CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	•	cs Commission Filers)	2 Total pages filed:			OFFICE U	SE ONLY
	00042411		74			Date Received	
3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	ELECTRONICA	LLY FILED
	NAME	The Honorable	Jose			07/30/2025	
		NICKNAME	LAST		SUFFIX		
			Menendez			Date Hand-delivered or [Date Postmarked
4	ORIGINAL REPORT TYPE	X January 15	Runoff	Other (s	pecify)		_
		July 15	Exceeded modified	reporting limit		Receipt #	Amount
		30th day before election	15th day after camp appointment (office			Date Processed	
		8th day before election	Final Report (Attacl	n C/OH-FR)		Date Processed	
5	ORIGINAL PERIOD	Month Day Yea	ar	Month Day	Year	Date Imaged	
	COVERED	07/01/2024	THROUGH	12/31/2024			
6	EXPLANATION OF C	ORRECTION				-	
	human error and have	e a copy of the check show	ing the date of 7/17/20	24.			
7	AFFIDAVIT		and	ear, or affirm, under pe correct. ck the box next to any			report is true
			X	Semiannual reports was made in good fa misrepresent the info	ith and without	an intent to mislead	
			X	Other reports: I s report not later than that the report as orig swear, or affirm, that filed was made in go	the 14th busines ginally filed is in any error or om	ss day after the date accurate or incomple	l learned ete. l
				The I	Honorable Jos	e Menendez	
	AFFIX NOTABY OF	AMP / SEAL ABOVE		Signatu	re of Candidate	or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE					
	Sworn to and subsc	ribed before me, by the sai	d		, this th	ne	day
	of	, 20, to cer	tify which, witness my l	hand and seal of office).		
	Signature of office	er administering oath	Printed name of of	ficer administering oat	th T	Fitle of officer admini	stering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commi 00042411		2 Total pages	filed: 74	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY	
OFFICEHOLDER NAME	The Honorable	Jose			Date Received		
						CALLY FILED	
	NICKNAME			CUETIV	07/30/2025	0,12211122	
	NICKNAME	LAST Menendez		SUFFIX	0173072023		
		Wellelluez					
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	d or Date Postmarked	
OFFICEHOLDER MAILING	P.O. Box 100833						
ADDRESS					Receipt #	Amount	
Change of Address	San Antonio, TX 78201						
					Date Processed		
					Date Imaged		
					Date illiaged		
5 CAMPAIGN	MS / MRS / MR	FIRST		MI			
TREASURER		Estefana		1411			
NAME	IVIS.	LStelalia					
	NICKNAME	LAST		SUFFIX			
		Martinez					
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CIT	Υ; S	TATE; ZIP CODE	
ADDRESS	114 Olga Dr.						
(Residence or Business)							
(,	San Antonio, TX 78237						
	4554 0055 BUOM						
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION				
PHONE	(210) 432-2619						
9 DEDODT							
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after (campaign treasurer	
		J Sour day before		Runon		officeholder only)	
	July 15	8th day before	election	Exceeded modified	Final Report (A	ttach C/OH-FR)	
		_	_	reporting limit			
9 PERIOD	Month Day Year			Month Day	y Year		
COVERED	07/01/2024	TH	IROUGH	12/31/20)24		
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month Day Year	P	rimary	Runoff	Other		
			eneral	Special			
		"					
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	JT (if known)		
II OFFICE	OFFICE HELD (if any) State Senator District 26 B	ovar		State Senator			
	State Seriator District 20 B	CAGI		State Seriator	DISTRICT ZO		
		GO T	O PAGE 2				
I							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 74

13 C / OH NAME	3 C / OH NAME Menendez, Jose (The Honorable) 14 Filer ID 00042411						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made withou d officeholders are required to report this informati	t the candidate's or office	holder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE ADDRESS					
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRI	ESS				
16 CONTRIBUTION TOTALS	AN PLEDGES, LOANS, ECTRONICALLY)	\$ 0.00					
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	NS)	\$ 130,242.21			
EXPENDITURE TOTALS		\$ 6,121.87					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 95,857.53			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 1,067,227.65			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00			
17 AFFIDAVIT							
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required to				
		The Use		_			
			norable Jose Menende of Candidate or Officeholo				
AFFIX NO	OTADV CTAMB / CEAL AB						
AFFIX NO	OTARY STAMP / SEAL AB	JVE					
Sworn to and subs	day						
UI	, 20, 10 Cl	ertify which, witness my hand and seal of office.					
							
Signature of offi	cer administering	Printed name of officer administering	Litle of officer	administering oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

4 of 74

				4 01 74
18 FILER NAME Menendez, J	lose (The Honorable)	19 Filer ID 00042411	(Ethics Co	ommission Filers)
20 SCHEDULE S NAME OF SCI			SUB	TOTAL AMOUNT
1. X S	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	129,974.00
2. X S	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	268.21
3. X S	CHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4. X S	CHEDULE E: LOANS		\$	0.00
5. X S	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	95,857.53
6. X S	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7. X S	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
8. X S	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X S	CHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10. S	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11. S	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS O FILER	RETURNED	\$	21,123.89
			-	

	MONET	ARY POLITICAL CONTR	RIBUTIONS	SCHEDULE A1
	The Instru	ction Guide explains how to comp	olete this form.	1 Total pages Schedule A1: Sch: 1/20 Rpt: 5/74
2	FILER NAME Menendez, 3	ose (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042411
4	Date 07/22/2024	 Full name of contributor out-of-st Alcott, Tim (Mr.) Contributor address; City; State; Zip Coo 		7 Amount of Contribution (\$) \$100.00
_	Deinsinal	San Antonio, TX 78202	10 Familian (Octobrilla)	
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))
	Date 11/21/2024	Full name of contributor x out-of-st Allstate PAC Contributor address; City; State; Zip Cod	tate PAC (ID#: <u>C00040253</u>)	Amount of Contribution (\$) \$1,000.00
	Principal occu	Northbrook, IL 60062 pation / Job title (See Instructions)	Employer (See Instructions))
	i illicipal occu	sation 7 oob title (occ manactions)	Employer (See manuchons))
	Date 07/21/2024	Full name of contributor out-of-st Anderson, Terri (Ms.) Contributor address; City; State; Zip Cod	de	Amount of Contribution (\$) \$2,000.00
		Coppell, TX 75019		
		pation / Job title (See Instructions) Dusing Real Estate Developer	Employer (See Instructions) Self)
	Date 10/26/2024	Apache Corporation PAC	de	Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
	Date 10/26/2024	Full name of contributor out-of-st Austin Firefighters Association PAC Contributor address; City; State; Zip Cod Austin, TX 78752	de	Amount of Contribution (\$) \$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
			'	

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/20 Rpt: 6/74	
2	FILER NAME Menendez, J	lose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 10/26/2024	Bank of America State and			7	Amount of Contribution (\$)	\$1,500.00
_	Deire sin al access	Wilmington, DE 19808	1.	O Faralas a (O a la desta di a	$\overline{\Gamma}$		
8	Principal occu	pation / Job title (See Instructions)	,	9 Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor Beef PAC Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Amarillo , TX 79106					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/22/2024	Full name of contributor Brimhall, Pegy (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		San Antonio, TX 78210					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 07/17/2024	Full name of contributor Bronfman, Jeremy (Mr.) Contributor address; City; Sta)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/30/2024	Full name of contributor Burney, Frank (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Martin & Drought	5)		
				3 -			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/20 Rpt: 7/74	
2	FILER NAME Menendez,	lose (The Honorable)		3	Filer ID (Ethics Commission Filers) 00042411	
4	Date 12/14/2024	 Full name of contributor	: <u>C00002089</u>)	7	Amount of Contribution (\$) \$1,000.) 00
8	Principal occu	Washington, DC 20001 pation / Job title (See Instructions)	9 Employer (See Instructions	.)		_
_	Date	Full name of contributor out-of-state PAC (ID#		_	Amount of Contribution (\$)	
	08/27/2024	Cavender, Richard (Mr.) Contributor address; City; State; Zip Code			\$250.	JU
	Principal occu	San Antonio, TX 78257 pation / Job title (See Instructions)	Employer (See Instructions	()		
	Auto dealer	,	Cavender Auto	,		
	Date 11/05/2024	Full name of contributor x out-of-state PAC (ID#: C00348938) Chubb Group Holdings Inc. PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.) 00
		PHILADELPHIA, IN 19106	.			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i) 		
	Date 09/18/2024	Full name of contributor	:)		Amount of Contribution (\$) \$1,000.)0
	Principal occu	San Antonio, TX 78227 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor X out-of-state PAC (ID# Citigroup Inc. PAC Contributor address; City; State; Zip Code	:C00039305)		Amount of Contribution (\$) \$1,000.	
	Principal occu	Washington , DC 20004 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
				,		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/20 Rpt: 8/74		
2	FILER NAME Menendez, 3	ose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)	
4	Date 07/18/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00	
8	Principal occu	Houston, TX 77046 pation / Job title (See Instructions)	9 Employer (See Instructions) ;)			
				,			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Dobson, Sean (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	Employer (See Instructions	;) 			
	CEO		Amherst	',			
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Donovon, Rodriguez (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
		San Antonio, TX 78201					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_EDF Action Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 10/26/2024	Full name of contributor	C00097568)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/20 Rpt: 9/74	
2	FILER NAME Menendez, J	Jose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	 Full name of contributor out-of-state PAC (ID#:_ Enchanted Rock Holdings, LLC Employee PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77002				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Fernandez, Anita (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu	San Antonio, TX 78213 pation / Job title (See Instructions)	Employer (See Instructions	:, 		
	Consultant	pation / Job title (See Instituctions)	Self employed	·)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_Foley & Lardner LLP Texas Campaign Fund Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,500.00
		Dallas, TX 75201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ Friends of San Antonio Leaders For University of Contributor address; City; State; Zip Code San Antonio, TX 78201			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_Garcia, Kathleen (Ms.) Contributor address; City; State; Zip Code Georgetown, TX 78633			Amount of Contribution (\$)	\$500.00
	•	pation / Job title (See Instructions) nment Relations	Employer (See Instructions CPS Energy	5)		
			<u> </u>			

