael M. And		
			Signature of	Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		day
of	, 20, to co	ertify which, witness	my hand and seal of office.			
Signature of offi	cer administering	Printed name	of officer administering	Title of offic	er administe	ring oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			3 of 67		
18 FILER NAME Anchia, Rafa	19 Filer ID 00054808	(Ethics Commission Filers)			
20 SCHEDULE S NAME OF SC			SUBTOTAL AMOUNT		
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00		
2. X S	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00		
3. X S	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00		
4. X S	SCHEDULE E: LOANS		\$ 0.00		
5. X S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 61,435.36		
6. X S	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00		
7. X S	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$ 0.00		
8. X S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 48,403.95		
9. X S	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS				
10. S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$		
11. S	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$		
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF STREET, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR THE PROPERTY OF THE	RETURNED	\$		
			•		

PLE	OGED CONTRIBUTIONS		SCHEDULE B
T	he Instruction Guide explains how to com	plete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/67
2 FILER NA	AME Rafael M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00054808
4	OF UNITEMIZED PLEDGES		\$ 0.0
5 Date	6 Full name of pledgorout-of-state PAC 7 Pledgor Address; City; State; Zip C		8 Amount of pledge (\$) 9 In-kind description (If applicable)
10 Principal	occupation / Job title (See Instructions)	11 5 1 (0 1	Check if travel outside of Texas. Complete Schedule
LO FIIICIPAI	occupation / Job title (See instructions)	11 Employer (See In	structions)

	LOANS					SCHEDULE E
	The Instruction	on Guide explains ho	orm.		ages Schedule E: /1 Rpt: 5/67	
	FILER NAME Anchia, Rafael N	M. (The Honorable)				(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS			I	\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupation	on / Job title (See Instructio	ns)	13 Employer (See Instru	uctions)	
14	Description of Col	lateral		15 Check if personal fu	nds were deposite	d into political account (See Instructions)
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code		
20	Principal occupation	on		21 Employer (See Instri	uctions)	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 1/7 Rpt: 6/67	Anchia, Rafael M. (The Honorable) 00054808
4	Date	5 Payee name
	02/27/2025	AC Hotels by Marriott
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$612.49	1901 San Antonio St
		Austin, TX 78705
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholder's lodging while in legislation
		Cilicentities 3 loughly while in registation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	05/28/2025	Capitol Extension Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.43	1400 Congress Ave
		E1.006
		Austin, TX 78701
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gifts for subcommittee members
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/06/2025	Courtyard Marriott Austin University
	Amount (\$)	Payee address; City; State; Zip Code
	\$367.06	5660 N IH-35
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholder's lodging while in legislation
		Officeriolder's loughly write in registation
	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

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: 2/7 Rpt: 7/67	Anchia, Rafael M. (The Honorable)
4	Date	5 Payee name
	02/03/2025	Courtyard Marriott McAllen Airport
6	Amount (\$) \$365.12	7 Payee address; City; State; Zip Code 2131 S 10th St
		McAllen, TX 78503
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder's lodging while attending a tour of the
		Rio Grand Valley
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/Oi	
	Date	Payee name
	02/10/2025	Downright Austin Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$449.10	701 E 11th St
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder's lodging to attend legislative session
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/10/2025	Greater Dallas Korean-American Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2254 Royal Lane
		Suite 200
		Dallas, TX 75229
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	ZA ZADITORZ	Candidate/Officeholder/Political Committee
		Donation
	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 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 Gard Layment	The Instruction Guide explains how to co	mple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3		Filer ID	(Ethics Commission Filers)
	Sch: 3/7 Rpt: 8/67	Anchia, Rafael M. (The Honorable)				00054808	
4	Date	5 Payee name		•			
	01/29/2025	JPMorgan Chase Bank					
6	Amount (\$)	7 Payee address; City; State; Zip Co	de				
	\$6,930.89	P.O. Box 94014					
		Palatine, IL 60094					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Credit Card Payment		Check if travel outs			
				Check if Austin, TX			ard for campaign-related
				expenditures		t of credit ct	ard for campaign related
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht			Office he	eld .
ľ	expenditure to benefit C/O	•	9			J55 116	
H	Date	Payee name					
	02/18/2025	JPMorgan Chase Bank					
┝	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$15,978.11	P.O. Box 94014	uo				
	¥20,0:0:22	1.3.23,3.32.					
		Palatine, IL 60094					
⊢	PURPOSE		(h)	Description			
l	OF	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(5)	Check if travel outs	sid	le of Texas. Com	plete Schedule T.
l	EXPENDITURE	Ground Gara F aymorn		Check if Austin, T	Χ, (officeholder living	expense
				Monthly payme expenditures	nt	t of credit ca	ard for campaign-related
L				expenditures			
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	ght			Office he	eld
L	experience to borionic Grou						
	Date	Payee name					
L	03/28/2025	JPMorgan Chase Bank					
	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$10,162.17	P.O. Box 94014					
l							
		Palatine, IL 60094					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
l	OF EXPENDITURE	Credit Card Payment		Check if travel outs			
l				Check if Austin, TX			ard for campaign-related
				expenditures		e or or our or	ara ror oampaign roiatoa
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght			Office he	eld
	expenditure to benefit C/O		J				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 4/7 Rpt: 9/67	Anchia, Rafael M. (The Honorable)	00054808
4	Date	5 Payee name	
	04/28/2025	JPMorgan Chase Bank	
6	Amount (\$) \$5,142.41	7 Payee address; City; State; Zip Code P.O. Box 94014	
		Palatine, IL 60094	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	orean cara rayment	outside of Texas. Complete Schedule T.
			TX, officeholder living expense nent of credit card for campaign-related
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/28/2025	JPMorgan Chase Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,090.03	P.O. Box 94014	
		Palatine, IL 60094	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Cara r ayment	outside of Texas. Complete Schedule T. TX, officeholder living expense
			nent of credit card for campaign-related
		expenditures	ient of credit card for campaign-related
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/28/2025	JPMorgan Chase Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$8,586.47	P.O. Box 94014	
		Palatine, IL 60094	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Cical Calar dynicit	outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ		TX, officeholder living expense
		Monthly paym expenditures	nent of credit card for campaign-related
	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
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 compl	ete this form.		
1 Total pages Sche	edule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 5/7 Rpt:	10/67	Anchia, Rafael M. (The Honora	able)		00054808	
4 Date		5 Payee name		•		
05/27/2025		Kendra Scott Jewelry				
6 Amount (\$)		7 Payee address; City;	State; Zip Code			
\$	257.64	3800 N Lamar				
		Ste 140				
		Austin, TX 78756				
8 PURPOSE		(a) Category (See Categories listed at the to	p of this schedule) (b)	Description		
OF EXPENDITURE		Gift/Awards/Memorials Expens		Check if travel outs		
				Check if Austin, TX Gifts for subcom		
				Gitts for Subcon	iiiiiiiiiee iiieii	ibers
9 Complete ONLY	if direct	Candidate/Officeholder name	Office sought		Office he	ald.
expenditure to be			Office 30ugni		Office fit	Ciu
Data		Device name				
Date 06/13/2025		Payee name Kickin Brass				
			Otata Zia Oada			
Amount (\$)	400.00	Payee address; City;	State; Zip Code			
\$1,	,400.00	4512 Hedgdon Dr				
		Bldg B				
		Dallas, TX 75216				
PURPOSE OF		(a) Category (See Categories listed at the to	p of this schedule) (b)	Description		
EXPENDITURE		Event Expense		Check if travel outs Check if Austin, TX		
				Community eve		у охронос
				,		
Complete ONLY	if direct	Candidate/Officeholder name	Office sought		Office he	eld
expenditure to be		I	-			
Date		Payee name				
05/05/2025		Oliva, Tannya				
Amount (\$)		Payee address; City;	State; Zip Code			
	,709.25	8012 Andravida Dr.	otato, zip oodo			
 -	,	30 /				
		Austin, TX 78747				
PURPOSE			(1)	5		
OF		(a) Category (See Categories listed at the to Salaries/Wages/Contract Labo		Description Check if travel outs	ide of Texas. Com	plete Schedule T.
EXPENDITURE		Salaries/wages/Contract Labo	''	Check if Austin, TX		•
				Legislative Sess	sion Salary S	Stipend
Complete ONLY		Candidate/Officeholder name	Office sought		Office he	eld
expenditure to be	enefit C/OF	ł				

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

	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: 6/7 Rpt: 11/67	Anchia, Rafael M. (The Honorable) 00054808
4	Date	5 Payee name
	01/16/2025	Otis Hotel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,376.42	1902 San Antonio St
		Austin, TX 78705
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder's lodging while in legislation
		o moonoladi o louging willo in logiciation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/03/2025	Otis Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$209.47	1902 San Antonio St
		Austin, TX 78705
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder's lodging while in Austin
		Cincerciae a reaging wine in Adetain
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/06/2025	Otis Hotel
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$898.90	1902 San Antonio St
		Austin, TX 78705
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Officeholder's lodging while in legislation
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
ı		

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide	Salaries/\	Vages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Commission File	ers)
	Sch: 7/7 Rpt: 12/67		fael M. (The Honora	able)				00054808		
4	Date	5 Payee name								
	03/10/2025	Otis Hotel								
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$774.45	1902 San <i>A</i>	Antonio St							
		Austin, TX	78705							
8	PURPOSE OF	(a) Category (S	ee Categories listed at the to	pp of this schedule)	(b)	Description				
	EXPENDITURE	Travel Out	of District			ш		de of Texas. Com officeholder living		
						Officeholder's				
						JJ		aggo	rograndara.	
9	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	l ight			Office he	eld	
	Date	Payee name								
	03/13/2025	Otis Hotel								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$777.95	1902 San <i>A</i>	Antonio St							
		Austin, TX	78705							
	PURPOSE OF	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Travel Out	of District			<u></u>		de of Texas. Com officeholder living		
						Officeholder's				
						Omoonoidor e		aging willo	rogiolation	
	Complete ONLY if direct		iceholder name	Office sou	l ıght			Office he	eld	
	expenditure to benefit C/O	⊣								
	Date	Payee name								
	02/07/2025	Rizo, Franc	es							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$250.00	P.O. Box 2	26534							
		Dallas, TX	75222							
	PURPOSE OF		ee Categories listed at the to		(b)	Description				
	EXPENDITURE	Gift/Awards	s/Memorials Expens	se				de of Texas. Com officeholder living		
						Sponsorship				
						ороноогонир I		ion to oupit	. .	
