CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

	cs Commission Filers)	2 Total pages filed:			OFFICE	USE ONLY
00015992		17			Date Received	
COMMITTEE NAME	Deputy Sheriff's Associ	ation of Bexar Coun	ty Political Action C	Committee	ELECTRONIC 09/01/2025	ALLY FILED
TREASURER NAME	Worlds, Reginald				Date Hand-delivered	or Date Postmarked
ORIGINAL	January 15	Runo	off		1	
REPORT TYPE	July 15	=	day after campaign trea	surer resignation	Receipt #	Amount
	30th day before election	Diss	olution report			
	8th day before election	X Othe	er (specify) September	er 5	Date Processed	
ORIGINAL PERIOD COVERED	Month Day Yea 07/26/2025	tr THROUGH	Month Day 08/25/2025	Year	Date Imaged	
EXPLANATION OF C	ORRECTION				-9	
orrect details initially. Alt ne specific corrections p	rors found in my original re though I attempted to make pertain to [Officer Holder de ffice Holder], whereas the r	e corrections prior to file escribe the information	ing, I inadvertently su being corrected, e.g.	bmitted the origing the control of t	nal file without the s, dates, etc.]. The	necessary update
AFFIDAVIT			ear, or affirm, under p	penalty of perjury	, that this correcte	ed report is true
AFFIDAVIT		and	ear, or affirm, under p correct. ck the box next to an	, , , ,		ed report is true
AFFIDAVIT		and	correct.	y and all applicates: I swear or a	ble statements: affirm, that the orig an intent to mislea	ginal report
AFFIDAVIT		and	correct. ck the box next to any Semiannual report was made in good f	y and all applicates: I swear or a faith and without formation contains swear, or affirm, the 14th businestiginally filed is in any error or om	ble statements: affirm, that the original intent to misleated in the report. that I am filing this ss day after the dataccurate or incom	ginal report ad or to s corrected ate I learned uplete. I
AFFIDAVIT		and Che	correct. ck the box next to any Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, tha	y and all applicates: I swear or a faith and without formation contains swear, or affirm, the 14th businestiginally filed is in any error or om	ble statements: affirm, that the original an intent to misleated in the report. that I am filing this so day after the data accurate or incomplission in the report.	ginal report ad or to s corrected ate I learned uplete. I
AFFIX NOTARY STA	AMP / SEAL ABOVE	and Che	Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, that filed was made in go	y and all applicates: I swear or a aith and without formation containswear, or affirm, the 14th businesiginally filed is in at any error or or ood faith.	ble statements: affirm, that the original intent to misleated in the report. that I am filing this is day after the dataccurate or incomplission in the report.	ginal report ad or to s corrected ate I learned uplete. I
AFFIX NOTARY STA	AMP / SEAL ABOVE	and Che	Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, tha filed was made in good for the swear of the s	y and all applicates: I swear or a aith and without formation containswear, or affirm, the 14th busine riginally filed is in at any error or or ood faith. Reginald Weature of Campains	affirm, that the orig an intent to misleated in the report. that I am filing this ss day after the da accurate or incomnission in the repo	ginal report ad or to s corrected ate I learned plete. I rt as originally
AFFIX NOTARY STA		and Che	Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, tha filed was made in good Sign	y and all applicates: I swear or a aith and without formation contain swear, or affirm, the 14th businestiginally filed is in at any error or or cood faith. Reginald We nature of Campain, this the street is a swear of Campain.	affirm, that the orig an intent to misleated in the report. that I am filing this ss day after the da accurate or incomnission in the repo	ginal report ad or to s corrected ate I learned plete. I rt as originally
AFFIX NOTARY STA	ribed before me, by the said	and Che	Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, tha filed was made in good Sign	y and all applicates: I swear or a aith and without formation contain swear, or affirm, the 14th businestiginally filed is in at any error or or cood faith. Reginald We nature of Campain, this the street is a swear of Campain.	affirm, that the orig an intent to misleated in the report. that I am filing this ss day after the da accurate or incomnission in the repo	ginal report ad or to s corrected ate I learned plete. I rt as originally