	MONETARY POLITICAL CONTRIBUTIONS SCHEDU		SCHEDUI	LE A1				
	The Instruc	ction Guide explains hov	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 6/20 Rpt: 10/74	
2	FILER NAME Menendez, J	lose (The Honorable)				3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 07/22/2024	5 Full name of contributor Garza, Meghan (Ms.)6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
0	Dringing aggu	San Antonio, TX 78210	<u></u>		Employer (See Instructions	,, 		
8	Owner -	pation / Job title (See Instructions	5)	9	Employer (See Instructions Rise Civic Consulting	·)		
	Date 08/28/2024	Full name of contributor Garza, Rudy (Mr.) Contributor address; City; S)		Amount of Contribution (\$)	\$250.00
	Principal occu	San Antonio, TX 78258 pation / Job title (See Instructions	3)		Employer (See Instructions	;) 		
	i illoipai oooa	panon / cob mae (coo mondono			Employer (GGC mondoners	,,		
	Date 12/14/2024	Full name of contributor Gonzalez Contributor address; City; S) O (Mr.)		Amount of Contribution (\$)	\$250.00
	Principal occu	San Antonio, TX 78216 pation / Job title (See Instructions	s)		Employer (See Instructions	 ;)		
	Managing Pa	artner			OCI Group			
	Date 12/12/2024	Full name of contributor Hamer, Jonathan (Mr.) Contributor address; City; S Austin, TX 78735)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Partner	pation / Job title (See Instructions	s)		Employer (See Instructions Hometown Hero	5)		
	Date 07/25/2024	Full name of contributor Heller, David (Mr.) Contributor address; City; S Boca Raton, FL 33432	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu President &	pation / Job title (See Instructions CEO	5)		Employer (See Instructions The NRP Group	5)		

	MONET	ARY POLITICAL CONTRIBI	UTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete	this forn	n.	1	Total pages Schedule A1: Sch: 7/20 Rpt: 11/74	
2	FILER NAME Menendez, 3	ose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/12/2024	 Full name of contributor out-of-state PA Hochheim Prairie PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Yoakum, TX 77995 pation / Job title (See Instructions)	l q	Employer (See Instructions			
•	r inicipal occu	oalion / Job title (See Instructions)		Employer (See instructions	,		
	Date 12/14/2024	Full name of contributor out-of-state PA Holland and Knight Texas PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75201					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAHull, Dan (Mr.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
		Boerne, TX 78006					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 07/18/2024	Full name of contributor out-of-state PA Huth, Thomas (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75240)		Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Palladium USA)		
	Date 12/12/2024	Full name of contributor out-of-state PA IBAT PAC Contributor address; City; State; Zip Code Austin, TX 78701	AC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/20 Rpt: 12/74	
2	FILER NAME Menendez,	Jose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	5 Full name of contributor out-of-state PAC (ID#:_ IEC of Texas PAC Fund 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$750.00
8	Principal occu	Austin, TX 78701 spation / Job title (See Instructions)	Employer (See Instructions			
_	- Timoipai occa	pation 7 oob title (occ mondetions)	2 Employer (See Mistractions			
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ INDEPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	<u></u>	Austin, TX 78750				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ John L. Covert, DDS Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		San Antonio, TX 78250				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#:_Kellum, Daniel (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78212			Amount of Contribution (\$)	\$1,000.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 07/22/2024	Full name of contributor out-of-state PAC (ID#:_Kilday, Les (Mr.) Contributor address; City; State; Zip Code Sugarland, TX 77479)		Amount of Contribution (\$)	\$500.00
	Principal occu Developer	pation / Job title (See Instructions)	Employer (See Instructions Kilday Realty)		

	MONET	ARY POLITICAL C	CONTRIBUTION	S		SCHEDUI	_E A1
	The Instru	ction Guide explains how	to complete this forr	m.	1	Total pages Schedule A1: Sch: 9/20 Rpt: 13/74	
2	FILER NAME Menendez, 3	Jose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 07/24/2024	5 Full name of contributor Latsha, Jean Marie (Ms.)6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
		Austin, TX 78731					
8	Principal occu Developer	pation / Job title (See Instructions	9	Employer (See Instructions Pedcor Investments	5)		
	Date 09/18/2024	Full name of contributor Lazzari, Anthony (Mr.) Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,000.00
	Principal occu	San Antonio, TX 78212 pation / Job title (See Instructions	s)	Employer (See Instructions AML Motors	<u> </u> 5)		
	Date 12/14/2024	Full name of contributor Linebarger Goggan Blair of Contributor address; City; St				Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78760 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
	Date 11/05/2024	Full name of contributor Marathon Petroleum Corp Contributor address; City; St Findlay, OH 45840		496307)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions	(5)	Employer (See Instructions	5)		
	Date 09/18/2024	Full name of contributor Montford, John (Mr.) Contributor address; City; St San Antonio, TX 78257	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions	s)	Employer (See Instructions JTM Consulting, LLC	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 10/20 Rpt: 14/74	
2	FILER NAME Menendez, J	ose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$1,000.00
8			9	Employer (See Instructions	<u> </u> 5)		
	Date 07/17/2024	Full name of contributor out-of-state PAC (ID#:_ Nantucket Housing Contributor address; City; State; Zip Code Houston, TX 77043		Petland)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 11/05/2024	Full name of contributor	PΑ	С		Amount of Contribution (\$)	\$750.00
	Principal occu	Indianapolis , IN 42665 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#:_ National Association of Social Workers Texas Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Texas State PAC Contributor address; City; State; Zip Code Dallas, TX 75202)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>L</u> 5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDU	LE A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/20 Rpt: 15/74	
2	FILER NAME Menendez, J	Jose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	5 Full name of contributor Pape-Dawson Engineers6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	San Antonio, TX 78213 pation / Job title (See Instructions	(2)	9 Employer (See Instructions	;) 		
_	- Timolpai ooda	patient, cos tiae (eee metracioni	·1	Campioyer (Geo mondone)	"		
	Date 08/27/2024	Full name of contributor Patel, Pratik (Mr.) Contributor address; City; S)		Amount of Contribution (\$)	\$1,000.00
	Dringing age	San Antonio, TX 78255		Employer (Coo Instructions	<u></u>		
	Self	pation / Job title (See Instructions	5)	Employer (See Instructions REM Hospitality	5)		
	Date 07/02/2024	Full name of contributor Polk, Douglas (Mr.) Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78738 pation / Job title (See Instructions	s)	Employer (See Instructions	·)		
	Business Ow		·)	Self	"		
	Date 07/22/2024	Full name of contributor Pollack, Joel (Mr.) Contributor address; City; S San Antonio, TX 78260			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Real Estate	pation / Job title (See Instructions Developer	5)	Employer (See Instructions PMCA Partners	5)		
	Date 07/19/2024	Full name of contributor Rackleff, Neal (Mr.) Contributor address; City; S Houston, TX 77003	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions	S)	Employer (See Instructions self	5)		
			•				