-	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	l Iaht			Office he	ald.	
	expenditure to benefit C/O		iocholaci Hallic	Office Suc	igill			Office He	ii u	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)			
	Sch: 1/55 Rpt: 13/67	Anchia, Rafael M. (The Honorable)			00054808					
4	CREDIT CARD ISSUER		ncial institution ase	EXPEN	. OF UNITEMIZED IDITURES GED TO A CREDIT	\$	5,853.0	01			
6	PAYMENT	(a) Amount Charged \$800.00	(b) Date of Charge 03/09/2025	(c) Date(s 04/28/20) Credit Card Issue 125	r Paid					
7	PAYEE	(a) Payee name After 8 to Educate			Grand Ave.	City,	State,	Zip Code			
Ļ	DUDDOOF OF	(a) Cataman			X 75223						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	•						
		Contributions/Donatio	ns Made By	Donation							
	X Political	Candidate/Officeholde	er/Political Committee								
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
Ľ	expenditure to benefit C/OH	()	L (1) = 1 (-1)	1 () = (\ _ !! !!.						
	PAYMENT (a) Amount Charged (b) Date of Charge \$308.51 01/02/2025		(c) Date(s 02/28/20) Credit Card Issue 025	r Paid						
	PAYEE (a) Payee name			(b) Payee	address;	City,	State,	Zip Code			
		Order Desk The		9840 Mo Suite 104 Dallas, T							
H	PURPOSE OF	(a) Category		(b) Descri							
	EXPENDITURE X Political	(See Categories listed at the top Advertising Expense	of this schedule)		birthday cards						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	ı	Check if Austin, TX,	officeholder living exp	ense				
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$308.51	(b) Date of Charge 01/02/2025	(c) Date(s 02/28/20) Credit Card Issue 025	r Paid					
	PAYEE	(a) Payee name Order Desk The		(b) Payee 9840 Mo Suite 104 Dallas, T	onroe Dr	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descri February	ption y birthday cards						
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense				
E	Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name				Office held					
Superioritation to be from the first that the first											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)					
Sch: 2/55 Rpt: 14/67	Anchia, Rafael M. (The Honorable)		00054808							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	5,853.0)1					
6 PAYMENT	(a) Amount Charged \$497.84	(b) Date of Charge 01/02/2025	(c) Date(s) Credit Card Issue 02/28/2025	r Paid							
7 PAYEE 8 PURPOSE OF	(a) Payee name Order Desk The		(b) Payee address; 9840 Monroe Dr Suite 104 Dallas, TX 75220 (b) Description	City,	State,	Zip Code					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Postage								
X Political	Office Overhead/Rent	tal Expense	l								
Non-Political	() 🗖										
9 Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	office held	ense						
expenditure to benefit C/OH	Candidate/Officeriolder	marile Office	5 Sought	Office field							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid							
\$622.44 01/16/2025			02/28/2025	i i did							
PAYEE	PAYEE (a) Payee name			City,	State,	Zip Code					
	Order Desk The		9840 Monroe Dr Suite 104 Dallas, TX 75220								
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description New Year postcards								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$3,456.73	(b) Date of Charge 01/16/2025	(c) Date(s) Credit Card Issue 02/28/2025	r Paid							
PAYEE (a) Payee name Order Desk The		(b) Payee address; 9840 Monroe Dr Suite 104 Dallas, TX 75220	City,	State,	Zip Code						
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description Postage								
Non-Political (c) Check if travel outside of Texas. Complete Schedule				, officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethio	cs Commis	sion Filers)	
	Sch: 3/55 Rpt: 15/67	Anchia, Rafael M. (The Honorable)				00054808			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	DITUR	NITEMIZED RES D A CREDIT	\$	5,853.0)1	
6	PAYMENT	(a) Amount Charged \$459.10	(b) Date of Charge 01/29/2025	(c) Date(s) 02/28/20		t Card Issue	r Paid			
7	PAYEE	(a) Payee name Order Desk The		(b) Payee 9840 Mo Suite 104 Dallas, T	nroe [1	Or	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descrip Postage	otion					
	Non-Political		of Texas. Complete Schedule T.		Che	eck if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held			
е	PAYMENT (a) Amount Charged (b) Date of Charge			1() 5 (()	0 "		5 : 1			
	\$100.00 01/15/2025 02/28/20				t Card Issue	r Paid				
	PAYEE (a) Payee name			(b) Payee	addres	ss;	City,	State,	Zip Code	
		Puede Network		2207 Hai						
				Dallas, T		16				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	l .	Che	eck if Austin, TX,	officeholder living exp	ense		
<u>_</u>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	<u> </u>		Office held			
	PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 02/15/2025	(c) Date(s) 03/28/20		t Card Issue	r Paid			
	PAYEE (a) Payee name (b) Payee address; 2207 Harlandale Ave Puede Network Dallas, TX 75216			le Ave	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee			(b) Descrip Donation						
	Non-Political (c) Check if travel outside of Texas. Complete Schedule									
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held			
ı										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)			
	Sch: 4/55 Rpt: 16/67	Anchia, Rafael M. (The Honorable)			00054808					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED VITURES ED TO A CREDIT	\$	5,853.0)1			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid					
		\$100.00	03/25/2025	04/28/202	5						
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
		Puede Network		2207 Harla	andale Ave						
				Dallas, TX							
8	PURPOSE OF	(a) Category	-f.4b-i	(b) Descripti	ion						
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Donation							
	X Political	Candidate/Officeholde		e							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense				
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	` '	Credit Card Issuer	r Paid					
		\$100.00	04/15/2025	05/28/202	5						
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
		Puede Network		2207 Harla	andale Ave						
				Dallas, TX	75216						
	PURPOSE OF	(a) Category		(b) Description							
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Donation							
	x Political	Candidate/Officeholde									
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	΄ Γ	Check if Austin, TX,	officeholder living exp	oense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid					
		\$100.00	05/15/2025	06/28/202	5						
\vdash	PAYEE	(a) Payee name	1	(b) Payee a	ddress;	City,	State,	Zip Code			
					andale Ave	•	,	·			
		Puede Network									
				Dallas, TX	75216						
Г	PURPOSE OF	(a) Category		(b) Descripti							
	EXPENDITURE (See Categories listed at the top of this schedule)			Donation							
	Contributions/Donations Made By Candidate/Officeholder/Political Committee			mittee							
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T		of Texas. Complete Schedule T.	Γ	Check if Austin, TX,	officeholder living exp	oense				
	(c) and a state of the state of		name Office	e sought	_	Office held					
е	xpenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	sion Filers)			
	Sch: 5/55 Rpt: 17/67	Anchia, Rafael M. (The Honorable)			00054808					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDI	\$	5,853.0)1			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid					
		\$100.00	06/15/2025								
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
		Puede Network			landale Ave						
				Dallas, TX 75216							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Donation							
		Contributions/Donation	ns Made By								
	X Political	Candidate/Officeholde	er/Political Committee								
	Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX	C, officeholder living	expense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
e	expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(h) Data of Chargo	(a) Data(a)	Cradit Card Issue	or Doid					
	PATMENT	(a) Amount Charged	(b) Date of Charge	02/28/20	Credit Card Issue 25	er Palu					
	\$1,786.13		01/13/2025								
	PAYEE (a) Payee name			(b) Payee	address;	City,	State,	Zip Code			
		Reilly Echols Printir	ng Inc.	1710 S H	arwood						
				Dallas, T	X 75218						
	PURPOSE OF	(a) Category		(b) Description							
	EXPENDITURE	(See Categories listed at the top Printing Expense	of this schedule)	Printing of	f New Year pos	tcards					
	X Political										
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	C, officeholder living of	expense				
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid					
		\$224.08	06/21/2025								
H	PAYEE	(a) Payee name	ı	(b) Payee	address;	City,	State,	Zip Code			
				139 Com	merce St						
		Rockin' M Flowers	& Bouti								
				Centervil	e, TX 75833						
	PURPOSE OF	(a) Category	of Alvin and a dud a N	(b) Descrip							
	EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial		Sympath	y flowers to Sue	: Langley's me	emorial serv	vice			
	X Political		'								
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T			dule T. Check if Austin, TX, officeholder living expense							
				Office sought Office held							
е	xpenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

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)

Salaries/Wages/Contract Labor Official (effici a category not listed above

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Etl	hics Commiss	sion Filers)			
Sch: 6/55 Rpt: 18/67	Anchia, Rafael M. (The Honorable)		00054808					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$	5,853.0)1			
6 PAYMENT	(a) Amount Charged \$257.72	(b) Date of Charge 05/17/2025	(c) Date(s) Credit Card Iss 06/28/2025	uer Paid					
7 PAYEE	(a) Payee name Sam's Club #6376		(b) Payee address; 4062 LBJ Fwy Dallas, TX 75244	City,	State,	Zip Code			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Supplies for community	event					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					
\$241.68 06/13/2025			(c) Date(s) Credit Card Iss	uer Paid					
PAYEE	(a) Payee name Sam's Club #6376		(b) Payee address; 4062 LBJ Fwy Dallas, TX 75244	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Supplies for community	event					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living e	xpense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					
PAYMENT	(a) Amount Charged \$82.36	(b) Date of Charge 06/14/2025	(c) Date(s) Credit Card Iss	uer Paid					
PAYEE	(a) Payee name Sam's Club #6376		(b) Payee address; 4062 LBJ Fwy Dallas, TX 75244	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense			(b) Description Supplies for community	event					
Non-Political Complete ONLY if direct expenditure to benefit C/OH (c) Check if travel outside of Texas. Complete Schedule Candidate/Officeholder name Officeholder name			Check if Austin, e sought	TX, officeholder living e	xpense				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

l		The Inst	ruction Guide explains how	to complete thi	is form.					
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 7/55 Rpt: 19/67	Anchia, Rafael M. (The Honorable)			00054808				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	5,853.0)1		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid				
		\$199.33	06/17/2025							
7	PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code		
		Sam's Club #6376		4062 LBJ F	=wy					
L				Dallas, TX						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description						
		Food/Beverage Expe	*	Refreshments and snacks for the District office						
	X Political									
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.							