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

FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 17 00015992 3 COMMITTEE NAME **OFFICE USE ONLY** Deputy Sheriff's Association of Bexar County Political Action Committee Date Received **ELECTRONICALLY FILED** 09/01/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 9200 Broadway, Ste. 106 San Antonio, TX 78217 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Reginald NAME Date Processed **NICKNAME SUFFIX** LAST Worlds Date Imaged CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 9200 Broadway STREET **ADDRESS** Suite 106 (Residence or Business) San Antonio, TX 78217 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 9200 Broadway MAILING **ADDRESS** Suite 106 San Antonio, TX 78217 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (210) 223-2213 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 X September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 07/26/2025 08/25/2025

GO TO PAGE 2

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Deputy Sheriff's Asso	ociation of Bexar County I	Political Action Committee	00015992	2
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		A. Currented		
	Measures (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders	Javier Salazar Bexar County	Sheriff	
	Assisted (Identify by name or, if applicable, classify by party.)	Carron Sanatan Boxan Souniy	G.1.61	
5 CONTRIBUTION		D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	CONTRIBUTIONS N	OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	\$	11,360.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	6,245.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	57,994.67
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
.6 AFFIDAVIT			I	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.	rjury, that the mation require	accompanying report is ad to be reported by me
		Reginal	d Worlds	
		Signature of Car		urer
AFFIX NOTA	RY STAMP / SEAL ABOVE	Ç		
Sworn to and subscrib	ned before me, by the said	, tł	nis the	day
		which, witness my hand and seal of office.		
		·		
Signature of officer	administering oath	Printed name of officer administering oath	Title of off	icer administering oath
-	-	· ·		č

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				4 of 17
17 COMMITTE	7 COMMITTEE NAME 18 Filer ID		(Ethics Commission	Filers)
Deputy Sh				
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AM	IOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1	L1,360.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	OR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORC	SANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.	9. SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$	6,245.49
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$			
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/17
2	FILER NAME Deputy Sher	iff's Association of Bexar County Political Action Co	ommittee	3 Filer ID (Ethics Commission Filers) 00015992
4	Date 07/29/2025	5 Full name of contributor ut-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$11,360.0
		San Antonio, TX 78217	1	
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	is)

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

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:	
Sch: 1/12 Rpt: 6/17	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
08/14/2025	5.11 Tactical
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$18.15	15693 San Pedro Ave
- Cynanditura fram	
Expenditure from corporate funds	San Antonio, TX 78232
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Clothing Purchases Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Miscellaneous Embroidery Clothing & Badges
	iniconance Iniciatory creaming a Baagee
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/12/2025	Academy Sports + Outdoors
Amount (\$)	Payee address; City; State; Zip Code
\$123.41	2643 Northwest Loop 410
Ψ125.41	2040 Northwest 200p 410
Expenditure from corporate funds	San Antonio, TX 78230
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Clothing Expenditure Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	DSABC T Shirts Purchases / Embroidery
	Bortoo Formas Furchases / Embroidery
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/21/2025	Al Carbon
Amount (\$)	Payee address; City; State; Zip Code
\$44.26	547 Culebra Rd
Expenditure from	
corporate funds	San Antonio, TX 78201
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Pac Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

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	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: 2/12 Rpt: 7/17	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
08/12/2025	All American Car
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40.00	4343 Vance Jackson Rd
Expenditure from corporate funds	San Antonio, TX 78230
8 PURPOSE 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	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Vehicle Expenditure
	· ·
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
<u> </u>	
Date	Payee name
07/30/2025	Altex
Amount (\$)	Payee address; City; State; Zip Code
\$8.61	7502 N Loop 1604 W
Expenditure from corporate funds	San Antonio, TX 78023
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Supplies Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Pac Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
08/25/2025	BILL MILLER BBQ
Amount (\$)	Payee address; City; State; Zip Code
\$46.39	1004 SAN PEDRO
φ40.39	1004 SAN FEDRO
Expenditure from	
corporate funds	SAN ANTONIO, TX 78212
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
	PAC Meeting
Operation Children	Open Highest (Office health and an annual to the control of the co
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
3.,50	