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 12/20 Rpt: 16/74	
2	FILER NAME Menendez, J	lose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 08/28/2024	Full name of contributor Rasti, Kelly (Ms.)Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
_	Duinning Langu	San Antonio, TX 78256	lo.	Franklavar (Caa kastrustiana			
8	Teacher	pation / Job title (See Instructions)	9	Employer (See Instructions Northside ISD)		
	Date 09/18/2024	Full name of contributor Riegel, Julie (Ms.) Contributor address; City; Sta				Amount of Contribution (\$)	\$100.00
	Principal occu	San Antonio, TX 78256 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	•	,			,		
	Date 09/27/2024	Full name of contributor Rodrguez, Rudy (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Dringing! aggs	San Antonio, TX 78229		Employer (See Instructions	_		
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions R4 Strategies	')		
	Date 12/12/2024	Full name of contributor Ryan LLC PAC Contributor address; City; Sta Dallas, TX 75240	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 07/24/2024	Full name of contributor Saar, Kathryn (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			,				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/20 Rpt: 17/74	
2	FILER NAME Menendez, 3	lose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
0	Dringing oggu	San Antonio, TX 78249	Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ San Antonio Police Officers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Dringing agg	San Antonio, TX 78217	Employer (Coo Instructions	_		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ San Antonio Professional Firefighters PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,624.00
		San Antonio, TX 78201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor X out-of-state PAC (ID#: C Sentry Insurance A Mutual Co PAC Contributor address; City; State; Zip Code Stevens Point , WI 54481	00545194)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/21/2024	Full name of contributor 🔯 out-of-state PAC (ID#: Cartering Tenaska Employees Texas PAC Contributor address; City; State; Zip Code Omaha, NE 68154	00479998		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>,</u>		
		l				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 14/20 Rpt: 18/74	
2	FILER NAME Menendez, 3	ose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 11/21/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
_	Deignaignal annu	Dallas, TX 75254	O Frankrija (Caa kastuustia ra	_		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#: Texas Association of Pawn Brokers PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Crawford, TX 76638				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Building Branch AGC PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/29/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Consumer Credit Coalition PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dairymen PAC Contributor address; City; State; Zip Code Austin, TX 78711)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		l				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 15/20 Rpt: 19/74	
2	FILER NAME Menendez, 3	ose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/12/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$5,000.00
_	Deinainal agai	Austin, TX 78703	2. Evanlavar (Can Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#: Texas Mortgage Bankers PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,000.00
	Deinsinal assu	Austin, TX 78746	Frankston (Cookstants)	_		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#: Texas Physical Therapy Assn. PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#: Texas Society of Architects Committee Contributor address; City; State; Zip Code Austin, TX 78702			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Society of Certified Public Accountants PA Contributor address; City; State; Zip Code Addison, TX 75001			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		I				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/20 Rpt: 20/74	
2	FILER NAME Menendez, 3	lose (The Honorable)		3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 12/14/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
0	Dringing oggu	Austin, TX 78701	Employer /See Instructions			
ð	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/14/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Spring, TX 77386 pation / Job title (See Instructions)	Employer (See Instructions)		
				,		
	Date 12/12/2024	Full name of contributor			Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ The Bexar County Justice PAC of SATLA Contributor address; City; State; Zip Code San Antonio, TX 78232)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/26/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ΟN	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 17/20 Rpt: 21/74	
2	FILER NAME Menendez, J	ose (The Honorable)			3	Filer ID (Ethics Commission 00042411	n Filers)
4	Date 08/28/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$1,000.00
_	Daine in a la casa	Boerne, TX 78015	10	Faralassa (Ossalastasstissa			
8	VP	pation / Job title (See Instructions)	9	Employer (See Instructions Ancira	5)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Torres, Kari (Ms.) Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$100.00
	Principal occu	Austin , TX 78704 pation / Job title (See Instructions)	Т	Employer (See Instructions	;) 		
	i illicipai occu	oduon 7 oob title (oee matidetions)		Employer (See instructions	"		
	Date 11/21/2024	Full name of contributor x out-of-state PAC (ID#:_ Toyota Motor North America, Inc PAC Contributor address; City; State; Zip Code	<u>C0(</u>			Amount of Contribution (\$)	\$2,000.00
	Deire sin al acces	Washington, DC 20004	_	Frankrije (Ozakastian			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ True Flavors LLC Contributor address; City; State; Zip Code San Antonio, TX 78204)	•	Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u> 5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Trueda, Jimmy (Mr.) Contributor address; City; State; Zip Code Helotes, TX 78023				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/20 Rpt: 22/74	
2	FILER NAME Menendez, 3	Jose (The Honorable)			3	Filer ID (Ethics Commission 00042411	on Filers)
4	Date 11/05/2024	5 Full name of contributorUnion Pacific Corporation6 Contributor address; City; St		vernment	7	Amount of Contribution (\$)	\$3,000.00
_		Washington, DC 20004					
8	Principal occu	pation / Job title (See Instructions	;) 	9 Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor Valero PAC Contributor address; City; Si	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	San Antonio, TX 78269 pation / Job title (See Instructions	s)	Employer (See Instructions	 ;)		
	Date 09/18/2024	Full name of contributor Vexler , Jack (Mr.) Contributor address; City; Si San Antonio, TX 78209				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions Monterrey Metal Recycl	′	Solutions	
	Date 09/18/2024	Full name of contributor Vexler, Mary (Ms.) Contributor address; City; Si San Antonio, TX 78212				Amount of Contribution (\$)	\$2,500.00
	Principal occu CEO	pation / Job title (See Instructions	5)	Employer (See Instructions Monterrey Metal Recycl		Solutions	
	Date 07/22/2024	Full name of contributor Walsh, Nicholas (Mr.) Contributor address; City; Si Dallas, TX 75204)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONEI	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this forn	n.	1	Total pages Schedule A1: Sch: 19/20 Rpt: 23/74	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		lose (The Honorable)	_			00042411	
4	Date 08/27/2024	5 Full name of contributorWeaver, Rad (Mr.)6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$2,500.00
		San Antonio, TX 78212					
8	Principal occu Investor	pation / Job title (See Instructions)		Employer (See Instructions) Self)		
	Date 10/26/2024	Full name of contributor Weekley, Richard (Mr.) Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77027					
	Frincipal occu Founder	pation / Job title (See Instructions)		Employer (See Instructions) Weekley Properties)		
	Date 12/12/2024	Full name of contributor Whipple, Maxwell (Mr.) Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78215					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions))		
	Date 07/22/2024	Full name of contributor Whipple, Maxwell (Mr.) Contributor address; City; State San Antonio, TX 78215	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions))		
	Date 08/27/2024	Full name of contributor Williams , Elsa (Ms.) Contributor address; City; State	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	San Antonio, TX 78229 pation / Job title (See Instructions)		Employer (See Instructions))		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1
Instruction (Guide explains how to con	nplete this form.	1 Total pages Schedule A1: Sch: 20/20 Rpt: 24/74
	he Honorable)		3 Filer ID (Ethics Commission Filers) 00042411
6/2024 ZA	COPAC		7 Amount of Contribution (\$) \$2,500.0
Sai	n Antonio, TX 78265		
ipal occupation /	Job title (See Instructions)	9 Employer (See Instr	uctions)
	e Instruction of R NAME pendez, Jose (To 16/2024 ZA	e Instruction Guide explains how to cor R NAME lendez, Jose (The Honorable) 5 Full name of contributor out-o	Instruction Guide explains how to complete this form. R NAME Inendez, Jose (The Honorable) 5 Full name of contributor

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 25/74 FILER NAME 3 Filer ID (Ethics Commission Filers) Menendez, Jose (The Honorable) 00042411 \$ 0.00 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 12/03/2024 Moak Casey \$268.21 In kind for food, drinks and 7 Contributor address; City; State; Zip Code space rental for fundraising event. Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

PLE	DGED CONTRIBUT	TONS			SCHEDULE B
T	he Instruction Guide expl	ains how to comple	ete this form.	1	. Total pages Schedule B: Sch: 1/1 Rpt: 26/74
2 FILER NA	AME ez, Jose (The Honorable)			3	Filer ID (Ethics Commission Filers) 00042411
<u></u>	OF UNITEMIZED PLEDG	ES			\$ 0.0
5 Date	6 Full name of pledgor 7 Pledgor Address;	out-of-state PAC (ID#:) 8	Amount of pledge (\$)
10 Dringing	occupation / Job title (See Instruc	4ione)	I44		Check if travel outside of Texas. Complete Schedul
10 Philicipal	occupation / Job title (See Instruc	tions)	11 Employer (See Inst	tructi	ions)

	LOANS					SCHEDULE E
	The Instructio	on Guide explains how to co	omplete this f	orm.		pages Schedule E: 1/1 Rpt: 27/74
2	FILER NAME Menendez, Jose	e (The Honorable)			3 Filer I 0004	D (Ethics Commission Filers) 2411
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 (\$)
6	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 Instructions)		13 Employer (See Ins	structions)	1
14	Description of Coll	ateral		15 Check if personal	funds were deposit	ted into political account (See Instructions)
16	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 Ins	structions)	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex Legal Services The Instruction Guid	Salaries		Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILED NAMI	=	•			2	Filor ID	(Ethics Commission Filers	`
1	Sch: 1/46 Rpt: 28/74	l	= Jose (The Honora	able)			3	Filer ID 00042411	(Ethics Commission Filers	,
4	Date	5 Payee name								
	07/02/2024		Mini storage							
6	Amount (\$) \$176.00	7 Payee addre		State; Zip C	Code					
	Ψ170.00	0004 11 111	crotate 10							
		San Antoni	o, TX 78201							
8	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees							plete Schedule T.	
	-					\Box		officeholder living		
						Monthly fee for	or c	ampaign st	orage unit	
_	Operation ONLY if allowed	0	:	0#:				O#: I-	-1.1	
9	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office so	ougnt			Office he	eia	
	Date	Payee name								
	09/04/2024	A-AAA Key	Mini storage							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code					
	\$176.00	6604 W Int	erstate 10							
			o, TX 78201							
	PURPOSE OF	1	ee Categories listed at the	top of this schedule)	(b)	Description				
	EXPENDITURE	Fees						de of Texas. Com officeholder living	plete Schedule T.	
						ш			aign storage unit	
						wonting rente	A1 1C	c for earript	aigh storage anne	
	Complete ONLY if direct expenditure to benefit C/Ol		iceholder name	Office so	l ought			Office he	eld	
	Date	Dayoo nama								
	10/02/2024	Payee name	Mini storage							
				Otata: 7in C	Nl -					
	Amount (\$)	Payee addre		State; Zip C	oae					
	\$176.00	6604 W Int	erstate 10							
		San Antoni	o, TX 78201							
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees							plete Schedule T.	
						ш		officeholder living		
						working renta	ai 16	e ioi campa	aign storage unit	
_	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	lught			Office he	ald	
	Complete ONLY if direct expenditure to benefit C/OI		icendidei Haille	Office SC	rugrit			Office III	aiu .	

SCHEDULE F1

Advertising Expense Accounting/Banking Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Comr	mittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Guid	xpense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	l								Filer ID	(Ethics Commission Filers)	
L	Sch: 2/46 Rpt: 29/74	<u> </u>	Menendez,	Jose (The Honor	able)					00042411		
4	Date	5 F	Payee name									
	11/04/2024	/	A-AAA Key	Mini storage								
6	Amount (\$)	7 F	Payee addres	ss; City;	State;	Zip Co	ode					
	\$176.00	6	6604 W Inte	rstate 10								
		9	San Antonic	, TX 78201								
8	PURPOSE	(a) (Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		-ees	-		ŕ		=		de of Texas. Comp		
	EXI ENDITORE							—		officeholder living		
								worming renta	u IE	e on campa	ign storage unit	
9	Complete ONLY if direct		andidate/Offic	ceholder name		iffice cou	laht			Office he	ald	
9	Complete ONLY if direct expenditure to benefit C/OI		ariuluale/OIII	Centruder Haffle		ffice sou	igiil			Onice ne	iu .	
	Date	F	Payee name									
L	12/02/2024	_ /	A-AAA Key	Mini storage								
	Amount (\$)	F	Payee addres	ss; City;	State;	Zip Co	ode					
	\$176.00	6	6604 W Inte	rstate 10								
		9	San Antonic	o, TX 78201								
	PURPOSE	(a) (Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	F	-ees					=		de of Texas. Comp		
								ш		officeholder living	expense lign storage unit	
								working relite	ı 16	e ioi campa	ign storage unit	
_	Complete ONLY if direct	<u>ر</u> د	andidate/Offic	ceholder name		ffice sou	l Iaht			Office he	Ald	_
	expenditure to benefit C/O		a raidate/Offic	Jonoldor Harrie	O	moc sou	.grit			Omice He		
-	Date	-	Davide neme									_
	07/23/2024	l	Payee name									
				City	Ctata	Zin Co	ndo.					
	Amount (\$) \$344.12	ı	Payee addres P.O. Box 10		Siale;	Zip Co	ue					
	Ф344.12	'	O. BUX 10	10414								
			Atlanta, GA	30348								
	PURPOSE	(a) (Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	F	-ees					ш		de of Texas. Comp		
								Phone and in		officeholder living	expense	
								. Hone and III	.011	iot dei vided		
_	Complete ONLY if direct	LC	andidate/Offic	ceholder name	<u> </u>	ffice sou	l laht			Office he	eld	_
	expenditure to benefit C/O				O		gt			230 110	-	
												_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide explain		OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commission	Filers)
	Sch: 3/46 Rpt: 30/74	Menendez,	Jose (The Honorable)					00042411		
4	Date	5 Payee name								
	08/03/2024	AT&T								
6	Amount (\$)	7 Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$176.00	P.O. Box 1	05414							
		Atlanta, GA	30348							
8	PURPOSE	(a) Category (S	iee Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	Fees						de of Texas. Com		
						_		officeholder living	e and internet	
						Oniceriolaei/	Jan	iipaigii piioii	e and internet	
9	Complete ONLY if direct		iceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/O									
	Date	Payee name								
	08/24/2024	AT&T								
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$302.27	P.O. Box 1	05414							
		Atlanta, GA	30348							
	PURPOSE OF	(a) Category (S	see Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE	Fees				=		de of Texas. Com officeholder living		
						ш			e and internet se	rvices
						Omocholacire	Jan	ilpaigil piloli	e and internet se	
	Complete ONLY if direct		iceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/O	1								
	Date	Payee name								
	09/20/2024	AT&T								
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$336.31	P.O. Box 1	05414							
		Atlanta, GA	30348							
	PURPOSE	(a) Category (S	see Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	Office Over	head/Rental Expense					de of Texas. Com		
						_		officeholder living		
						Onicendidel/(Jai	npaign devic	ce / equipment.	
H	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	aht			Office he	eld	
	expenditure to benefit C/O			2.1100 000	a			C.MOC TIC		