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
-	expenditure to benefit C/OH	() (T (1) = 1 (1)	1/15///						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid				
	\$314.49 06/07/2025									
	PAYEE	(a) Payee name	•	(b) Payee ac	ldress;	City,	State,	Zip Code		
		Sam's Club #6381		751 W. Ma	in St					
				Lewisville, TX 75067						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Supplies for community event						
	X Political	Event Expense								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
€	expenditure to benefit C/OH		-							
	PAYMENT	(a) Amount Charged \$201.29	(b) Date of Charge 03/07/2025	(c) Date(s) C 04/28/2025	Credit Card Issuer	Paid				
H	PAYEE	(a) Payee name	<u> </u>	(b) Payee ac	ldress;	City,	State,	Zip Code		
				9461 Webl	chapel Rd.					
		Sam's Club #8248								
				Dallas, TX	75220					
	PURPOSE OF	(a) Category	of this cohodule)	(b) Descripti						
	(See Categories listed at the top of this schedule) X Political Food/Beverage Expense			Snacks and refreshments for District office						
	Non-Political (c) Check if travel outside of Texas. Complete Schedule			ule T. Check if Austin, TX, officeholder living expense						
H	Complete ONLY if direct	Candidate/Officeholder	name Office	Office sought Office held						
E	expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)		
	Sch: 8/55 Rpt: 20/67	Anchia, Rafael M. (The Honorable)			00054808				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	5,853.0)1		
6	PAYMENT	(a) Amount Charged \$270.70	(b) Date of Charge 04/11/2025	(c) Date(s 05/28/20) Credit Card Issuer)25	Paid				
7	PAYEE	(a) Payee name Sam's Club #8248			ebb Chapel Rd.	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	Dallas, TX 75220 (b) Description Supplies for community event						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT (a) Amount Charged (b) Date of Charge 03/20/2025			(c) Date(s 04/28/20) Credit Card Issuer)25	Paid				
	PAYEE (a) Payee name Southwest Airlines			(b) Payee 2702 Lov Dallas, T	ve Field Drive	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Officeholder's airfare from Austin to Dallas						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$252.48	(b) Date of Charge 03/29/2025	(c) Date(s 04/28/20) Credit Card Issuer)25	Paid				
	PAYEE	(a) Payee name Southwest Airlines		(b) Payee 2702 Lov Dallas, T	ve Field Drive	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense			(b) Description Officeholder's roundtrip airfare Dallas-Austin-Dallas							
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense			
e	Complete ONLY if direct Candidate/Officeholder name complete to benefit C/OH			e sought		Office held				
ı										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)			
	Sch: 9/55 Rpt: 21/67	Anchia, Rafael M. (The Honorable)			00054808					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	5,853.0)1			
6	PAYMENT	(a) Amount Charged \$572.96	(b) Date of Charge 03/31/2025	(c) Date(s) 04/28/20) Credit Card Issuer 025	Paid					
7	PAYEE	(a) Payee name Southwest Airlines			ve Field Drive	City,	State,	Zip Code			
8	PURPOSE OF	(a) Category		Dallas, T (b) Descri							
°	EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense	*	Officeholder's roundtrip airfare Dallas-Austin-Dallas							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
9 ∈	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT (a) Amount Charged (b) Date of Charge \$696.95 05/15/2025			(c) Date(s) 06/28/20) Credit Card Issuer)25	· Paid					
	PAYEE (a) Payee name Southwest Airlines			(b) Payee 2702 Lov Dallas, T	ve Field Drive	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Officeholder's roundtrip airfare to testify in El Paso							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$30.01	(b) Date of Charge 01/13/2025	(c) Date(s 02/28/20) Credit Card Issuer)25	Paid					
	PAYEE	(a) Payee name Star Telegram			address; ockmorton Street th, TX 76102	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees			(b) Descri	ption subscription							
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense				
e	Complete ONLY if direct expenditure to benefit C/OH	name Office	e sought		Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)				
Sch: 10/55 Rpt: 22/67	Anchia, Rafael M. (The Honorable)			00054808						
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	UNITEMIZED TURES O TO A CREDIT	\$	5,853.0)1				
6 PAYMENT	(a) Amount Charged \$30.01	(b) Date of Charge 02/09/2025	(c) Date(s) C 03/28/2025	redit Card Issuer	Paid						
7 PAYEE	(a) Payee name Star Telegram		(b) Payee ad 808 Throck Fort Worth,	morton Street	City,	State,	Zip Code				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Monthly sul	n							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held						
PAYMENT (a) Amount Charged (b) Date of Charge \$30.01 02/09/2025			(c) Date(s) C 03/28/2025	redit Card Issuer	Paid						
PAYEE	PAYEE (a) Payee name Star Telegram			dress; morton Street TX 76102	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Monthly sul	n							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held						
PAYMENT	(a) Amount Charged \$30.01	(b) Date of Charge 03/09/2025	(c) Date(s) C 04/28/2025	redit Card Issuer	Paid						
PAYEE	(a) Payee name Star Telegram		(b) Payee ad 808 Throck Fort Worth,	morton Street	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees			(b) Description Monthly sul								
Non-Political		Check if Austin, TX,	officeholder living exp	ense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	s Commiss	sion Filers)				
Sch: 11/55 Rpt: 23/67	Anchia, Rafael M. (The Honorable)		00054808						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	5,853.0)1				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid						
	\$30.01	04/06/2025	05/28/2025							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Star Telegram		808 Throckmorton Street							
	() 2 :		Fort Worth, TX 76102							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Monthly subscription							
X Political	Fees	·	Monthly subscription							
Non-Political	· ·	of Texas. Complete Schedule T.		officeholder living expe	ense					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH	(a) Assessment Observes d	(l-) D - + + Ol	(c) Date(s) Credit Card Issuer	- D - : -!						
PAYMENT	PAYMENT (a) Amount Charged (b) Date of Charge \$55.20 04/22/2025			r Paid						
			05/28/2025							
PAYEE (a) Payee name			(b) Payee address;	City,	State,	Zip Code				
	Star Telegram		808 Throckmorton Street							
			Fort Worth, TX 76102							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
l <u> </u>	Printing Expense	· · · · · · · · · · · · · · · · · · ·	Reprint of articles							
X Political Non-Political	<u> </u>									
Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense					
expenditure to benefit C/OH	Canadate/Onicenolaei	Tidine Office	c sought	Office field						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid						
	\$55.20	05/22/2025	06/28/2025							
	·									
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Star Telegram		808 Throckmorton Street							
	Star relegiani		Fort Worth, TX 76102							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top of this schedule)			Monthly subscription						
X Political	Fees Fees									
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense					
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Office held						
expenditure to benefit C/OH										
	<u> </u>									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete th	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 12/55 Rpt: 24/67	Anchia, Rafael M. (The Honorable)			00054808		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$	5,853.0)1
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	[·] Paid		
		\$55.20	06/22/2025					
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Star Telegram		808 Throc	kmorton Street			
					n, TX 76102			
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodulo)	(b) Descripti				
l	EXPENDITURE	Fees	of this scriedule)	Monthly su	ubscription			
	X Political							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense				
	·	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
l	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (05/28/202	Credit Card Issuer	Paid		
		\$48.88	04/10/2025	05/28/202	5			
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Техасо		8101 Salt	Springs Dr			
				Austin, TX	78744			
	PURPOSE OF	(a) Category		(b) Descripti	ion			
	EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense	·	Fuel for leg	gislative vehicle			
	Non-Political		of Texas. Complete Schedule T.	' г	Check if Austin, TX,	officeholder living exp	ense	
H	Complete ONLY if direct	Candidate/Officeholder		e sought	_	Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$93.19	(b) Date of Charge 04/12/2025	(c) Date(s) (05/28/202	Credit Card Issuer 5	Paid		
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
l		Tayana		2422 Valw	ood Pkwy			
		Texaco						
L					Branch, TX 7523	4		
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti				
1	(See Categories listed at the top of this schedule) Transportation Equipment And Related		,	Fuel for vehicle for community event				
	X Political Expense							
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule		·					
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instr	ruction Guide explains how	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)					
Sch: 13/55 Rpt: 25/67	Anchia, Rafael M. (The Honorable)			00054808							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UN EXPENDITUR CHARGED TO CARD	ES	\$	5,853.0)1					
6 PAYMENT	(a) Amount Charged \$48.70	(b) Date of Charge 04/27/2025	(c) Date(s) Credit 05/28/2025	Card Issuer	Paid							
7 PAYEE	(a) Payee name Texaco		(b) Payee addres 8101 Salt Sprin Austin, TX 7874	gs Dr	City,	State,	Zip Code					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	•	(b) Description Fuel for legislat									
Non-Political	(c) distance of total confidence of total conf				officeholder living exp	ense						
9 Complete ONLY if direct expenditure to benefit C/OH	н			Office held								
PAYMENT	(a) Amount Charged \$44.12	(b) Date of Charge 05/04/2025	(c) Date(s) Credit 06/28/2025	Card Issuer	Paid							
PAYEE	(a) Payee name Texaco		(b) Payee addres 8101 Salt Sprin Austin, TX 7874	gs Dr	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Fuel for legislat									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Che	ck if Austin, TX,	officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held							
PAYMENT	(a) Amount Charged \$46.73	(b) Date of Charge 05/14/2025	(c) Date(s) Credit 06/28/2025	Card Issuer	Paid							
PAYEE	(a) Payee name Texaco		(b) Payee addres 8101 Salt Sprin Austin, TX 7874	gs Dr	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipn Expense	ment And Related	(b) Description Fuel for legislat									
					officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	Candidate/Officeholder name Office sought										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(3 -	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commis	sion Filers)
	Sch: 14/55 Rpt: 26/67	Anchia, Rafael M. (The Honorable)			00054808		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	5,853.0	01
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
		\$47.21	06/08/2025					
7	PAYEE	(a) Payee name Texaco		(b) Payee 2422 Val	address; lwood Pkwy	City,	State,	Zip Code
L					Branch, TX 7523	34		
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this sahadula)	(b) Descri				
	X Political	Transportation Equipments Expense	•	Fuel for	vehicle for commu	unity event		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	ı	Check if Austin, TX,	officeholder living exp	pense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	_	Office held		
e	expenditure to benefit C/OH							
	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issu) Credit Card Issuer	r Paid		
		\$48.69	06/09/2025					
	PAYEE	AYEE (a) Payee name (b) Payee address;			address;	City,	State,	Zip Code
		Texaco		8101 Sa	lt Springs Dr			
				Austin, T	X 78744			
	PURPOSE OF	(a) Category	-6 Abric In It - 1	(b) Descri	•			
	EXPENDITURE X Political	(See Categories listed at the top Transportation Equip Expense		Fuel for I	egislative vehicle	•		
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX.	officeholder living ex	pense	
┝	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held		
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
		\$38.16	06/14/2025					
Г	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		_		2422 Va	lwood Pkwy			
		Texaco						
L					Branch, TX 7523	34		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri				
		Transportation Equip	•	Fuel for v	vehicle for commi	unity event		
	X Political	Expense						
L	Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
Le	expenditure to benefit C/OH							
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
	Sch: 15/55 Rpt: 27/67	Anchia, Rafael M. (The Honorable)			00054808		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	5,853.0)1
6	PAYMENT	(a) Amount Charged \$400.00	(b) Date of Charge 01/14/2025	(c) Date(s) 02/28/20	Credit Card Issuel 25	r Paid		
7	PAYEE	(a) Payee name Texas House LGB	ΓQ Caucus	(b) Payee 1100 Cor	ngress	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	Austin, T (b) Descrip Dues				
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 -	Complete ONLY if direct expenditure to benefit C/OH				Office held			
	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 02/11/2025	(c) Date(s) 03/28/20	Credit Card Issuel 25	r Paid		
	PAYEE	(a) Payee name Texas House Wom	en's Health	(b) Payee P.O. Box Austin, T	2910	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descrip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
_	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$357.16	(b) Date of Charge 01/13/2025	(c) Date(s) 02/28/20	Credit Card Issuel 25	r Paid		
	PAYEE	(a) Payee name Texas Tribune	1	(b) Payee 919 Cong 6th Floor Austin, T	gress Ave	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descrip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH							
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete thi	is form.						