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

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: 3/12 Rpt: 8/17	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
07/29/2025	Blanco Cafe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$78.64	1720 Blanco Rd
- "	
Expenditure from corporate funds	San Antonio, TX 78212
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 Pac Meeting
	T de Weeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
08/07/2025	Blanco Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$31.25	1720 Blanco Rd
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Pac Meeting
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/19/2025	Blanco Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$18.75	1720 Blanco Rd
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Pac Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORALIZATO TO BOTTONE O/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political 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
TTHER (output a colorograph and listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
·	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/12 Rpt: 9/17	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
08/20/2025	Blanco Cafe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$42.49	1720 Blanco Rd
Expenditure from corporate funds	San Antonio, TX 78212
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense Cry Beschiptori Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Pac Meeting
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	н
Date	Payee name
08/01/2025	Chester's
Amount (\$)	Payee address; City; State; Zip Code
\$44.35	9980 I-10
\$44.35	9980 1-10
Expenditure from	
corporate funds	San Antonio, TX 78230
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Pac Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
SAPORGICATO TO BOTTOTIC OFO	
Date	Payee name
08/06/2025	Chick-Fil-A
Amount (\$)	Payee address; City; State; Zip Code
\$15.93	4455 Fredericksburg Rd
Expenditure from corporate funds	Balcones Heights, TX 78201
-	· ·
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Pac Meeting
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 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 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: 5/12 Rpt: 10/17	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
08/06/2025	Chilis Restaurant & Grill
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$42.18	8502 Broadway
Expenditure from corporate funds	San Antonio, TX 78217
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 Pac Meeting
	r at weeting
• O I I O O I I I I I I I I I I I I I I	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/05/2025	Crossroads Baptist Church
Amount (\$)	Payee address; City; State; Zip Code
\$575.00	8300 Tezel Rd
Expenditure from corporate funds	San Antonio , TX 78254
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Backpack Sponsorship Back To School Kids
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-
Date	Payee name
08/19/2025	Elmo Calvert
Amount (\$)	Payee address; City; State; Zip Code
\$4,500.00	9200 Broadway, Ste. 120
, ,	, and an analysis of the second secon
Expenditure from corporate funds	San Antonio, TX 78217
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder living expense
	Catering Food Services FOR Office Holder
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

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

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: 6/12 Rpt: 11/17	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
08/11/2025	HEB #389
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$24.19	6000 West Ave
Expenditure from corporate funds	San Antonio, TX 78213
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Transportation Equipment And Related
	Expense Check if Austin, TX, officeholder living expense Fuel Expense
	Puel Expense
9 Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/29/2025	HTEAO
Amount (\$)	Payee address; City; State; Zip Code
\$17.18	14423 Northwest Military Highway Shavano Par
- Constant to the second	
Expenditure from corporate funds	San Antonio, TX 78231
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Pac Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/06/2025	HTEAO
Amount (\$)	Payee address; City; State; Zip Code
\$7.10	14423 Northwest Military Highway Shavano Par
Expenditure from	
corporate funds	San Antonio, TX 78231
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
	Pac Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
ordan dara r ayınısın	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 7/12 Rpt: 12/17	Deputy Sheriff's Association of Bexar County Political Action 00015992	
4 Date	5 Payee name	
08/04/2025	Insomia Cookies	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$21.64	6010 UTSA Boulevard suite 104	
Expenditure from corporate funds	San Antonio , TX 78023	
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	
	Pac Meeting	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	_
experientare to benefit 6/6		
Date	Payee name	
08/12/2025	LUBY'S CAFETERIA # 24	
Amount (\$)	Payee address; City; State; Zip Code	_
\$32.41	911 N Main Ave	
Ψ32.41	311 N Main Ave	
Expenditure from		
corporate funds	San Antonio, TX 78212	
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	
	Pac Meeting	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
		_
Date	Payee name	
08/22/2025	LUBY'S CAFETERIA # 24	
Amount (\$)	Payee address; City; State; Zip Code	
\$26.98	911 N Main Ave	
¥20.00		
Expenditure from		
corporate funds	San Antonio, TX 78212	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Pac Meeting	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	٦
expenditure to benefit C/O		
		4