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	mmittee	Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Travel Out of Dis OTHER (enter a	strict category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME					1	3	Filer ID	(Ethics Commission Fil	ers)
	Sch: 4/46 Rpt: 31/74			Jose (The Hono	rable)					00042411		,
4	Date	5	Payee name									
	09/24/2024		AT&T									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de					
	\$293.12		P.O. Box 10									
			Atlanta, GA	30348								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Fees		- 10p or 11.10			Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE							—		officeholder living		
								Officeholder/c	can	npaign phor	ne and internet servi	ces
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office he	eld	
L		_										
	Date		Payee name									
	10/24/2024		AT&T									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$410.37		P.O. Box 10)5414								
			Atlanta, GA			· · · · · · · · ·						
	PURPOSE OF	(a)		ee Categories listed at th	e top of this sche	edule)	(b)	Description				
	EXPENDITURE		Fees					-		de of Texas. Com officeholder living	plete Schedule T.	
								—			g expense ne and internet servi	ces
								550110100170	ابد			
_	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice soug	aht			Office he	eld	
	expenditure to benefit C/OI						-					
H	Date		Payee name									
	12/03/2024		AT&T									
	Amount (\$)	\vdash	Payee addres	ss; City;	State:	Zip Cod	de					
	\$312.21		P.O. Box 10		Jaco,	~ ~ ~ ~ ~						
	Ψ012.21											
			Atlanta, GA	30348			_					
	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sche	edule)	(b)	Description	_			
	OF EXPENDITURE		Fees					ш		de of Texas. Com officeholder living	plete Schedule T.	
								ш		-	g expense ne and internet servi	റ്റെ
								JIIICCI IOIUCI/C	Juil	ipaigii piilii	io and internet servi	003
	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name	Of	ffice soug	tht			Office he	eld	
	expenditure to benefit C/OI				O.		٠.٠٠			Ooc 11		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

Candidate/Officenol Credit Card Payment	older/Political	The Instruction Guide explains how to co	-	te this form.	OTHER (enter a	category not listed above)
1 Total pages Sched	dule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 5/46 Rpt:		Menendez, Jose (The Honorable)			00042411	
4 Date	!	5 Payee name				
12/26/2024		AT&T				
6 Amount (\$)		7 Payee address; City; State; Zip Co	ode			
\$3	397.36	P.O. Box 105414				
		Atlanta, GA 30348				
8 PURPOSE	- 10	(a) Category (See Categories listed at the top of this schedule)	(b)	<u>De</u> scription		
OF EXPENDITURE		Fees		Check if travel outs		
				Check if Austin, TX		ne and internet services
				omocnoide//oa	inpaign phon	ie and internet services
9 Complete ONLY if	f direct	Candidate/Officeholder name Office sou	uaht		Office he	7ld
expenditure to ben			ugnt		Office file	aiu
Date		Payee name				
11/13/2024		Alamo Colleges Foundation				
Amount (\$)		Payee address; City; State; Zip Co	ode			
\$1,5	500.00	2222 N. Alamo Street				
		San Antonio, TX 78215				
PURPOSE	((a) Category (See Categories listed at the top of this schedule)	(b)	Description		
OF EXPENDITURE		Sponsorship		Check if travel outs		
				Check if Austin, TX Sponsorship for		
				Sporisorship to	a lable at G	LD Brunen
Complete ONLY if	f direct	Candidate/Officeholder name Office sou	l abt		Office he	ald.
Complete <u>ONLY</u> if expenditure to ben			ugnt		Office file	eiu
Date		Payee name				
10/16/2024		Amazon				
Amount (\$)		Payee address; City; State; Zip Co	ode			
\$2	253.40	410 Terry Ave N				
		Seattle, WA 98109				
PURPOSE	((a) Category (See Categories listed at the top of this schedule)	(b)	Description		
OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outs		
EXI ENDITORE				Check if Austin, TX		
			'	Artwork for the	district office	
			1			
Complete <u>ONLY</u> if expenditure to ben		Candidate/Officeholder name Office sou	ught		Office he	eld
experiantare to berr	10111 07 01 1					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials E Legal Services The Instruction Gu	•		ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed abo	ve)
1	Total pages Schedule F1:	2	EII ED NIAME		-		-	1	3	Filer ID	(Ethics Commission	n Filers)
	Sch: 6/46 Rpt: 33/74			Jose (The Hono	rable)					00042411	(_0000000000000000000000000000000000000	1 11013)
4	Date	5	Payee name									
	10/16/2024		Amazon									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de					
	\$47.33		410 Terry A	ve N								
			Seattle, WA	98109								
8	PURPOSE	(a)		ee Categories listed at th	o top of this sobor	dulo)	(b)	Description				
	OF	'		nead/Rental Exp		uule)	(- ,		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE							Check if Austin,	TX,	officeholder living	g expense	
								Artwork for th	e D	District office	:	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name	-				<u> </u>				
	10/19/2024		Amazon									
	Amount (\$)	T	Payee addres	ss; City;	State;	Zip Cod	de					
	\$450.31		410 Terry A	ve N								
			-									
			Seattle, WA	98109								
	PURPOSE OF	(a)		ee Categories listed at th		dule)	(b)	Description				
	EXPENDITURE		Office Overl	nead/Rental Exp	ense			=		officeholder living	plete Schedule T.	
								TV for district			, expense	
\vdash	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
H	Date		Payee name									
	12/13/2024		Bedoy's Bal	kery								
	Amount (\$)	\vdash	Payee addres		State:	Zip Cod	de					
	\$248.40		2714 Hillcre		Ciaic,	p 000						
	ΨΔ-τΟΤΟ											
			San Antonio	o, TX 78201								
	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Food/Bever	age Expense							plete Schedule T.	
	-							Cookies for d		officeholder living		
								COURIES IOI U	เวแ	ioi i ioliuay i	urty	
	Complete ONLY if direct	Щ	Candidate/Offic	ceholder name	∩f	ffice soug	thr			Office he	eld	
	expenditure to benefit C/OI		Janaidate/OIII	Conduct Hallic	Oi	moo soul	J111			Omce III	oid.	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Gift/Awards/Memor Legal Services	Guide explains		Wages	/Contract Labor		Travel Out of D OTHER (enter	istrict a category not listed abo	ove)
_	Total mariae Cabadula F1.	1_	EII ED NIAME	- Inc motraction	- Cuide explains	11000 to co	, mpic		1_	Files ID	/Ethica Commissi	on Filoro)
1	Total pages Schedule F1:] /T					3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 7/46 Rpt: 34/74		Menenaez,	Jose (The Ho	norable)					00042411		
4	Date	5	Payee name									
	08/26/2024		Bexar Coun	ty Democration	c Party							
6	Amount (\$)	7	Payee addres	s; City;	State	e; Zip Co	ode					
	\$250.00		•	icksburg Rd.		, ,						
	4200.00		201111000	ionoburg rtu.								
			San Antonic	, TX 78201								
8	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this scl	hedule)	(b)	Description				
	OF EXPENDITURE		Contribution	s/Donations	Made By			Check if travel	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITORE		Candidate/C	officeholder/P	olitical Comn	nittee		—	ı, TX,	officeholder livin	g expense	
								donation				
9	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	ight			Office h	eld	
	expenditure to benefit C/OF	Н										
	Date	Т	Dayso name									
	09/09/2024		Payee name	h. Domooroti	Dorty							
		_		ty Democration								
	Amount (\$)		Payee addres	s; City;	State	e; Zip Co	ode					
	\$5,000.00		1844 Frede	icksburg Rd.								
			San Antonio	, TX 78201								
	PURPOSE	(2)					(h)	Description				
	OF	^(a)			at the top of this scl	hedule)	(D)	Description Check if travel	outei	de of Teyes Cor	nplete Schedule T.	
	EXPENDITURE			s/Donations	маае ву olitical Comn	nittaa		=		officeholder livin		
			Carididate/C	/inceriolaei/i	ontical comm	intee		Donation			3 - 1	
	Complete ONLY if direct	<u> </u>	Candidato/Offic	eholder name		Office sou	ıaht			Office h	old	
	expenditure to benefit C/O		zanuluale/Oni	enoluei name	· ·	Office Suc	agrit			Office fi	eiu	
	Date		Payee name									
	09/26/2024		Bexar Coun	ty Family Jus	tice Center							
	Amount (\$)		Payee addres	s; City;	State	e; Zip Co	ode					
	\$1,000.00		126 East Nu	eva Street								
	, ,											
			C A	T)/ 70004								
			San Antonio	, IX 78204								
	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this scl	hedule)	(b)	Description				
	OF EXPENDITURE		Food/Bevera	age Expense							nplete Schedule T.	
										officeholder livin		
								Lunch spons	or t	or cnarity g	olf tournament	
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	ıght	<u> </u>		Office h	eld	
	expenditure to benefit C/OI	Н										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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
OTHER (enter a category not listed above)