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)			
Sch: 16/55 Rpt: 28/67	Anchia, Rafael M. (The Honorable)			00054808					
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	5,853.0)1			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid					
	\$317.10	01/02/2025	02/28/2029	5						
7 PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code			
	USPS		13904 Jose	ey Lane						
			Dallas, TX 75234							
8 PURPOSE OF	(a) Category		(b) Descripti	on						
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Postage							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge								
	\$13.05	01/22/2025	02/28/2029	5						
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code			
	LICEC		8300 NE U	Inderground Dr	ive					
	USPS		Pillar #210							
				ty, MO 64144						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descripti	on						
l <u> </u>	Office Overhead/Rent		Postage							
X Political										
Non-Political	(1)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C 03/28/2025	Credit Card Issuer	r Paid					
	\$25.05	02/06/2025	03/20/2023	5						
PAYEE	(a) Payee name	l .	(b) Payee ac	ddress;	City,	State,	Zip Code			
			4740 W M	ockingbird						
	USPS		Ste C							
				75209						
PURPOSE OF	PURPOSE OF (a) Category (l			(b) Description						
EXPENDITURE	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense									
X Political Since Overhead/Kental Expense										
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense				
			e sought		Office held					
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)				
	Sch: 17/55 Rpt: 29/67	Anchia, Rafael M. (The Honorable)		00054808						
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	5,853.0)1				
6	PAYMENT	(a) Amount Charged \$15.54	(b) Date of Charge 05/08/2025	(c) Date(s) Credit Card Issue 06/28/2025	er Paid						
7	PAYEE	(a) Payee name USPS		(b) Payee address; 5055 Norwood Rd	City,	State,	Zip Code				
L				Dallas, TX 75247							
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Postage							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense					
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held						
H	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issu				er Paid						
		\$1,000.00	06/01/2025	(6) - 3.10(5) - 3.11 - 3.11 - 3.11							
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
		Viva Day Spa		215 S. Lamar Blvd							
				Austin, TX 78704							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description Thank you gifts to staff m	embers						
	Non-Political	(a) Charaltiffaranal antaida	of Towns Committee Colombials T	Observativity Asserting TV	-#611						
⊢		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	, officeholder living exp	ense					
е	Complete ONLY if direct expenditure to benefit C/OH			o Joughi	Office field						
	PAYMENT	(a) Amount Charged \$270.00	(b) Date of Charge 01/14/2025	(c) Date(s) Credit Card Issue 02/28/2025	er Paid						
	PAYEE	(a) Payee name Vonlane		(b) Payee address; 3800 Maple Ave. Suite 265 Dallas, TX 75219	City,	State,	Zip Code				
PURPOSE OF (a) Category (See Categories listed at the top of this schedule) X Political (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense				(b) Description Staff transportation to atte	end opening da	y ceremo	onies				
	Non-Political	(c) Check if travel outside	<u> </u>	, officeholder living exp	ense						
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete th	is form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 18/55 Rpt: 30/67	Anchia, Rafael M. (The Honorable)			00054808			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	5,853.0)1	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	⁻ Paid			
	\$145.00	05/02/2025	06/28/202	5				
7 PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code	
	Vonlane		3800 Mapl Ste 265					
8 PURPOSE OF	(a) Category		Dallas, TX 75219 (b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	` ′ .	er's transportati	on from Austin	to Dallas	3	
X Political	Transportation Equipr Expense	ment And Related	C.III G.III G.II					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 0 03/28/2029		Paid			
	\$721.61	02/04/2025	03/20/202	5				
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code	
	Worley Printing		3217 N. I-3	35 Frontage Rd				
			Austin, TX					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti Business of					
X Political	Printing Expense	,	business c	aiu				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$337.61	(b) Date of Charge 01/17/2025	(c) Date(s) 0 02/28/2029	Credit Card Issuer 5	Paid			
PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code	
	ADO De de Hara la		1414 W Da	avis St				
	ABC Party Headqua	arters						
			Dallas, TX					
PURPOSE OF EXPENDITURE	(a) Category (500 Categories listed at the top of this schedule)							
l <u> </u>	Event Expense		Beads for (district Mardi Gı	ras parade			
X Political ·								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense		
			e sought		Office held			
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete thi	is form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 19/55 Rpt: 31/67	Anchia, Rafael M. (The Honorable)			00054808			
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED ITURES D TO A CREDIT	\$	5,853.0)1	
6	PAYMENT	(a) Amount Charged \$325.65	(b) Date of Charge 03/01/2025	(c) Date(s) C 04/28/2025	Credit Card Issuer	Paid			
7	PAYEE	(a) Payee name ABC Party Headqu	arters	(b) Payee ac 1414 W Da	avis St	City,	State,	Zip Code	
L				Dallas, TX					
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Masks & de		r Mardi Gras parade			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
Ľ	expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge								
	PAYMENT	(a) Amount Charged \$324.70	(b) Date of Charge 01/09/2025	(c) Date(s) C 02/28/2025	· Paid				
F	PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code	
		Amazon		410 Terry A	Ave. N.				
				Seattle, W	A 98109				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description Office supp	on plies for the Cap	oitol office			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	_	7 Chack if Austin TY	officeholder living exp	nense		
H	Complete ONLY if direct	Candidate/Officeholder	·	e sought	Check ii Austin, 17,	Office held	Jense		
6	expenditure to benefit C/OH			o coug		000			
	PAYMENT	(a) Amount Charged \$32.06	(b) Date of Charge 02/09/2025	(c) Date(s) C 03/28/2025	Credit Card Issuer	Paid			
Г	PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code	
		Amazon (a) Fayer hame (b) Fayer datases, 410 Terry Ave. N.			Ave. N.				
L				Seattle, W	A 98109				
	PURPOSE OF EXPENDITURE X Political	1 ' ' * '			(b) Description Office supplies for the Capitol office				
1	Non-Political (c) Check if travel outside of Texas. Complete Schedule			nedule T. Check if Austin, TX, officeholder living expense					
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete th	is form.					
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)		
	Sch: 20/55 Rpt: 32/67	Anchia, Rafael M. (The Honorable)			00054808				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$	5,853.0)1		
6	PAYMENT	(a) Amount Charged \$36.79	(b) Date of Charge 02/11/2025	(c) Date(s) (03/28/202	Credit Card Issuer 5	r Paid				
7	PAYEE	(a) Payee name Amazon		(b) Payee at	Ave. N.	City,	State,	Zip Code		
Ļ	DUDDOSE 05	(a) Cataman		Seattle, WA 98109						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti Office supp	on plies for the Cap	Capitol office				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
е	expenditure to benefit C/OH									
	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issu 05/28/2025				r Paid					
	PAYEE (a) Payee name (b		(b) Payee a	ddress;	City,	State,	Zip Code			
		Amazon		410 Terry	Ave. N.					
				Seattle, W	A 98109					
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descripti Supplies fo	on or community ev	vent				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	nense			
⊢	Complete ONLY if direct	Candidate/Officeholder	·	sought	_ Check ii / tustiii, 17x,	Office held	501130			
e	expenditure to benefit C/OH			J						
	PAYMENT	(a) Amount Charged \$88.48	(b) Date of Charge 04/11/2025	(c) Date(s) 0 05/28/202	Credit Card Issuei 5	r Paid				
Г	PAYEE	(a) Payee name	ı	(b) Payee a	ddress;	City,	State,	Zip Code		
		Amazon		410 Terry	Ave. N.					
L				Seattle, W						
	PURPOSE OF (a) Category (See Categories listed at the top of this schedule) X Political Event Expense			(b) Descripti Supplies fo	on or community ev	vent				
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Г	Check if Austin, TX,	officeholder living exp	oense			
е	(c) described as residue as resid			e sought		Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	is form.						
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 21/55 Rpt: 33/67	Anchia, Rafael M. (The Honorable)			00054808		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$	5,853.0)1
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$122.27	04/12/2025	05/28/202	5			
7 PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code
	Amazon		410 Terry	Ave. N.			
			Seattle, W	A 98109			
8 PURPOSE OF	(a) Category		(b) Descripti	on			
EXPENDITURE X Political	(See Categories listed at the top Event Expense	of this schedule)	Supplies fo	or community ev	vent		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct				Office held			
expenditure to benefit C/OH							
PAYMENT	(-,			Paid			
	\$78.82	05/06/2025	06/28/202	5			
PAYEE	(a) Payee name		(b) Payee ac	ddraee:	City,	State,	Zip Code
	(a) Fayee name		410 Terry		City,	State,	Zip Code
	Amazon		410 16119 /	AVC. IV.			
			Seattle, W	A 98109			
PURPOSE OF	(a) Category	-f. Al-i	(b) Descripti				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Office supp	olies for District	office		
X Political		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 0 06/28/2029	Credit Card Issuer	Paid		
	\$40.44	05/08/2025	00/20/2023	3			
PAYEE	(a) Payee name	<u> </u>	(b) Payee ad	ddress;	City,	State,	Zip Code
			410 Terry		- 9,	,	
	Amazon						
			Seattle, W	A 98109			
PURPOSE OF	(a) Category (b) Description			on			
EXPENDITURE	(See Categories listed at the top of this schedule) Office supplies			olies for District	office		
X Political	Office Overhead/Rental Expense						
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct Candidate/Officeholder name Office sought				Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 22/55 Rpt: 34/67	Anchia, Rafael M. (The Honorable)			00054808		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	5,853.0)1
6	PAYMENT	(a) Amount Charged \$51.89	(b) Date of Charge 05/15/2025	(c) Date(s 06/28/20) Credit Card Issuei 125	r Paid		
7	PAYEE	(a) Payee name Amazon		(b) Payee 410 Terr		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri		office		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct expenditure to benefit C/OH	re to benefit C/OH				Office held		
	PAYMENT	(a) Amount Charged \$233.69	(b) Date of Charge 06/05/2025	(c) Date(s)) Credit Card Issuer	r Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee 410 Terr		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descri		vent		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$159.08	(b) Date of Charge 06/07/2025	(c) Date(s) Credit Card Issuer	r Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee 410 Terr		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descri Supplies	ption for community ev	vent		
					officeholder living exp	ense		
e	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought					Office held		
1								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete thi	is form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)	
	Sch: 23/55 Rpt: 35/67	Anchia, Rafael M. (The Honorable)			00054808			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$	5,853.0	01	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid			
		\$250.85	06/11/2025						
7	PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code	
		Amazon		410 Terry /	Ave. N.				