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political 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/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: 8/12 Rpt: 13/17	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
07/28/2025	Los Laurels Cafe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$31.34	1002 Fresno St
Expenditure from corporate funds	San Antonio , TX 78201
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
	Pac Meeting
Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Dove name
07/30/2025	Payee name Los Laurels Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$48.28	1002 Fresno St
Expenditure from corporate funds	San Antonio, TX 78201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
LXFLINDITORL	Check if Austin, TX, officeholder living expense
	Pac Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Data	
Date	Payee name
08/04/2025	Los Laurels Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$33.87	1002 Fresno St
Expenditure from corporate funds	San Antonio, TX 78201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Pac Meeting
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
4 7		
1 Total pages Schedule F1: Sch: 9/12 Rpt: 14/17	2 FILER NAME Deputy Sheriff's Association of Bexar County Political Action 3 Filer ID (Ethics Commission Filers) 00015992	
4 Date	5 Payee name	
08/20/2025	Nardis Public Safety	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$81.07	4818 IH-10 E	
Expenditure from	San Antonio, TX 78219	
corporate funds	Sall Alitollo, 17 70219	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	DSABC Badges	
ZA ZABITORZ	Check if Austin, TX, officeholder living expense	
	DSABC MISC Badges	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
08/08/2025	Panchito's Mexican Restaurant	
Amount (\$)	Payee address; City; State; Zip Code	
\$65.96	4100 McCullough Ave	
Expenditure from corporate funds	San Antonio, TX 78212	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	
LXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Pac Meeting	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	1	
Date	Payee name	
08/04/2025	QT	
Amount (\$)	Payee address; City; State; Zip Code	
\$21.64	4710 Fredericksburg Rd	
Expenditure from corporate funds	San Antonio, TX 78229	
•	I	
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	
	Fuel Expenditure	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	1	

SCHEDULE F1

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

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

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

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

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: 10/12 Rpt: 15/17	Deputy Sheriff's Association of Bexar County Political Action 00015992	
4 Date	5 Payee name	
08/04/2025	QΤ	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$43.00	4710 Fredericksburg Rd	
Expenditure from corporate funds	San Antonio, TX 78229	
8 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 Fuel Expense	
	Tuel Expense	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
5.		
Date	Payee name	
07/29/2025	Sam's Club	
Amount (\$)	Payee address; City; State; Zip Code	
\$22.66	5565 Dezavala Rd San Antonio	
Expenditure from corporate funds	San Antonio, TX 78249	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Supplies Check if travel outside of Texas. Complete Schedule T.	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Miscellaneous Pac Office Supplies	
2 1 2 2 1 1 2 1		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
08/18/2025	Senor Burro	
Amount (\$)	Payee address; City; State; Zip Code	
\$17.85	9519 San Pedro Ave	
Expenditure from corporate funds	San Antonio , TX 78216	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Pac Meeting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Supplication to Soliton Groun		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:		
Sch: 11/12 Rpt: 16/17	Deputy Sheriff's Association of Bexar County Political Action 00015992	
4 Date	5 Payee name	
08/11/2025	Taco House	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$29.78	6307 San Pedro Ave	
Expenditure from corporate funds	San Antonio, TX 78216	
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	
	Pac Meeting	
	, as meaning	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
08/13/2025	The Orginal Donut	
Amount (\$)	Payee address; City; State; Zip Code	
\$47.01	3307 Fredericksburg Rd	
Expenditure from corporate funds	San Antonio, TX 78216	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Pac Meeting	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH		
Date	Payee name	
08/18/2025	The Orginal Donut	
Amount (\$)	Payee address; City; State; Zip Code	
\$15.19	3307 Fredericksburg Rd	
Expenditure from corporate funds	San Antonio, TX 78216	
PURPOSE		
OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Pac Meeting	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 12/12 Rpt: 17/17	Deputy Sheriff's Association of Bexar County Political Action 00015992
4 Date	5 Payee name
08/18/2025	Titos Mexican Restaurant
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$28.93	955 S Alamo St
Expenditure from corporate funds	San Antonio , TX 78205
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Pac Meeting
	T do Meeting
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held