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/46 Rpt: 35/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	09/23/2024	Biden Victory Fund
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,300.00	430 South Capitol Street SE
		Washington, DC 20003
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation to campaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	08/26/2024	Blanco BBQ
_	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	13259 Blanco Road
	Ψ500.00	10200 Bidirico Nodd
		San Antonio, TX 78216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	!	Check if Austin, TX, officeholder living expense Food for constituents
	!	1 ood for constituents
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
-	Date	Payee name
	12/14/2024	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,165.00	1400 Congress Avenue
	!	
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Ornaments for constituents
	!	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/46 Rpt: 36/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	08/29/2024	Care Warriors Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	18411 Cross Praire
		San Antonio, TX 78258
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Sponsorship Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Sponsoring a hole for charity gold scramble
		Sponsoning a note for chartry gold scrainble
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	12/13/2024	Catering by Celebrations
_	Amount (\$)	Payee address; City; State; Zip Code
	\$2,955.35	3307 Hillcrest Drive
	Ψ2,000.00	Soot Filliorest Brive
		San Antonio , TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Catering for district Holiday Party
		Catering for district Holiday Party
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Power name
	12/16/2024	Payee name Costco
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$699.91	5611 UTSA Boulevard
		Car. Antonia TV 70040
		San Antonio, TX 78249
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gifts for staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Solicitation/Fundraising Expense

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
		_		<u>·</u>	is now to c	ompi	ete tilis lollii.			
1	Total pages Schedule F1: Sch: 10/46 Rpt: 37/74	2		E Jose (The Honorable)				3	Filer ID 00042411	(Ethics Commission Filers)
4	Date	5	Payee name	1						
	07/08/2024		Costco	•						
6	Amount (\$)	7	Payee addre	ess; City; Sta	te; Zip C	ode				
	\$55.62			A Boulevard o, TX 78249						
 8	PURPOSE	(2)				(h)	Description			
	OF EXPENDITURE	(a)		see Categories listed at the top of this s tion Equipment And Relat				n, TX	, officeholder livi	
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	iceholder name	Office so	ught			Office I	neld
	Date		Payee name							
	07/03/2024		Costco							
	Amount (\$)	\vdash	Payee addre	ess; City; Sta	te; Zip C	ode				
	\$56.71		•	A Boulevard	, ,					
			San Antoni	o, TX 78249						
	PURPOSE OF	(a)		See Categories listed at the top of this s	schedule)	(b)	Description			
	EXPENDITURE		Travel In Di	istrict			=		ide of Texas. Co , officeholder livi	mplete Schedule T.
							Gas for office			
							Cao for omoc	5110	naoi, oampe	agri vernere
	Complete ONLY if direct expenditure to benefit C/Oł		Candidate/Offi	iceholder name	Office so	l ught			Office I	neld
	Date		Payee name	<u> </u>						
	07/19/2024		Costco							
		\vdash		ace: City: Sto	to: Zin C	odo				
	Amount (\$) \$53.01		Payee addre		te; Zip C	oue				
	Φ33.01		5611 UTSA	A DUUIEVAI U						
			San Antonio	o, TX 78249						
	PURPOSE	(a)	Category (S	See Categories listed at the top of this s	schedule)	(b)	Description			
	OF EXPENDITURE		Travel In Di	istrict						mplete Schedule T.
									, officeholder livi	
							Gas for office	2 110	iuer/campa	ugn venicie
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	Office so	<u>l</u> ught			Office I	neld
or	ms provided by Texas E	thic	cs Commissi	ion www.ethics	s.state.tx.	us				Version V4.1.0.f10d0f

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

1 Total pages Schedule F1: Sch: 11/46 Rpt: 38/74 2 FILER NAME Menendez, Jose (The Honorable) 3 Filer ID (Ethics Commission of Control of	ssion Filers)
4 Date	
07/30/2024 Costco 6 Amount (\$) 7 Payee address; City; State; Zip Code	
07/30/2024 Costco 6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$35.64 5611 UTSA Boulevard	
San Antonio, TX 78249	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Gas for officeholder/campaign vehicle	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
08/02/2024 Costco	
Amount (\$) Payee address; City; State; Zip Code	
\$32.31 5611 UTSA Boulevard	
San Antonio, TX 78249	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Gas for officeholder/campaign vehicle	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
09/06/2024 Costco	
Amount (\$) Payee address; City; State; Zip Code	
\$54.90 5611 UTSA Boulevard	
San Antonio, TX 78249	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Gas for officeholder/campaign vehicle	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/46 Rpt: 39/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	09/09/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.51	5611 UTSA Boulevard
		San Antonio, TX 78249
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gas for officeholder/campaign vehicle
		First Control of the
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/05/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.06	5611 UTSA Boulevard
		San Antonio, TX 78249
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gas for officeholder/campaign vehicle
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/10/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.31	5611 UTSA Boulevard
		San Antonio, TX 78249
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gas for officeholder/campaign vehicle
		Gas for officertolider/campaign vehicle
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