L				Seattle, W					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti					
		Event Expense	or this serieucie,	Supplies to	or community ev	vent			
	X Political								
L	Non-Political	(*) 	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
F	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s			(a) Data(a) C	Stadit Card Issuer	. Doid			
	PAYMENT				Palu				
		\$58.69	06/18/2025						
H	PAYEE	(a) Payee name (b) Payee address;			ddress;	City,	State,	Zip Code	
		Amazon		410 Terry /	Ave. N.				
				Seattle, W	A 98109				
H	PURPOSE OF	(a) Category		(b) Descripti					
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Supplies for community event					
	X Political	Event Expense							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid			
		\$15.60	01/20/2025	01/20/2023	5				
\vdash	PAYEE	(a) Payee name	I	(b) Payee ac	ddress;	City,	State,	Zip Code	
				4255 Amoi	n Carter Blvd				
		American Airlines							
				Fort Worth	, TX 76155				
	PURPOSE OF	(a) Category	of this cohodule)	(b) Descripti					
	(See Categories listed at the top of this schedule) Transportation Equipment And Related			Officeholder's roundtrip airfare to attend tour of Rio Grand			io Grande		
	X Political Expense			Valley					
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule				Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	ics Commiss	sion Filers)				
Sch: 24/55 Rpt: 36/67	Anchia, Rafael M. (The Honorable)		00054808						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	5,853.0)1				
6 PAYMENT	(a) Amount Charged \$12.00	(b) Date of Charge 02/12/2025	(c) Date(s) Credit Card Issue 03/28/2025	er Paid						
7 PAYEE	(a) Payee name American Airlines		(b) Payee address; 4255 Amon Carter Blvd	City,	State,	Zip Code				
a BURDOS 05	(a) Catamani		Fort Worth, TX 76155							
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Wifi while traveling							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	oense					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$266.61	(b) Date of Charge 05/10/2025	er Paid							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	American Airlines		4255 Amon Carter Blvd							
			Fort Worth, TX 76155							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Transportation Equipr		(b) Description Officeholder's roundtrip a	airfare to attend legislative session						
X Political	Expense									
Non-Political	(*)	of Texas. Complete Schedule T.		, officeholder living exp	oense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held						
PAYMENT	(a) Amount Charged \$285.48	(b) Date of Charge 06/02/2025	(c) Date(s) Credit Card Issue	er Paid						
PAYEE	(a) Payee name American Airlines		(b) Payee address; 4255 Amon Carter Blvd Fort Worth, TX 76155	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Officeholder's tr				ion to redistrict	ing hearir	ng				
Non-Political	<u> </u>	, officeholder living exp	oense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)		
Sch: 25/55 Rpt: 37/67	Anchia, Rafael M. (The Honorable)		00054808				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	5,853.0)1		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	\$409.65	06/05/2025						
7 PAYEE	(a) Payee name American Airlines		(b) Payee address; 4255 Amon Carter Blvd	City,	State,	Zip Code		
			Fort Worth, TX 76155					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	*	(b) Description Officeholder's transportation	on from redistr	icting hea	aring		
Non-Political		of Texas. Complete Schedule T.	officeholder living exp	ense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$633.55	(b) Date of Charge 05/30/2025	(c) Date(s) Credit Card Issuer 06/28/2025	Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	BOA AUSTIN TX		300 W. 6th St #100 Austin, TX 78701					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Staff meal					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	\$191.33	06/01/2025						
PAYEE (a) Payee name Capitol Extension Gift Shop			(b) Payee address; City, State, Zip Cor 1400 Congress Ave E1.006 Austin, TX 78701					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	,	(b) Description Thank you gifts to staff me	embers				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this	form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	ion Filers)	
Sch: 26/55 Rpt: 38/67	Anchia, Rafael M. (The Honorable)			00054808			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF EXPENDIT CHARGED CARD		\$	5,853.0)1	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		edit Card Issuer	Paid			
	\$50.87	02/06/2025	03/28/2025					
7 PAYEE	(a) Payee name	-	(b) Payee add		City,	State,	Zip Code	
	Central Market		4349 W. Noi	-				
	() 0 :		Dallas, TX 7					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		c ovent			
X Political	Event Expense	,	Food for Kill	ow Your Right	s event			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Iss 03/28/2025			edit Card Issuer	Paid				
	\$70.33	02/12/2025	03/28/2025					
PAYEE	(a) Payee name	•	(b) Payee add	ress;	City,	State,	Zip Code	
	Central Market		4001 N Lam	ar Blvd				
			Austin, TX 7	8756				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Birthday cak	e, plates, nap	kins, candles f	or office b	oirthday	
X Political	Gift/Awards/Memorial	is Experise						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	` ' ` '	edit Card Issuer	Paid			
	\$140.73	02/21/2025	03/28/2025					
PAYEE	(a) Payee name	ı	(b) Payee add	ress;	City,	State,	Zip Code	
			5750 E Love	rs Lane				
	Central Market							
		Dallas, TX 7	5206					
PURPOSE OF	(b) Description	1						
EXPENDITURE (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense			Flowers to E	vangelina Val	eques Wilches	for 90th	birthday	
X Political GIII/Awards/Memorials Expense								
Non-Political	of Texas. Complete Schedule T.	edule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name				Office held			
expenditure to benefit C/OH								
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this f	orm.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 27/55 Rpt: 39/67	Anchia, Rafael M. (The Honorable)			00054808		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UEXPENDITUE CHARGED CARD		\$	5,853.0)1
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issuer	Paid		
	\$189.44	03/06/2025	04/28/2025				
7 PAYEE	(a) Payee name		(b) Payee addr	ess;	City,	State,	Zip Code
	Central Market		5750 E. Love	rs Lane			
			Dallas, TX 75	5206			
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description				
EXPENDITURE X Political	Gift/Awards/Memorial		Flowers in me	emory of Alci	ra Matilde Esp	itia	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$378.88	(b) Date of Charge 05/05/2025	(c) Date(s) Cred 06/28/2025	dit Card Issuer	Paid		
	4010.00	00/00/2020					
PAYEE	(a) Payee name		(b) Payee addr	ess;	City,	State,	Zip Code
	Central Market		4001 N Lama	ar Blvd			
	Cermai Market		Austin, TX 78	2756			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top			s and snacks	for the Capito	loffice	
X Political	Food/Beverage Expe	nse					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre 05/28/2025	dit Card Issuer	Paid		
	\$216.50	04/16/2025	05/26/2025				
PAYEE	(a) Payee name	I	(b) Payee addr	ess;	City,	State,	Zip Code
			4349 W NW I	Hwy			
	Central Market #74	7		•			
			Dallas, TX 75	5220			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial		Flower arrang	gement to co	nstituent		
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officerolder/Folitica	· ·	ruction Guide explains how	-	THEN (enter a categor)	y not listed a	bove)
1	Total pages Schedule F4:		·	·	3 Filer ID (Ethic	s Commiss	sion Filers)
l	Sch: 28/55 Rpt: 40/67	Anchia, Rafael M. (The Honorable)		00054808		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	5,853.0)1
6	PAYMENT	(a) Amount Charged \$1,500.00	(b) Date of Charge 01/21/2025	(c) Date(s) Credit Card Issuel 02/28/2025	r Paid		
7	PAYEE	(a) Payee name Child Care Group		(b) Payee address; 3000 Pegasus Park Dr Suite 800 Dallas, TX 75247	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Donation			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense	
9 e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$89.00	(b) Date of Charge 01/14/2025	(c) Date(s) Credit Card Issue 02/28/2025	r Paid		
	PAYEE	(a) Payee name Courtyard by Marrio	ott	(b) Payee address; 12330 N IH-35	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	Austin, TX 78753 (b) Description Staff lodging to attend ope	ening day		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$103.84	(b) Date of Charge 02/19/2025	(c) Date(s) Credit Card Issue 03/28/2025	r Paid		
	PAYEE	(a) Payee name Dallas Morning Nev	vs	(b) Payee address; 1954 Commerce Street Dallas, TX 75201	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Subscription			
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living exp	ense	
N/ L			e sought	Office held			
l							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 29/55 Rpt: 41/67	Anchia, Rafael M. (The Honorable)				00054808			
4	CREDIT CARD ISSUER		ncial institution revious	E) Cl	(PEND	F UNITEMIZED TURES D TO A CREDIT	\$	5,853.0)1	
6	PAYMENT	(a) Amount Charged \$103.84	(b) Date of Charge 04/15/2025		ate(s) 0 28/202	credit Card Issue 5	r Paid			
7	PAYEE	(a) Payee name Dallas Morning Nev	vs	1954		merce Street	City,	State,	Zip Code	
Ļ		(-) O-t				75201				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)		escripti scriptic					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense						
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sougl	nt	_	Office held			
е	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) D	ate(s) C	redit Card Issue	r Paid			
		\$103.84	06/11/2025							
	PAYEE	(a) Payee name		(b) P	ayee ad	ldress;	City,	State,	Zip Code	
		Dallas Morning Nev	ews 1954 Commerce Street							
				Dalla	as, TX	75201				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Subscription						
	Non-Political	(a) Chook if traval outside	of Texas. Complete Schedule T.			Chook if Austin TV	officeholder living over	onco		
┝	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	·	e sougl	<u>L</u>	Crieck ii Austin, 1x,	officeholder living exp	ense		
e	expenditure to benefit C/OH	Canadato, Ciniconolaci	That To The Total of the Total	o oougi			Cilioc field			
	PAYMENT	(a) Amount Charged \$1,190.00	(b) Date of Charge 02/21/2025		ate(s) 0 28/202	Credit Card Issue	r Paid			
	PAYEE	(a) Payee name Dan Dippert Coach	es	730:		Idress; ioneer Pkwy FX 76013	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense			` '	escripti stituen	on ts' transportatio	on to the Capito	ol			
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.					Check if Austin, TX,	officeholder living exp	ense		
е	(S) [e sougl	nt		Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 30/55 Rpt: 42/67	Anchia, Rafael M. ((The Honorable)		00054808			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDITION	\$	5,853.0)1	
6 PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 01/12/2025	(c) Date(s) Credit Card Issue 02/28/2025	er Paid			
7 PAYEE	(a) Payee name Democracy Toolbo	x	(b) Payee address; P.O. Box 6250 McKinney, TX 75071	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Consulting Expense	of this schedule)	(b) Description Communication services				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living exp	ense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$135.82	(b) Date of Charge 01/18/2025	(c) Date(s) Credit Card Issue 02/28/2025	er Paid			
PAYEE	(a) Payee name Enterprise		(b) Payee address; 7366 Cedar Springs Rd Dallas, TX 75235	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Convertible for MLK, Jr. of	district parade			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$144.70	(b) Date of Charge 03/02/2025	(c) Date(s) Credit Card Issue 04/28/2025	er Paid			
PAYEE	(a) Payee name Enterprise	,	(b) Payee address; 7366 Cedar Springs Rd Dallas, TX 75235	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Convertible for Mardi Gra	as parade			
Non-Political	\(\frac{1}{2}\) \(\frac{1}{2}\)	of Texas. Complete Schedule T.					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	xplains how to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	nics Commiss	sion Filers)			
Sch: 31/55 Rpt: 43/67	Anchia, Rafael M. (The Honorable)		00054808					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMI. EXPENDITURES CHARGED TO A CR CARD	\$	5,853.0)1			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid					
	\$116.60	04/11/2025	05/28/2025						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Enterprise		13210 Senlac Dr						
			Farmers Branch, TX	75234					
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense		Rental of vehicle for o	community event					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living ex	kpense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT (a) Amount Charged (b) Date of Charge			(c) Date(s) Credit Card Issuer Paid						
	\$174.62	04/15/2025	05/28/2025						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Enterprise		8200 John W Carpen	iter Fwy					
			Dallas, TX 75247						
PURPOSE OF	(a) Category	(d): 1 11 X	(b) Description						
EXPENDITURE	(See Categories listed at the top Transportation Equipr		Rental of vehicle to tr	ansport constituer	its to/from	Capitol			
X Political	Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living ex	kpense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid					
	\$116.60	05/18/2025	05/28/2025						
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code			
			13210 Senlac Dr						
	Enterprise								
			Farmers Branch, TX	75234					
PURPOSE OF (a) Category			(b) Description						
EXPENDITURE (See Categories listed at the top of this schedule) Event Expense		Rental of vehicle for community event							
X Political									
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.		Check if Aust	tin, TX, officeholder living ex	kpense					
Complete ONLY if direct Candidate/Officeholder name		name Offic	e sought	Office held					
expenditure to benefit C/OH	osmpioto <u>orter</u> ii amost								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

l		The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)		
	Sch: 32/55 Rpt: 44/67	Anchia, Rafael M. (The Honorable)			00054808				
4	CREDIT CARD ISSUER	1	ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$	5,853.0	01		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid				
		\$233.20	06/09/2025							
7	PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code		
		Enterprise		13210 Sen	nlac Dr					
L					ranch, TX 7523	4				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodulo)	(b) Descripti						
		Transportation Equipr		Rental of v	ehicle for comn	nunity event				
	X Political	Expense								
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
-	expenditure to benefit C/OH	() (T (1) = 1 (1)	1// - ///						
	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issue			Credit Card Issuer	Paid					
		\$233.20	06/16/2025							
	PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code		
		Enterprise		13210 Sen	nlac Dr					
				Farmers Branch, TX 75234						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti	on rehicle for comn	ounity ovent				
	X Political	Transportation Equipr Expense	ment And Related	Nental of V	eriicie ioi comii	numity event				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
€	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C 06/28/2029	Credit Card Issuer	Paid				
		\$232.96	05/30/2025	00/20/2023	5					
	PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code		
		EDICEDIE CAE		2307 Hand	cock Dr.					