1g Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 13/46 Rpt: 40/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/18/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.05	5611 UTSA Boulevard
		San Antonio, TX 78249
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gas for officeholder/campaign vehicle
		Sus for officeriolacite annual vertical
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/19/2024	Costco
H	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	5611 UTSA Boulevard
		San Antonio, TX 78249
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gas for officeholder/campaign vehicle.
		Sus for officeriolaciteampaign verticie.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/24/2024	Costco
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$46.83	5611 UTSA Boulevard
		San Antonio, TX 78249
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Gas for officeholder/campaign vehicle.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services			es/Contract Labor		OTHER (enter a	a category not listed ab	ove)
				The Instruction Guid	de explains how to c	ompl	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 14/46 Rpt: 41/74		Menendez,	Jose (The Honor	able)				00042411		
4	Date	5	Payee name								
	10/28/2024		Costco								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip C	ode					
	\$35.10		5611 UTSA	Boulevard							
			San Antonio	o, TX 78249							
8	PURPOSE	(a)	Category (St	ee Categories listed at the	ton of this schedule)	(b)	Description				
	OF	` `	Travel In Di		top of this seriedate)	``	_ `	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE						ш		officeholder livin		
							Gas for office	ehol	lder/campai	gn vehicle.	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	Office so	ught			Office h	eld	
	experialitare to beliefit 6/01										
	Date		Payee name								
	10/31/2024		Costco								
	Amount (\$)		Payee addres	ss; City;	State; Zip C	ode					
	\$48.15		5611 UTSA	Boulevard							
			San Antonio	o, TX 78249							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis				<u> </u>			nplete Schedule T.	
							ш		officeholder livin		
							Gas for office	PHO	ider/campai	gn venicie.	
	Complete ONLY if direct	<u> </u>	Condidate/Offi	achaldar nama	Office	uabt			Office h	ald	
	Complete ONLY if direct expenditure to benefit C/O		Januluale/Olli	ceholder name	Office so	ugnı			Office fi	eia	
_		_									
	Date		Payee name								
	11/12/2024		Costco								
	Amount (\$)		Payee addres		State; Zip C	ode					
	\$37.67		5611 UTSA	Boulevard							
			San Antonio	o, TX 78249							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE		Travel In Di	strict						nplete Schedule T.	
							Gas for office		officeholder livin		
							Jas for Office	, i iUl	ισειτυαιτιμαι	gii veillele.	
\vdash	Complete ONLY if direct	Ц,		ceholder name	Office so	uabt			Office h	eld	
	expenditure to benefit C/O		Januluale/OIII	condider Hairie	Office S0	ugrit			Office II	ciu	
_											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/46 Rpt: 42/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	11/14/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$46.09	5611 UTSA Boulevard
		San Antonio, TX 78249
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gas for officeholder/campaign vehicle.
		Cae for emocrotacineary campaign verificies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
_	Data	B
	Date	Payee name Coston
	11/18/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.90	5611 UTSA Boulevard
		San Antonio, TX 78249
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gas for officeholder/campaign vehicle.
		Gas for officeriolider/campaign vehicle.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/25/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.51	5611 UTSA Boulevard
		San Antonio, TX 78249
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Gas for officeholder/campaign vehicle.
	2 2	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 16/46 Rpt: 43/74	Menendez, Jose (The Honorable)	00042411
4	Date	5 Payee name	•
	12/03/2024	Costco	
6	Amount (\$) \$34.11	7 Payee address; City; State; Zip Code 5611 UTSA Boulevard	
		San Antonio, TX 78249	
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for officeholder/campaign vehicle.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/14/2024	Costco	
	Amount (\$) \$47.43	Payee address; City; State; Zip Code 5611 UTSA Boulevard	
	DUDDOOF	San Antonio, TX 78249	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for officeholder/campaign vehicle.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/10/2024	Cruz, Pearl (Ms.)	
	Amount (\$) \$209.43	Payee address; City; State; Zip Code 2416 Village Walk	
		Austin, TX 78744	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement for office supplies, parking and lunch for staff.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	arc)
_	Sch: 17/46 Rpt: 44/74	Menendez, Jose (The Honorable) Strict ID (Ethics Commission File) 00042411	115)
4	Date	5 Payee name	
	12/17/2024	Cruz, Pearl (Ms.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$892.41	2416 Village Walk	
		Austin, TX 78744	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	LXI LINDITORL	Check if Austin, TX, officeholder living expense	
		Campaign services	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	experiantive to benefit crof		
	Date	Payee name	
	09/04/2024	Empower House	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	200 Donaldson Avenue	
		San Antonio, TX 78201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Sponsorship Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Sponsorship of a table at the Butterfly Brunch	
		Sponsorship of a table at the Butterny Brunon	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
H	Date	Payee name	
	09/26/2024	Estrada, Eric (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	118 Oklahoma	
		San Antonio, TX 78237	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation for Los Jardines Neighbors Together e	vent
		Bondaon for 200 darantes recignibula rogether c	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/46 Rpt: 45/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	08/12/2024	Event Gives
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$319.74	11 Ewall
		Mount Pleasant, SC 29464
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
_	Date	Payee name
	10/03/2024	Fairmont Hotel Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$629.72	101 Red River Street
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Hotel expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Hotel expense to attend committee hearing in Austin
		Hotel expense to attend committee hearing in Austri
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	o
	Date	Payee name
	10/28/2024	Flag World Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$175.00	1270 S. Alilene
		Aurora, CO 80012
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Flags for constituents
_	Commission ONE VIII II	Constitute (Office helder name
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/46 Rpt: 46/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/29/2024	Garcia Event Center
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$650.00	1400 Callaghan Road
		San Antonio, TX 78228
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Deposit for rental of space for District Holiday Party
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/10/2024	Garcia Event Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1400 Callaghan Road
		San Antonio, TX 78228
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Balance due on rental space
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/26/2024	Gonzales, Sergio (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$165.08	6326 Spring Time
		San Antonio, TX 78249
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for food at Neighborhood Leaders
		Breakfast
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 20/46 Rpt: 47/74	Menendez, Jose (The Honorable) 3 Filer ID (Eurics Commission Filers) 00042411	
4 Date	5 Payee name	
10/10/2024	Gonzales, Sergio (Mr.)	
6 Amount (\$) \$190.77	7 Payee address; City; State; Zip Code 6326 Spring Time San Antonio, TX 78249	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Food/Beverage Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense Reimbursement for food at district 26 Community Gathering	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/08/2024	Green Vegetarian Cuisine	
Amount (\$)	Payee address; City; State; Zip Code	
\$132.48	255 East Basse	
	San Antonio, TX 78209	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Food/Beverage Expense	
	Check if Austin, TX, officeholder living expense	
	Officeholder lunch meeting with constituents	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
12/19/2024	Green Vegetarian Cuisine	
Amount (\$)	Payee address; City; State; Zip Code	
\$166.33	255 East Basse	
,		
	San Antonio, TX 78209	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	
_/	Check if Austin, TX, officeholder living expense	
	Officeholder lunch with constituents	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	H	
	H	
. , ,	H	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/46 Rpt: 48/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	07/29/2024	Gunn Infiniti
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$1,199.89	12150 IH-10 West
		San Antonio, TX 78230
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense
		Expense Check if Austin, TX, officeholder living expense Lease on officeholder/campaign vehicle
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	08/27/2024	Gunn Infiniti
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,199.89	12150 IH-10 West
		San Antonio, TX 78230
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Lease on officeholder/campaign vehicle
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	09/27/2024	Gunn Infiniti
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,199.89	12150 IH-10 West
		San Antonio, TX 78230
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Lease on officeholder/campaign vehicle
		Lease on onicendidentalinpaign vehicle
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Officebolder/Do Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
Ļ		<u> </u>	_
1	Total pages Schedule F1:		
	Sch: 22/46 Rpt: 49/74	Menendez, Jose (The Honorable) 00042411	
4	Date	5 Payee name	
	10/29/2024	Gunn Infiniti	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,199.89	12150 IH-10 West	
		San Antonio, TX 78230	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense	
		Lease on officeholder/campaign vehicle	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	п	
	Date	Payee name	
	11/27/2024	Gunn Infiniti	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,199.89	12150 IH-10 West	
		San Antonio, TX 78230	
	PURPOSE	i I	_
	OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense	
		Lease on officeholder/campaign vehicle	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	H	
	Date	Payee name	=
	12/28/2024	Gunn Infiniti	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$1,199.89	12150 IH-10 West	
	+ 2,200.00		
		San Antonio, TX 78230	
		1	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Transportation Equipment And Related The Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Lease on officeholder/campaign vehicle.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 23/46 Rpt: 50/74 Menendez, Jose (The Honorable) 00042411 4 Date Payee name 12/18/2024 Harold's Art & Framing 6 Amount (\$) Payee address; State; Zip Code \$883.71 2743 Roosevelt Ave. San Antonio, TX 78214 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Framing fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/25/2024 Hispanas Unidas Amount (\$) Payee address; City; State; Zip Code \$1,000.00 P.O. Box 15478 San Antonio, TX 78212 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Recognition at 40th Anniversary Reunion and Conference Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/05/2024 Kamala Harris for President Amount (\$) Payee address: City: State; Zip Code \$250.00 P.O. Box 86 Baltimore, MD 21203 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation to campaign Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica		nmittee	Legal Services			se s/Contract Labor		OTHER (enter a	category not listed abo	ove)
Credit Card Payment				The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 24/46 Rpt: 51/74		Menendez,	Jose (The Hono	rable)				00042411		
4	Date	5	Payee name					·			
	09/19/2024			ranza Campaign							
6	Amount (\$)	7	Payee addres		State; Zip C	ode					
Ĭ	\$5,000.00	ľ	P.O. Box 83	-	Otato, Zip O	ouc					
	40,000.00										
			Can Antonio	TV 70202							
		ļ.,	San Antonio			1					
8	PURPOSE OF	(a)		ee Categories listed at the		(b)	Description		d4.T O	alaka Cabadala T	
	EXPENDITURE			ıs/Donations Mad Officeholder/Polit					de of Texas. Com officeholder living		
			Carialdate/C	Jinceriolaei/i olit	icai committee		Donation to c				
									. •		
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OI	Н				J					
=	Date	Π	Payee name								
	07/20/2024		Lands End								
	Amount (\$)	⊢	Payee addres	ss; City;	State: Zip C	ode					
	\$393.88		1 Lands' En		State, Zip C	ouc					
	Ψ555.00		I Lanus Lin	a Lanc							
			Dadaayilla	M/I F2F0F							
		ļ.,	Dodgeville,			T					
	PURPOSE OF	(a)		ee Categories listed at the		(b)	Description Check if traval	outoi	de of Texas. Com	nloto Cobodulo T	
	EXPENDITURE		Office Overi	nead/Rental Exp	ense				officeholder living		
							Office shirts f	or:	staff		
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	12/13/2024		Little Bug Fa	ace Painting Co.,	,LLC						
	Amount (\$)		Payee addres		State; Zip C	ode					
	\$200.00		•	,							
			San Antonio	o. TX 78244							
	PURPOSE	(a)				(h)	Description				
	OF	(")	Event Expe	ee Categories listed at the	e top of this schedule)	(2)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Zvorit Zxpo	100			Check if Austin	, TX	officeholder living	expense	
							Face Painting	g fo	r Holiday Pa	arty	
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office so	ught	<u> </u>		Office he	eld	
	expenditure to benefit C/OI	H									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 25/46 Rpt: 52/74	2 FILER NAME Menendez, Jose (The Honorable) 3 Filer ID (Ethics Commission Filers) 00042411
	Date 52/14	5 Payee name
•	08/28/2024	Lopez , Kevin (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$904.95	835 Woodlawn Avenue San Antonio , TX 78212
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/06/2024	Lopez , Kevin (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$542.97	835 Woodlawn Avenue San Antonio , TX 78212
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/19/2024	Madonna Center, Inc
	Amount (\$) \$1,850.00	Payee address; City; State; Zip Code 1906 Castroville Road
		San Antonio, TX 78237
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Sponsorship (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship for Madonna Center gala.
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Credit Card Payment The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File					
	Sch: 26/46 Rpt: 53/74	Menendez, Jose (The Honorable)	00042411				
4	Date	5 Payee name		<u>'</u>			
	07/27/2024	Mailchimp					
6	Amount (\$)	7 Payee address; City; State; Zip Code	;				
	\$98.07	512 Mean Street					
		Alanta, GA 30318					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule))	Description			
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE			Check if Austin, TX, officeholder living expense			
				Email service fee			
_							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	t	Office held			
	Date	Payee name					
	08/27/2024	Mailchimp					
	Amount (\$)	Payee address; City; State; Zip Code	;				
	\$98.07	512 Mean Street					
		Alanta, GA 30318					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b))	Description			
	OF EXPENDITURE	Fees	ļ	Check if travel outside of Texas. Complete Schedule T.			
	EX. ENDITORE		Į	Check if Austin, TX, officeholder living expense			
				Email service fee			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	+	Office held			
	expenditure to benefit C/OI		ι	Office field			
	Date						
	Date	Payee name					
	10/28/2024	Mailchimp					
	Amount (\$)	Payee address; City; State; Zip Code)				
	\$98.07	512 Mean Street					
		Alanta, GA 30318					
	PURPOSE OF	, , ,)	Description			
	EXPENDITURE	Fees	ļ	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
			ı	Email service fee			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	t	Office held			
	expenditure to benefit C/OI	•	-				

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 27/46 Rpt: 54/74	Menendez, Jose (The Honorable)	00042411
4	Date	5 Payee name	•
	11/27/2024	Mailchimp	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$98.07	512 Mean Street	
		Alanta, GA 30318	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE		Check if Austin, TX, officeholder living expense
			Email service fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Office field
	Data		
	Date	Payee name	
	12/27/2024	Mailchimp	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$98.07	512 Mean Street	
		Alanta, GA 30318	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Email service fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	09/27/2024	Mailchimp	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$98.07	512 Mean Street	
		Alanta, GA 30318	
	PURPOSE		Description
	OF	(a) Category (See Categories listed at the top of this schedule) Fees	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Email service fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit 6/01	•	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Credit Card Payment The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·						
_	Sch: 28/46 Rpt: 55/74	Menendez, Jose (The Honorable) 00042411						
4	Date	5 Payee name						
	12/13/2024	Martinez, Veronica (Ms.)						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$300.00	210 Audrey Lane Drive						
		San Antonio, TX 78216						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Event Expense						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		DJ services for district Holiday Party						
_								
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	09/03/2024	Mexican American Legal Defense and Educational Fund						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,000.00	110 Broadway						
		Suite 300						
		San Antonio, TX 78205						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.						
	LAI LINDITORE	Check if Austin, TX, officeholder living expense						
		Ad in gala booklet						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	y						
	D :							
	Date	Payee name						
	12/17/2024	Mi Familia at the Rim						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$450.62	18403 W I-10 West						
		San Antonio, TX 78257						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Holiday staff lunch						
		Holiday stall fuller						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a extension pot listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		_
	Sch: 29/46 Rpt: 56/74	Menendez, Jose (The Honorable) 00042411	
4	Date	5 Payee name	
	12/18/2024	Mi Tierra	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$843.75	218 Produce Row	
		San Antonio, TX 78207	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Pan Dulce gift for Senators	
		The state of the s	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	4
3	expenditure to benefit C/O	and the second of the second o	
_	Data		=
	Date	Payee name Mi Tiorro	
	10/21/2024	Mi Tierra	┙
	Amount (\$)	Payee address; City; State; Zip Code	
	\$22.91	218 Produce Row	
		San Antonio, TX 78207	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	-	Check if Austin, TX, officeholder living expense Officeholder breakfast meeting to discuss state	
		business	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	o	
			_
	Date	Payee name	
	10/08/2024	Office Furniture Liquidations	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,638.90	6838 Bandera Raod	
		San Antonio, TX 78238	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Office furniture for district office	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	experiulture 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 Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
4 Tatal canas Calcadala E4	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 30/46 Rpt: 57/74	2 FILER NAME Menendez, Jose (The Honorable) 3 Filer ID (Ethics Commission Filers) 00042411
4 Date	5 Payee name
09/11/2024	Olmos Park Terrace Neighborhood Assoc.
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 233 Wildwood San Antonio, TX 78212
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation for Neighbors Together event
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/02/2024	Ord, Julie (Ms.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,300.00	5650 Worth Parkway
	Apt 1425
	San Antonio, TX 78257
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Social Media Services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OF	
Date	Payee name
08/28/2024	Ord, Julie (Ms.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,300.00	5650 Worth Parkway
	Apt 1425
	San Antonio, TX 78257
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Social Media Services -September
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OF	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District 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: 31/46 Rpt: 58/74	Menendez, Jose (The Honorable)	00042411			
4	Date	5 Payee name	•			
	10/03/2024	Ord, Julie (Ms.)				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$2,300.00	5650 Worth Parkway				
	• •	Apt 1425				
		San Antonio, TX 78257				
_						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.			
	EXPENDITURE	Galaries/ Vages/ Goritiaet Eaber	n, TX, officeholder living expense			
			services - Oct			
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/07/2024	Ord, Julie (Ms.)				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$2,300.00 5650 Worth Parkway					
	+- ,	Apt 1425				
		•				
	5115565	San Antonio, TX 78257				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.			
	EXPENDITURE	Salaries/Wages/Contract Eabor	n, TX, officeholder living expense			
		Social Media				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O					
	Date	Payee name				
	12/05/2024	Ord, Julie (Ms.)				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$3,700.00	5650 Worth Parkway				
	Ψ3,700.00	•				
		Apt 1425				
		San Antonio, TX 78257				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Salaries/ Wages/Contract Eabor	outside of Texas. Complete Schedule T. n, TX, officeholder living expense			
		Social media				
		Social medic	. 55. 1.550			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O		Office field			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee I	Legal Sen		·		Wages	ete this form.		Travel Out of Di OTHER (enter a		listed above)
1	Total pages Schedule F1:	2 [FII FR NAME							3	Filer ID	(Ethics Co	ommission Filers)
_	Sch: 32/46 Rpt: 59/74	l	Menendez,	Jose (1	The Hond	rable)				_	00042411	(Ettiles et	5111111331011 1 lic13)
4	Date	5 F	Payee name										
	10/22/2024	ı	Peterson, Ju	ıdy									
6	Amount (\$) \$240.30	-	Payee addres 1830 W Sun San Antonio	nmit Av			ate; Zip Co	ode					
8	PURPOSE	(a) (Category (Se	e Categor	ies listed at th	ne top of this	schedule)	(b)	Description				
	OF		Food/Bevera						Check if travel	outsi	ide of Texas. Con	nplete Schedu	le T.
	EXPENDITURE			-	•				—	ent	officeholder livin		t's Community
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholde	r name		Office sou	ıght			Office h	eld	
	Date	F	Payee name										
	12/18/2024	ı	Peterson, Ju	ıdy									
	Amount (\$)	F	Payee addres	s; (City;	Sta	ate; Zip Co	ode					
	\$752.70] :	1830 W Sun	nmit Av	/e								
	DUDDOCE	_	San Antonio					l (h)					
	PURPOSE OF		Category (Se				schedule)	(a)	Description	outci	ido of Toyas Con	anloto Schodu	lo T
	EXPENDITURE		Salaries/Wa	ges/Co	ontract La	abor			=		ide of Texas. Con , officeholder livin		ie i.
									Campaign se			g expense	
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholde	r name		Office sou	ıght			Office h	eld	
	Date	F	Payee name										
	12/13/2024	1	Photo Buste	rs									
	Amount (\$)	F	Payee addres	s; (City;	Sta	ate; Zip Co	ode					
	\$450.00	6	6855 De Pal	lma									
		,	San Antonio	, TX 78	3239								
	PURPOSE OF		Category (See		ies listed at th	ne top of this	schedule)	(b)	Description				
	EXPENDITURE	[Event Exper	ise							ide of Texas. Con , officeholder livin		le T.
									Photographe				liday Barty
									rnolograpne	1 56	ELVICES IUI L	ภอแเน 🗆0	iiuay raity
	Complete ONLY if direct		andidate/Offic	eholde	r name		Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	H											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense Event Expense Loan Repayment/Reimbu

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total marca Cabadula F1.	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 33/46 Rpt: 60/74	2 FILER NAME Menendez, Jose (The Honorable) 3 Filer ID (Ethics Commission Filers) 00042411
4	Date	5 Payee name
	09/04/2024	RJ Publications LLC
6	Amount (\$) \$2,400.00	7 Payee address; City; State; Zip Code P.O. Box 272 Helotes, TX 78023
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense High school football ads
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/04/2024	RJ Publications LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,300.00	P.O. Box 272
		Helotes, TX 78023
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense High school basketball ads
		Thigh school basketball das
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/11/2024	Respite Care
	Amount (\$)	Payee address; City; State; Zip Code
	\$193.24	605 Belknap Place
		San Antonio, TX 78212
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment		The Instruction Guide explains how to con	nple	te this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 34/46 Rpt: 61/74		Menendez, Jose (The Honorable)		00042411
4	Date	5	Payee name		
	08/03/2024		Rosarios Mexican Restaurant		
6	Amount (\$)	7	Payee address; City; State; Zip Coo	de	
	\$128.00		722 South St. Mary's Street		
			San Antonio, TX 78205		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	-				Check if Austin, TX, officeholder living expense Officeholder lunch meeting with constituents.
					Cincendide fatien meeting with constituents.
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office soug	thr	Office held
ľ	expenditure to benefit C/O		zandidato, e moonola en name	J. 1.C	Cindo ficia
_	Date	Т	Payee name		
	09/12/2024		Sammy's Embroidery		
_	Amount (\$)	┝	Payee address; City; State; Zip Coc	do	
	\$200.14		6900 San Pedro Avenue	ue	
	Ψ200.14		0900 San Fedio Avende		
			Can Antonia TV 70216		
		Ļ	San Antonio, TX 78216		
	PURPOSE OF	(a) 	,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
					Embroidery for office shirts
	Complete ONLY if direct		Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O	Н			
	Date		Payee name		
	07/25/2024		San Antonio AFL-CIO		
	Amount (\$)		Payee address; City; State; Zip Coo	de	
	\$1,950.00		9502 Computer Drive		
			Suite 201		
			San Antonio, TX 78229		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE				Check if Austin, TX, officeholder living expense
					Ad and sponsorship for Special Lunch event honoring Linda Chavez Thompson
	Operation ONLY if discort	Ļ			
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office soug	ynt	Office held
	·				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mac Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials Legal Services The Instruction Gu	·		/ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above	e)
1	Total pages Schedule F1:	2	EII ED NIAME						3	Filer ID	(Ethics Commission	Filers)
_	Sch: 35/46 Rpt: 62/74	_		Jose (The Hono	rable)				٦	00042411	(Eurica Commission	T licis)
4	Date	5	Payee name									
	09/04/2024			Branch NAACF	•							
6	Amount (\$)	7	Payee addres	•	State;	Zip Co	de					
	\$1,500.00		P.O. Box 20	00225								
			San Antonio	o, TX 78220								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Sponsorship	0				=			plete Schedule T.	
								_		officeholder living		n Fund
								Dinner	OI à	a lable and a	ad at the Freedor	II Fulla
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	0	office sou	ght			Office h	eld	
	experience to benefit of or	'										
	Date		Payee name									
	11/13/2024		San Antonio	Police Departm	nent Associa	ation						
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$500.00		7000 Culeb	ra Road								
			San Antonio	, TX 78238								
	PURPOSE OF	(a)		ee Categories listed at th		edule)	(b)	Description				
	EXPENDITURE			ıs/Donations Ma Officeholder/Polit		ittoo		=		de of Texas. Com officeholder living	plete Schedule T.	
			Candidate/C	Jilicenolaei/Polii	licai Commi	illee		—			nksgiving meal	
									00.10		ggea.	
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	0	office sou	aht			Office he	eld.	
	expenditure to benefit C/OI		Sarraracto, Om				9				Sid .	
	Date		Payee name									
	09/26/2024		San Antonio	Youth								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$100.00		P. O. Box 7	844								
			San Antonio	o, TX 78207								
	PURPOSE OF	(a)		ee Categories listed at th	e top of this sche	edule)	(b)	Description				
	EXPENDITURE		Fees							de of Texas. Com officeholder living	plete Schedule T.	
								ш			o years birthday (event
								. So for tionet		C, (1 Outil 4	o jours similarly	. v O11t.
_	Complete ONLY if direct	Щ	Candidate/Offi	ceholder name		office sou	aht			Office he	əld	
	expenditure to benefit C/OI		Januala, Om	oo.ioidoi ildiiio	O	moc sou	Ailt			Cilice III	U.G	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 36/46 Rpt: 63/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	09/26/2024	Society of Professional Journalist San Antonio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	3503 River Way
		San Antonio, TX 78230
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Sponsorship Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Sponsorship of tickets for Gridiron event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davida marra
	12/05/2024	Payee name Spaw Senate Account
		· ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O. Box 12068
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Benevolence fund
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	08/29/2024	St. Timothy Church
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1515 Saltillo
		San Antonio, TX 78207
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Sponsorship Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Sponsored a table for Noche de Amistad Banquet
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to belieff C/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 37/46 Rpt: 64/74	Menendez, Jose (The Honorable)	00042411
4	Date	5 Payee name	
	12/13/2024	Super Awesome Balloon Animals	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$190.00	5002 N. Loop 1604 E.	
		#1106	
		San Antonio, TX 78247	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Liverit Expense	outside of Texas. Complete Schedule T.
		l	n, TX, officeholder living expense ter for holiday party
			er ter tiendely purity
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	4	
	Date	Payee name	
	12/02/2024	TJHS Athletic Booster Club	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	723 Donaldson	
		San Antonio, TX 78201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Basketball ac	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	4	
	Date	Payee name	
	12/10/2024	Tellez Tamales & Barbacoa	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$394.50	1802 Bandera Road	
		San Antonio, TX 78228	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Toda/Beverage Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		l	Senate Holiday party
			conditionally painty
	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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