		EPICERIE CAF								
L				Austin, TX						
	PURPOSE OF EXPENDITURE	1 1 7 7 7		(b) Descripti	on					
	See Categories listed at the top of this schedule) X Political		*	Staff meal						
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T			edule T. Check if Austin, TX, officeholder living expense						
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
E	xpenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 33/55 Rpt: 45/67	Anchia, Rafael M. (The Honorable)			00054808				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$	5,853.0)1		
6	PAYMENT	(a) Amount Charged \$35.35	(b) Date of Charge 01/08/2025	(c) Date(s) (01/28/202	Credit Card Issuer 5	r Paid				
7	PAYEE	(a) Payee name FedEx		Ste 211 Dallas, TX	ockingbird Ln 75235	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti Overnight	ion package to Cap	oitol				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	Office sought		Office held				
	PAYMENT	(a) Amount Charged \$148.02	(b) Date of Charge 01/18/2025	(c) Date(s) (02/28/202	Credit Card Issuer 5	r Paid				
	PAYEE	(a) Payee name FedEx		(b) Payee at 8303 N Ste Ste 120 Dallas, TX	emmons	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descripti Signage fo	on or MLK, Jr. distri	ict parade				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Γ	Check if Austin, TX,	officeholder living exp	ense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$37.82	(b) Date of Charge 02/06/2025	(c) Date(s) 0 03/28/202	Credit Card Issuer 5	r Paid				
PAYEE (a) Payee name (b) Payee address 8303 Stemmon Ste 120 Dallas, TX 752		nmons Fwy	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense		of this schedule)	(b) Descripti Supplies fo							
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T			Schedule T. Check if Austin, TX, officeholder living expense						
е	Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct candidate/Officeholder name			e sought		Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete th	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 34/55 Rpt: 46/67	Anchia, Rafael M. (The Honorable)			00054808		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$	5,853.0)1
6	PAYMENT	(a) Amount Charged \$492.20	(b) Date of Charge 02/06/2025	(c) Date(s) 0 03/28/202	Credit Card Issuer 5	Paid		
7	PAYEE	(a) Payee name FedEx		(b) Payee at 3905 Oak Suite 110 Dallas, TX	Lawn Ave 75219	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Printing Expense	of this schedule)	(b) Descripti Printing fly	ion rers for Know Yo	our Rights		
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$28.89	(b) Date of Charge 03/07/2025	(c) Date(s) 0 04/28/202	Credit Card Issuer 5	Paid		
	PAYEE	(a) Payee name FedEx			ddress; temmons Fwy 75247	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	I CODICS		ion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	_	Office held		
	PAYMENT	(a) Amount Charged \$6.13	(b) Date of Charge 03/26/2025	(c) Date(s) 0 04/28/202	Credit Card Issuer 5	Paid		
PAYEE (a) Payee name (b) Payee address; 327 Congress Ave Ste 100 Austin, TX 78701		ess Ave	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political (a) Category (See Categories listed at the top of this schedule) Printing Expense		of this schedule)	(b) Descripti Printing	ion				
<u> </u>	Non-Political (c) Check if travel outside of Texas. Complete Schedule T				Check if Austin, TX,	officeholder living exp	ense	
е				e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 35/55 Rpt: 47/67	Anchia, Rafael M. (The Honorable)			00054808		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	5,853.0	01
6	PAYMENT	(a) Amount Charged \$48.17	(b) Date of Charge 04/17/2025	(c) Date(s) 05/28/20) Credit Card Issuer 125	Paid		
7	PAYEE	(a) Payee name FedEx		Ste 211 Dallas, T	Mockingbird Ln	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri Overnigh	ption It package to Cap	oitol		
	Non-Political	1	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 e	Complete ONLY if direct expenditure to benefit C/OH	ture to benefit C/OH				Office held		
	PAYMENT	(a) Amount Charged \$274.42	(b) Date of Charge 04/28/2025	(c) Date(s) 05/28/20) Credit Card Issuer 025	Paid		
	PAYEE	(a) Payee name FedEx		(b) Payee 110 E 2n Austin, T	nd St	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Printing Expense	of this schedule)	(b) Description (b) Printing f	ption			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$75.94	(b) Date of Charge 06/26/2025	(c) Date(s)) Credit Card Issuer	Paid		
	PAYEE	(a) Payee name FedEx		(b) Payee 1625 W I Ste 211 Dallas, T	Mockingbird Ln	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri Overnigh	ption nt package to Cap	oitol		
L	Non-Political	1	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct								
ĺ								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commis	sion Filers)
	Sch: 36/55 Rpt: 48/67	Anchia, Rafael M. (The Honorable)				00054808		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	NDI	F UNITEMIZED ITURES D TO A CREDIT	\$	5,853.0	01
6	PAYMENT	(a) Amount Charged \$1,594.38	(b) Date of Charge 02/26/2025	(c) Date(s 03/28/20		Credit Card Issuer	Paid		
7	PAYEE	(a) Payee name Go Oak Cliff		(b) Payee 1300 S. # 295 Dallas, T	Po	olk St	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descri Registra	•	on n for Mardi Gra	s parade		
	Non-Political	`	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held		
е	xpenditure to benefit C/OH	() 4 () 4	L (1) D (1) (1)	1() 5 . (` `	2 12 0 11	B : I		
	PAYMENT	(a) Amount Charged \$38.38	(b) Date of Charge 01/01/2025	02/28/20		Credit Card Issuer	Paid		
	PAYEE	(a) Payee name Google Gsuite			npł	ddress; nitheater Pkwy /iew, CA 74043	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri	ipti				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
	PAYMENT	(a) Amount Charged \$38.38	(b) Date of Charge 02/01/2025	(c) Date(s 03/28/20		credit Card Issuer 5	· Paid		
	PAYEE	(a) Payee name Google Gsuite			npł	ddress; nitheater Pkwy /iew, CA 74043	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Monthly usage charge									
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.						Check if Austin, TX,	officeholder living expe	ense	
е				e sought			Office held		
1									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME			_		3 Filer ID (Ethic	s Commis	sion Filers)		
	Sch: 37/55 Rpt: 49/67	Anchia, Rafael M. (The Honorable)				00054808				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	NDI GEI	F UNITEMIZED TURES D TO A CREDIT	\$	5,853.0	01		
6	PAYMENT	(a) Amount Charged \$38.38	(b) Date of Charge 03/01/2025	(c) Date(s 04/28/20		redit Card Issuer	Paid				
7	PAYEE	(a) Payee name Google Gsuite			nph	ldress; nitheater Pkwy /iew, CA 74043	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri	iptio						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense			
				e sought			Office held				
е	xpenditure to benefit C/OH				_						
	PAYMENT	(a) Amount Charged \$38.38	(b) Date of Charge 04/01/2025	(c) Date(s 04/28/20		redit Card Issuer 5	Paid				
	PAYEE	YEE (a) Payee name Google Gsuite			nph	ldress; nitheater Pkwy /iew, CA 74043	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri	iptic						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		$\overline{\Box}$	Check if Austin, TX,	officeholder living expe	ense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held				
	PAYMENT	(a) Amount Charged \$36.26	(b) Date of Charge 05/01/2025	(c) Date(s 05/28/20		redit Card Issuer 5	Paid				
	PAYEE	(a) Payee name Google Gsuite			nph	ldress; nitheater Pkwy /iew, CA 74043	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	OITURE (See Categories listed at the top of this schedule) Fees		(b) Descri Monthly	•	on age charge					
$ldsymbol{ld}}}}}}$	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				L	Check if Austin, TX,	officeholder living expe	ense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held				
ı											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 38/55 Rpt: 50/67	Anchia, Rafael M. (The Honorable)		00054808			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,853.01			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$38.38	06/01/2025					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Cod	le		
	Google Gsuite		1600 Amphitheater Pkwy				
			Mountain View, CA 7404	3			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Fees	,	Monthly usage charge				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$184.14	01/28/2025	02/28/2025				
PAYEE (a) Payee name			(b) Payee address;	City, State, Zip Cod	le		
	H-E-B		1000 EAST 41 ST.				