	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: 38/46 Rpt: 65/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	10/22/2024	Texas Ethics Commission
6	Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code P.O. Box 12070
	. ,	
		Austin, TX 78711
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Payment of late fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
מ	expenditure to benefit C/OI	
	Date	Payee name
	07/26/2024	Texas Grandparents Raising Grandchildren
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7719 Barhill Post
		San Antonio , TX 78254
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation for Back to School Event
		251,44,51,151,24,51,151,24,51,151
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/19/2024	Texas Public Radio
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
		Worlding Sustaining membership ree
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 39/46 Rpt: 66/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	12/19/2024	Texas Public Radio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Monthly sustaining membership fee
		Monthly sustaining membership rec
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	10/19/2024	Texas Public Radio
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Monthly sustaining membership fee
		Monthly sustaining membership rec
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Data	
	Date	Payee name Texas Public Radio
	09/19/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Monthly sustaining membership fee
		Monthly Sustaining membership lee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 40/46 Rpt: 67/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	07/19/2024	Texas Public Radio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Monthly sustaining membership fee
		Monthly Sustaining membership rec
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/O	
\vdash	Date	Dougo nama
	08/19/2024	Payee name Texas Public Radio
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	8401 Datapoint Dr. Suite 800
		San Antonio, TX 78229
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Monthly sustaining membership fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Data	
	Date 12/10/2024	Payee name
		Texas Senate Democratic Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	P. O. Box 12068
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Membership Annual dues
		Metribership Annual dues
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 41/46 Rpt: 68/74	Menendez, Jose (The Honorable) 00042411
4	Date	5 Payee name
	09/19/2024	Texas Senate
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$172.50	P.O. Box 12068
		Austin, TX 78711
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Purchase of Texas Flags for constituents
		The state of the s
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit eroi	'
	Date	Payee name
	11/13/2024	Texas Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,750.00	P.O. Box 12068
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Senate 2025 Calendars for constituents
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/04/2024	Texas Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	P.O. Box 12068
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gavel for a constituent
		23.3.13. 23 33 33 34 34 34 34 34 34 34 34 34 34 34
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 42/46 Rpt: 69/74	2 FILER NAME Menendez, Jose (The Honorable) 3 Filer ID (Ethics Commission Filers) 00042411
4	Date 08/28/2024	5 Payee name The Rose Boutique
6	Amount (\$) \$195.00	7 Payee address; City; State; Zip Code 955 Cincinatti San Antonio, TX 78201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Memorial wreath for constituent.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 12/24/2024	Payee name The Texas Tribune
	Amount (\$) \$51.70	Payee address; City; State; Zip Code 919 Congress Avenue 6th Floor Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly sustaining membership fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/25/2024	Payee name The Texas Tribune
	Amount (\$) \$51.70	Payee address; City; State; Zip Code 919 Congress Avenue 6th Floor Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly sustaining membership fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials E Legal Services The Instruction Gui			ages/	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed ab	oove)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 43/46 Rpt: 70/74			Jose (The Honoi	able)					00042411		,
4	Date	5	Payee name									
	10/24/2024		The Texas	Tribune								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Coo	de					
	\$51.70		919 Congre	ss Avenue								
			6th Floor									
			Austin, TX 7	78701								
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Fees					=			plete Schedule T.	
								_		officeholder living		
								Monthly susta	ann	ng member	ouh icc	
9	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	Of	ffice soug	nht			Office he	ald	
9	expenditure to benefit C/O		Januluale/OIII	Cendidei Haille	Oi	mce soug	JIIL			Office III	ciu	
	Date		Payee name									
	09/24/2024		The Texas	Tribune								
	Amount (\$)	_	Payee addres	ss; City;	State;	Zip Coo	de					
	\$51.70		919 Congre	ss Avenue								
			6th Floor									
			Austin, TX 7	78701								
	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Fees					—			plete Schedule T.	
								Monthly susta		officeholder living		
								oriuny suste	ا ۱۱ ده	ng member	0.11p 100	
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office he	eld	
	Date		Payee name								-	
	07/24/2024		The Texas	Tribune								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Coo	de					
	\$51.70		919 Congre	ss Avenue								
			6th Floor									
			Austin, TX 7	78701								
	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Fees					ш			plete Schedule T.	
								Monthly susta		officeholder living		
								wioriany SuSta	an II	ng member	ouh icc	
	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office h	eld	
	expenditure to benefit C/O						-					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Ma

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Coi	mmittee	Gift/Awards/Memorials Legal Services The Instruction Gu	•		/ages	/Contract Labor		Travel Out of E OTHER (enter	District a category not listed a	above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 44/46 Rpt: 71/74			Jose (The Hono	rable)					00042411	`	,
4	Date	5	Payee name									
	08/24/2024		The Texas	Tribune								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de					
	\$51.70		919 Congre	ss Avenue								
			6th Floor									
			Austin, TX	78701								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	no top of this sch	odulo)	(b)	Description				
	OF	 `	Fees	se categories listed at th	ic top of this seri	cuuic)	` ,		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE							Check if Austin,	, TX,	officeholder livi	ng expense	
								Monthly susta	aini	ng membe	rship fee.	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	C	Office sou	ght			Office I	neld	
Т	Date		Payee name									
	08/28/2024		,	Neighborhood A	ssociation							
	Amount (\$)	┝	Payee addre	ss; City;	State:	Zip Co	de					
	\$500.00		214 West A		Otato,	p 00						
	φ300.00		ZIT WCS(7)	cademy								
				T) / 70000								
			San Antonio	o, TX 78226								
	PURPOSE OF	(a)	Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description				
	EXPENDITURE			ns/Donations Ma	,	•••		=			mplete Schedule T.	
			Candidate/0	Officeholder/Polit	tical Comm	ittee		—		officeholder livi		
								Donation for s	SUII	ioiaisiiip ai	valus.	
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<u> </u>										
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offi	ceholder name	C	Office sou	ght			Office I	neld	
	Date		Payee name									
	08/29/2024		Thompson	Neighborhood A	ssociation							
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de					
	\$100.00		214 West A	cademy								
				,								
			San Antonio	o, TX 78226								
	PURPOSE	(a)	Category (Sr	ee Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			ns/Donations Ma				ш			mplete Schedule T.	
	EXI ENDITORE		Candidate/0	Officeholder/Polit	tical Comm	ittee		ш		officeholder livi		
								Donation for I	ivei	gnbors To	getner event.	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office I	neld	
L	expenditure to benefit C/O	1										

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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
TTHER (output a colorograph and listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials E Legal Services The Instruction Gu	•		ages/	Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)
	Sch: 45/46 Rpt: 72/74			Jose (The Hono	rable)					00042411	,	,
4	Date	5	Payee name									
	10/30/2024		USPS									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de					
	\$170.00		1064 Vance	-	·	-						
			San Antonio	o, TX 78201								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Fees					<u> </u>			plete Schedule T.	
								_		officeholder living		
								Annual fee fo	יו ר	.o. Box ren	ıaı	
Ļ												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office h	eld	
L												
	Date		Payee name									
	12/11/2024		Yong's Trac	ling								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$1,139.76		8307 Speed	lway Drive								
			San Antonio			<u> </u>						
	PURPOSE OF	(a)		ee Categories listed at th		dule)	(b)	Description				
	EXPENDITURE		Gift/Awards	/Memorials Expe	ense			=		de of Texas. Com officeholder living	plete Schedule T.	
								Gifts for cons			3 cholise	
								101 00110				
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	Of	ffice soug	thr			Office h	eld	
	expenditure to benefit C/O		Janualo/OIII			oc soug	J'''L			Onice III		
	Date		Payee name									
	09/05/2024		Youth Do V	ote								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$1,000.00		202 W. Silve	er Sands Drive								
			San Antonio	o, TX 78216								
	PURPOSE OF	(a)		ee Categories listed at th		dule)	(b)	Description				
	EXPENDITURE			s/Donations Ma				ш			plete Schedule T.	
			Candidate/C	Officeholder/Polit	icai Commi	пее		ш		officeholder living	g expense Id Poll Worker Fe:	et
								Donation IOI	1 00	atii votel all	ia i oli vvoikei i-e:	٥.
	Complete ONLY if direct	Щ	Candidato/Offi	ceholder name	<u></u>	ffice soug	tht:			Office h	ald	
	expenditure to benefit C/O		Januiuale/OIII	centituei Haille	Oi	mce soul	JIIL			Office II	ciu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Co	mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services		Polling Expense Printing Expens Salaries/Wages	e /Contract Labor		Travel in Distric Travel Out of Di	
L				The Instruction Guide	explains h	now to comple	ete this form.	_		
1	Total pages Schedule F1:	2	FILER NAME	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 46/46 Rpt: 73/74		Menendez,	Jose (The Honoral	ole)				00042411	
4	Date	5	Payee name							
	10/05/2024			o Communications	Inc					
<u>ا</u>	Amount (\$)	7	Payee addre	ess; City;	State.	Zip Code				
ľ	\$181.54	ľ	-	n Blvd, 6th Floor	Otato,	Zip Couc				
	Ψ101.54		33 / IIIIdaci	ir biva, our rioor						
L		L	San Jose, (CA 95113						
8	PURPOSE	(a)	Category (S	see Categories listed at the to	o of this sche	edule) (b)	Description			
	OF EXPENDITURE		Fees				_			nplete Schedule T.
							_		, officeholder livin	g expense
							Zoom service	25		
L										
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Off	iceholder name	0	ffice sought			Office h	eld

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 74/74 2 FILER NAME Filer ID (Ethics Commission Filers) Menendez, Jose (The Honorable) 00042411 8 Amount (\$) Date 5 Name of person from whom amount is received 12/31/2024 Security Service Federal Credit Union \$484.53 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 Purpose for which amount is received Check if political contribution returned to filer dividend Amount (\$) Date Name of person from whom amount is received 12/31/2024 Security Service Federal Credit Union \$20,636.39 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 Purpose for which amount is received Check if political contribution returned to filer dividend Date Name of person from whom amount is received Amount (\$) 12/31/2024 Security Service Federal Credit Union \$2.97 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 Purpose for which amount is received Check if political contribution returned to filer interest