			Austin, TX 78751				
PURPOSE OF	(a) Category	of this cohodule)	(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Snacks and refreshments for Capitol office				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$139.85	02/21/2025	03/28/2025				
PAYEE	(a) Payee name	ı	(b) Payee address;	City, State, Zip Cod	le		
			1000 EAST 41 ST.				
	H-E-B						
			Austin, TX 78751				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	Refreshments and snack	s for the Capitol office			
X Political	- 1 Journal Verage Exper	1100					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 39/55 Rpt: 51/67	Anchia, Rafael M. (The Honorable)		00054808				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,853.01				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid				
	\$204.34	03/31/2025	04/28/2025					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	H-E-B		1000 EAST 41 ST.					
			Austin, TX 78751					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
X Political	Food/Beverage Exper		Snacks and refreshments	acks and refreshments for Capitol office				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH	()		1() = . () =					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuel 05/28/2025	r Paid				
	\$171.27	04/09/2025	03/23/2020					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			1000 EAST 41 ST.					
			Austin, TX 78751					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Speaks and refreshments for Capital office					
l <u> </u>	Food/Beverage Exper		Snacks and refreshments for Capitol office					
X Political			<u> </u>					
Non-Political	· · · —	of Texas. Complete Schedule T.		officeholder living expense Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office field				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$253.26	05/01/2025	06/28/2025					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	H-E-B		1000 EAST 41 ST.					
			Austin, TX 78751					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper		Snacks and refreshments	for Capitol office				
X Political	2.1. 2. 2.1.92 =							
Non-Political	`	of Texas. Complete Schedule T.		officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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/Officerolder/Folitica	· ·	ruction Guide explains how	•	THER (enter a category	not iisteu a	bove)		
1	Total pages Schedule F4:				3 Filer ID (Ethics	S Commiss	sion Filers)		
Ī	Sch: 40/55 Rpt: 52/67	Anchia, Rafael M. (The Honorable)		00054808		,		
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	5,853.0)1		
6	PAYMENT	(a) Amount Charged \$144.80	(b) Date of Charge 05/08/2025	(c) Date(s) Credit Card Issuer 06/28/2025	Paid				
7	PAYEE	(a) Payee name H-E-B		(b) Payee address; 1000 EAST 41 ST. Austin, TX 78751	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Description					
L	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		officeholder living expe	nse			
	Complete ONLY if direct	Candidate/Officeholder	e sought	Office held					
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$42.96	(b) Date of Charge 04/29/2025	(c) Date(s) Credit Card Issuer 05/28/2025	r Paid				
	PAYEE	(a) Payee name H-E-B		(b) Payee address; 2701 E 7th Street Austin, TX 78702	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Refreshments for Capitol office					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	PAYMENT	(a) Amount Charged \$176.99	(b) Date of Charge 02/19/2025	(c) Date(s) Credit Card Issuer 03/28/2025	r Paid				
	PAYEE (a) Payee name H-E-B Online #108		(b) Payee address; 1000 EAST 41 ST. Austin, TX 78751	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Refreshments and snacks for the Capitol office						
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			<u> </u>	officeholder living expe	nse			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
I									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)		
Sch: 41/55 Rpt: 53/67	Anchia, Rafael M. (The Honorable)		00054808			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,853.01			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$166.07	03/04/2025	04/28/2025				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip	Code		
	H-E-B Online #108		1000 EAST 41 ST.				
			Austin, TX 78751				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	f 11 0 11 1 ff			
X Political	Food/Beverage Exper		Refreshments and snack	s for the Capitol office			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$179.38	(b) Date of Charge 03/17/2025	(c) Date(s) Credit Card Issue 04/28/2025	r Paid			
	Ψ173.00	00/11/2020					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip	Code		
			1000 EAST 41 ST.				
	H-E-B Online #108						
			Austin, TX 78751				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
l <u>—</u>	Food/Beverage Exper		Refreshments and snacks for the Capitol office				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH		T	1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 05/28/2025	r Paid			
	\$118.81	04/23/2025	03/20/2023				
PAYEE	(a) Payee name	l	(b) Payee address;	City, State, Zip	Code		
			1000 EAST 41 ST.				
	H-E-B Online #108						
			Austin, TX 78751				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	Refreshments and snack	s for the Capitol office			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 42/55 Rpt: 54/67	Anchia, Rafael M. ((The Honorable)			00054808		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	5,853.0)1
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$253.26	05/02/2025	06/28/2029	5			
7 PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	H-E-B Online #108		1000 EAS	Г 41 ST.			
			Austin, TX				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti		for the Constitution	1 . ("	
X Political	Food/Beverage Expe		Retreshme	ents and snacks	for the Capito	т опісе	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
	\$469.03 06/05/2025						
PAYEE (a) Payee name			(b) Payee ad	ddress;	City,	State,	Zip Code
	Hotel Paso Del Nor	do.	10 Henry T	rost Ct			
	Hotel Paso Del Noi	ile					
	() 0 :		El Paso, T				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Officeholder's lodging while attending redistricting hearing				
X Political	Travel Out of District		Officeriolder's loaging write attending redistricting hearing				nearing
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought		Office held		
expenditure to benefit C/OH			•				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 0 03/28/2029	Credit Card Issuer	Paid		
	\$250.00	02/04/2025	03/20/2023	5			
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
	IT O		1108 Lava	ca St			
	IT Caucus of the Te	exas House of	Ste 110-70)1			
			Austin, TX	78701			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodulo)	(b) Descripti	on			
l <u> </u>	Fees	or tris scriedule)	Dues				
X Political							
Non-Political	\(\frac{1}{2}\) \(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics C	ommission Filers)		
Sch: 43/55 Rpt: 55/67	Anchia, Rafael M. (The Honorable)		00054808			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5	,853.01		
6 PAYMENT	(a) Amount Charged \$2,828.07	(b) Date of Charge 02/28/2025	(c) Date(s) Credit Card Issuer 03/28/2025	r Paid			
7 PAYEE	(a) Payee name Jeep Masters		(b) Payee address; 3822 S. Congress Ave	City, S	State, Zip Code		
8 PURPOSE OF	(a) Category		Austin, TX 78704 (b) Description				
8 PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense		Repair of legislative vehicle	le			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$860.41	(b) Date of Charge 05/28/2025	(c) Date(s) Credit Card Issuer 06/28/2025	r Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, S	State, Zip Code		
	Jeep Masters		3822 S. Congress Ave				
			Austin, TX 78704				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr		(b) Description Repair of legislative vehicle				
Non-Political	Expense			<i>"</i>			
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$61.57	(b) Date of Charge 01/23/2025	(c) Date(s) Credit Card Issuer 02/28/2025	r Paid			
PAYEE	(a) Payee name Juiceland		(b) Payee address; 1109 E 5th St Ste 110 Austin, TX 78702	City, S	State, Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	,	(b) Description Staff meal				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commis	sion Filers)		
	Sch: 44/55 Rpt: 56/67	Anchia, Rafael M. (The Honorable)			00054808				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDI	\$	5,853.0	01		
6	PAYMENT	(a) Amount Charged \$67.52	(b) Date of Charge 02/04/2025		Credit Card Issu 25	er Paid				
7	PAYEE	(a) Payee name Juiceland		(b) Payee a 2828 Gua	adalupe St	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip	tion					
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, T	K, officeholder living ex	pense			
	O Complete ONLY if direct candidate/Officeholder name office expenditure to benefit C/OH					Office held				
	PAYMENT	(a) Amount Charged \$81.72	(b) Date of Charge 02/12/2025	(c) Date(s) 03/28/20	Credit Card Issue 25	er Paid				
	PAYEE	(a) Payee name Juiceland		(b) Payee a 2828 Gua Austin, TX	adalupe St	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expen		(b) Descrip	tion					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living ex	pense			
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$72.42	(b) Date of Charge 03/11/2025	(c) Date(s) 04/28/202	Credit Card Issu 25	er Paid				
	PAYEE	(a) Payee name Juiceland	1	(b) Payee a 1109 E 5 Ste 110 Austin, T	th St	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip Staff mea						
	Non-Political	1	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living ex	pense			
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)	
Sch: 45/55 Rpt: 57/67	Anchia, Rafael M. (The Honorable)		00054808			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	5,853.01		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$24.36	03/31/2025	04/28/2025				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Juiceland		120 E. 4th St				
			Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodula)	(b) Description				
X Political	Food/Beverage Expe	•	Staff meal				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$109.01	04/09/2025	05/28/2025				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Tuisaland		1109 E 5th St				
	Juiceland		Ste 110				
			Austin, TX 78702				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u>—</u>	Food/Beverage Expe		Staff meal				
X Political							
Non-Political	+·· —	of Texas. Complete Schedule T.		, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 06/28/2025	er Paid			
	\$79.86	05/02/2025	00/28/2025				
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code	
			607 W 3rd St				
	Juiceland		Ste 115				
			Austin, TX 78701				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Staff meal				
X Political	1 Journal Research	1100					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)				
	Sch: 46/55 Rpt: 58/67	Anchia, Rafael M. (The Honorable)			00054808						
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$	5,853.0)1				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid						
		\$66.18	06/03/2025									
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code				
l		Juiceland	1109 E 5th	n St								
		Juicelaliu		Ste 110								
L				Austin, TX								
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this cahadula)	(b) Descripti	ion							
	EXPENDITURE	Food/Beverage Expe		Staff meal								
	X Political											
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense					
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held						
е	xpenditure to benefit C/OH											
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid						
		\$170.81	05/05/2025	06/28/202	5							
	PAYEE	(a) Payee name	<u> </u>	(b) Payee a	ddress;	City,	State,	Zip Code				
				3011 Guld	en Lane							
		Kate Weiser Choco	lates	Suite 115								
l				Dallas, TX	75212							
	PURPOSE OF	(a) Category		(b) Description								
	EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial		Gift to constituent								
	X Political	Ont / Wards/Wemona	3 Expense									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense					
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held						
е	xpenditure to benefit C/OH											
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid						
		\$342.07	05/05/2025	06/28/202	5							
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code				
		Kate Weiser Choco	latas	3011 Guld	en Lane							
l		Rate Weiser Choco	iales	Suite 115								
L				Dallas, TX								
l	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodula)	(b) Descripti								
		Gift/Awards/Memorial	,	Gift to con	stituents							
	X Political											
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense					
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held						
е	xpenditure to benefit C/OH											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete thi	s form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 47/55 Rpt: 59/67	Anchia, Rafael M. (The Honorable)			00054808		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED TURES D TO A CREDIT	\$	5,853.0)1
6	PAYMENT	(a) Amount Charged \$295.00	(b) Date of Charge 01/15/2025	(c) Date(s) C 02/28/2025	credit Card Issuer 5	Paid		
7	PAYEE	(a) Payee name Legislative Solution	s	(b) Payee at P.O. Box 5	643	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Solicitation/Fundraisir		Austin, TX (b) Description Email distri		aising		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held		
	PAYMENT	(a) Amount Charged \$1,030.00	(b) Date of Charge 01/16/2025	(c) Date(s) C 02/28/2025	Credit Card Issuer	[*] Paid		
	PAYEE	(a) Payee name Legislative Study G	roup	(b) Payee address; P.O. Box 12943 Austin, TX 78711		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$117.26	(b) Date of Charge 01/01/2025	(c) Date(s) C 02/28/2025	Credit Card Issuer 5	Paid		
PAYEE (a) Payee name Mailchimp			(b) Payee address; City, State, Zip Cod c/o The Rocket Science Group LLC 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308				Zip Code	
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees		(b) Descripti Mass maili					
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	s Commiss	sion Filers)	
Sch: 48/55 Rpt: 60/67	Anchia, Rafael M. (The Honorable)		00054808			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRECARD	\$	5,853.0	01	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$117.26	02/01/2025	03/28/2025				
7 PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code	
			c/o The Rocket Science	e Group LLC			
	Mailchimp 		675 Ponce de Leon Ave NE Suite 5000				
			Atlanta, GA 30308				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE X Political	(See Categories listed at the top of this schedule) Fees		Mass mailing service				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is:	suer Paid			
	\$117.26	03/01/2025	04/28/2025				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Marital Cons		c/o The Rocket Science	e Group LLC			
	Mailchimp		675 Ponce de Leon Av	e NE Suite 5000			
			Atlanta, GA 30308				
PURPOSE OF	(a) Category	of this cohodule)	(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Mass mailing service				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$117.26	04/01/2025	04/28/2025				
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code	
			c/o The Rocket Science	e Group LLC		·	
	Mailchimp		675 Ponce de Leon Ave NE Suite 5000				
			Atlanta, GA 30308				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Mass mailing service				
X Political	Fees						
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			e T. Check if Austin, TX, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 49/55 Rpt: 61/67	Anchia, Rafael M. (The Honorable)			00054808				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,853.01)1		
6 PAYMENT	(a) Amount Charged \$117.26	(b) Date of Charge 05/01/2025	(c) Date(s) Credit Card Issuer 06/28/2025	Paid				
7 PAYEE	(a) Payee name Mailchimp		(b) Payee address; c/o The Rocket Science G 675 Ponce de Leon Ave N Atlanta, GA 30308	•	State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Mass mailing service					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$117.26	(b) Date of Charge 06/01/2025	(c) Date(s) Credit Card Issuer	· Paid				
PAYEE	PAYEE (a) Payee name Mailchimp			(b) Payee address; City, State, Zip Code c/o The Rocket Science Group LLC 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Mass mailing service					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$750.00	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer 02/28/2025	Paid				
PAYEE	(a) Payee name Mexican American	Legislative	(b) Payee address; 202 W. 13th St Austin, TX 78701	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees			(b) Description Dues for 2025					
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		officeholder living expe	ense			
Complete ONLY if direct								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this form.		,	,	
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
Sch: 50/55 Rpt: 62/67	Anchia, Rafael M. (The Honorable)			00054808			
4 CREDIT CARD ISSUER	Name of financial institution See previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 5,853.01			
6 PAYMENT	(a) Amount Charged \$750.00	(b) Date of Charge 01/15/2025	(c) Date(s) Credit Card Issuel 02/28/2025	r Paid			
7 PAYEE	(a) Payee name Mexican American	Legislative	(b) Payee address; 202 W. 13th St	State,	Zip Code		
8 PURPOSE OF	(a) Category		Austin, TX 78701 (b) Description				
8 PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	Dues for 2026				
	Fees		Dues 101 2020				
X Political							
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$25.95	(b) Date of Charge 01/12/2025	(c) Date(s) Credit Card Issuer 02/28/2025	r Paid			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Michael's		5301 Beltline Ste 101 Dallas, TX 75254				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Frames for Capitol office				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX.	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	ce sought Office held				
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$16.09	(b) Date of Charge 02/21/2025	(c) Date(s) Credit Card Issuer 03/28/2025	r Paid			
PAYEE	(a) Payee name Michael's		(b) Payee address; 5500 Greenville Ave Ste 700 Dallas, TX 75206	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description Frame for flag for Evange birthday	lina Valeques \	Wilches' 9	90th	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	Sch: 51/55 Rpt: 63/67	Anchia, Rafael M. (The Honorable)				00054808			
4	CREDIT CARD ISSUER	Name of financial institution see previous See previous See previous TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 5,853.01)1			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid			
		\$177.47	06/12/2025						
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
		Michael's		5301 Beltline Ste 101 Dallas, TX 75254					
8	PURPOSE OF	(a) Category (b) Description							
	EXPENDITURE X Political	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense Frames for District office							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	΄ Γ	Check if Austin, TX,	officeholder living exp	ense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	<u></u>	Office held			
е	expenditure to benefit C/OH								
Г	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid			
		\$50.88	06/12/2025						
PAYEE		(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
		Michaella		5301 Beltli	ine				
		Michael's		Ste 101					
				Dallas, TX					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti					
	X Political	Office Overhead/Rent		Frames for	r District office				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	sought		Office held			
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid			
		\$43.29	06/13/2025						
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
		5301 Beltli	ine						
		Michael's Ste 1		Ste 101					
L				Dallas, TX					
	PURPOSE OF	(a) Category (See Categories listed at the top	of this echodula)	(b) Descripti					
	EXPENDITURE	Office Overhead/Rent	,	rames for	r District office				
I	X Political		•						
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	xpenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 52/55 Rpt: 64/67	Anchia, Rafael M. (The Honorable)			00054808			
4 CREDIT CARD ISSUER	Name of financial institution see previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 5,853.01			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$116.43	06/20/2025					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Michael's		5301 Beltline				
	Michaers		Ste 101				
			Dallas, TX 75254				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description				
	Gift/Awards/Memorial		Flag and certificate frames to be presented				
X Political		- ,					
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, (officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$70.00	01/10/2025	02/28/2025				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Monday.com		1515 Market Street				
			Denver, CO 80202				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Subscription				
X Political	Fees						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	ce sought Office held				
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$97.10	01/22/2025	02/28/2025				
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code	
			1515 Market Street				
Monday.com							
			Denver, CO 80202				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Subscription upgrade				
X Political	1.003						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 53/55 Rpt: 65/67	Anchia, Rafael M. (00054808			
4	CREDIT CARD ISSUER	Name of financial institution See previous See previous SEE TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 5,853.01				
6	PAYMENT	(a) Amount Charged \$148.96	(b) Date of Charge 02/22/2025	(c) Date(s) 0 03/28/202	Credit Card Issuei 5	r Paid		
7	PAYEE	(a) Payee name Monday.com		(b) Payee at	ket Street	City,	State,	Zip Code
L				Denver, C				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Subscription (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,						
	Non-Political			Check if Austin, TX, officeholder living expense				
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$148.96	(b) Date of Charge 03/22/2025	(c) Date(s) (04/28/202	Credit Card Issuei 5	r Paid		
PAYEE		(a) Payee name	l	(b) Payee a	ddress;	City,	State,	Zip Code
		Monday.com		1515 Mark	cet Street			
				Denver, C	O 80202			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX.	officeholder living exp	ense	
┝	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held		
e	expenditure to benefit C/OH			· ·				
	PAYMENT	(a) Amount Charged \$148.96	(b) Date of Charge 04/22/2025	(c) Date(s) (05/28/202	Credit Card Issuei 5	Paid		
Г	PAYEE	(a) Payee name	ı	(b) Payee a	ddress;	City,	State,	Zip Code
Monday.com		1515 Market Street						
L				Denver, CO 80202				
	PURPOSE OF EXPENDITURE X Political	NDITURE (See Categories listed at the top of this schedule) Fees		(b) Description				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin. TX	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 54/55 Rpt: 66/67	Anchia, Rafael M. (The Honorable)			00054808			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	\$ 5,853.01		
6	PAYMENT	(a) Amount Charged \$148.36	(b) Date of Charge 05/22/2025	(c) Date(s) Credit Card Issue 06/28/2025	er Paid			
7	PAYEE	(a) Payee name Monday.com		(b) Payee address; 1515 Market Street			Zip Code	
Ļ	DUDDO05.05	Denver, CO 80202						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Subscription						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	K, officeholder living expense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
E	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$158.96	06/22/2025					
PAYEE		(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Monday.com			1515 Market Street				
				Denver, CO 80202				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Subscription renewal				
	Non-Political	(a) Charaltiffaranal antaida	of Towns Committee Colombials T	Oh a alla if A conting TV	-##			
⊢		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	if Austin, TX, officeholder living expense Office held			
e	Complete ONLY if direct expenditure to benefit C/OH			. Sought	Office field			
	PAYMENT	(a) Amount Charged \$350.00	(b) Date of Charge 01/01/2025	(c) Date(s) Credit Card Issue 02/28/2025	er Paid			
	PAYEE	Oak Cliff Chamber of Commerce 400 Suite		(b) Payee address; 400 S. Zang Blvd Suite C-59 Dallas, TX 75208	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Annual dues				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense		
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Travel Out of District

Candidate/Officeholder/Politica				THER (enter a category not lister	d above)		
4 7 1 0 1 1 54		ruction Guide explains how	to complete this form.	a =1	· · · · · · · · · · · · · · · · · · ·		
1 Total pages Schedule F4:		3 Filer ID (Ethics Commission Filers)					
Sch: 55/55 Rpt: 67/67	· · · · · · · · · · · · · · · · · · ·			00054808			
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$ 5,853	2 01		
ISSUER	see pr	revious	CHARGED TO A CREDIT		5.01		
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$191.19	02/01/2025	03/28/2025				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State	e, Zip Code		
			316 W. 7th Street				
	Oddfellows						
			Dallas, TX 75208				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Meeting with Park Cities Democratic Women				
X Political	Food/Beverage Exper	ise					
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder		e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$55.40	03/21/2025	04/28/2025				
	Ψ33.40	03/21/2023					
PAYEE	(a) Payee name		(b) Payee address;	City, State	e, Zip Code		
	Oddfellows		316 W. 7th Street				
			Dallas, TX 75208				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper		Meeting with constituents re legislative priorities				
X Political	T God/Beverage Exper	150					
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
l							