

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)		2 Total pages filed: <b>43</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Mr</b>		FIRST <b>Manuel</b>		OFFICE USE ONLY
	NICKNAME <b>Manny</b>		LAST <b>Pelaez</b>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #;		CITY;		Date Received
	STATE; ZIP CODE <b>12402 Abbey Park San Antonio TX 78249</b>				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( <b>210</b> )		PHONE NUMBER <b>902-9265</b>		Date Hand-delivered or Date Postmarked
	EXTENSION				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Mr</b>		FIRST <b>Chad</b>		Receipt #
	NICKNAME		LAST <b>Taylor</b>		Amount \$
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;		Date Processed
	STATE; ZIP CODE <b>3115 Pinto Pass San Antonio TX 78247</b>				Date Imaged
8 CAMPAIGN TREASURER PHONE	AREA CODE ( <b>210</b> )		PHONE NUMBER <b>875-8747</b>		
9 REPORT TYPE		July 15: Semi-Annual			
10 PERIOD COVERED	Month Day Year <b>4/25/2019</b>		THROUGH Month Day Year <b>6/30/2019</b>		
11 ELECTION	ELECTION DATE Month Day Year <b>5/4/2019</b>		ELECTION TYPE		
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) <b>District 8 City Councilman</b>		13 OFFICE SOUGHT (if known) <b>Council District 8</b>		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>14 C/OH NAME</b> <b>Mr Manuel Pelaez</b>	<b>15 Filer ID</b> (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>       <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	<b>\$ 0</b>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 11776.00</b>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	<b>\$ 224.24</b>
	4. TOTAL POLITICAL EXPENDITURES	<b>\$ 34888.15</b>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 9876.31</b>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	<b>\$ 0</b>

<b>18 AFFIDAVIT</b>		
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p style="margin-top: 20px;">*** Electronically Certified ***</p> <p>_____ Signature of Candidate or Officeholder</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said <u>Mr Manuel Pelaez</u> , this the <u>15th</u> day of <u>July</u> , 20 <u>19</u> , to certify which, witness my hand and seal of office.		
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

# SUBTOTALS - COH

## FORM C/OH COVER SHEET PG 3

<b>19</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	<b>\$ 11776.00</b>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	<b>\$ 0</b>
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	<b>\$ 0</b>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 34888.15</b>
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	<b>\$ 0</b>
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	<b>\$ 0</b>
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	<b>\$ 0</b>
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	<b>\$ 0</b>
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	<b>\$ 81.69</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 9**

2 FILER NAME  
**Mr Manuel Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/25/2019**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Zachary Braha**

7 Amount of contribution (\$)  
**300.00**

6 Contributor address; City; State; Zip Code  
**1915 Broadway St. #535  
San Antonio, TX 78215**

8 Principal occupation / Job title (See instructions)  
**Leasing Associate**

9 Employer (See instructions)  
**Fulcrum**

Date  
**4/25/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jacques Braha**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**10003 NW Military Hwy #2205  
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)  
**Partner**

Employer (See instructions)  
**Fulcrum**

Date  
**4/25/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Catherine Mann**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**8000 Donore #5000  
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**Del Donore HOA**

Date  
**4/25/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Ryan Bader**

Amount of contribution (\$)  
**300.00**

Contributor address; City; State; Zip Code  
**2303 Camelback Dr.  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Leasing Associate**

Employer (See instructions)  
**Fulcrum**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>2 of 9</b>
2 FILER NAME <b>Mr Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/25/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>John Gatens</b> ..... 6 Contributor address; City; State; Zip Code <b>8000 Donore Place #51</b> <b>San Antonio, TX 78229</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>retired</b>		9 Employer (See instructions) <b>n/a</b>
Date <b>4/25/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Curtis Loos</b> ..... Contributor address; City; State; Zip Code <b>11239 Quail Xing</b> <b>Helotes, TX 78023</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>business owner</b>		Employer (See instructions) <b>Advance Sales Solutions</b>
Date <b>4/25/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Dr. Wayne Simmons</b> ..... Contributor address; City; State; Zip Code <b>2020 Babcock Road</b> <b>San Antonio, TX 78229</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Dentist</b>		Employer (See instructions) <b>self</b>
Date <b>4/25/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mary Alfaro</b> ..... Contributor address; City; State; Zip Code <b>6334 Springtime St.</b> <b>San Antonio, TX 78249</b>	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions) <b>n/a</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**3 of 9**

**2** FILER NAME  
**Mr Manuel Pelaez**

**3** Filer ID (Ethics Commission Filers)

**4** Date  
**4/26/2019**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Michele Haussmann**

**7** Amount of contribution (\$)  
**500.00**

**6** Contributor address; City; State; Zip Code  
**5612 Parade Ridge  
San Antonio, TX 78731**

**8** Principal occupation / Job title (See instructions)  
**Principal**

**9** Employer (See instructions)  
**Attorney**

Date  
**4/30/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Rudy Vasquez**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**5 Kings ML  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**self**

Date  
**5/1/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Benjamin Dreszer**

Amount of contribution (\$)  
**350.00**

Contributor address; City; State; Zip Code  
**9 Westcourt Lane  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Partner**

Employer (See instructions)  
**Fulcrum**

Date  
**5/3/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Gil Garza**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**127 Adelaide Oaks  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Respiratory Specialist**

Employer (See instructions)  
**Medimunne**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**4 of 9**

2 FILER NAME  
**Mr Manuel Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/8/2019**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Indejit Singh Mejat**

7 Amount of contribution (\$)  
**300.00**

6 Contributor address; City; State; Zip Code  
**11219 Jadestone Blvd.  
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)  
**business owner**

9 Employer (See instructions)  
**self**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**South Texas Merchants Association**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**12054 Starcrest Drive  
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)  
**Merchants**

Employer (See instructions)  
**STMA**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Quest Fuel Distribution LLC**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**12054 Starcrest Drive  
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)  
**n/a**

Employer (See instructions)  
**Quest**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**STMA Wholesale**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**12054 Starcrest Drive  
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)  
**n/a**

Employer (See instructions)  
**STMA Wholesale**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**5 of 9**

**2** FILER NAME  
**Mr Manuel Pelaez**

**3** Filer ID (Ethics Commission Filers)

**4** Date  
**5/8/2019**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**A Ace Towing**

**7** Amount of contribution (\$)  
**500.00**

**6** Contributor address; City; State; Zip Code  
**4535 Farm to Market 1516  
Converse, TX 78109**

**8** Principal occupation / Job title (See instructions)  
**Owner**

**9** Employer (See instructions)  
**Ace Towing**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Muhammed Choudary**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**1507 Pamverie  
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)  
**Store owner**

Employer (See instructions)  
**Self**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**VH Gajera LLC**

Amount of contribution (\$)  
**101.00**

Contributor address; City; State; Zip Code  
**5901 Danny Kaye Dr.  
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)  
**business owner**

Employer (See instructions)  
**Self**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Khalid Bajwa**

Amount of contribution (\$)  
**300.00**

Contributor address; City; State; Zip Code  
**23811 Spring Scent  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**business owner**

Employer (See instructions)  
**Self**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**6 of 9**

2 FILER NAME  
**Mr Manuel Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/8/2019**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**A. Masood**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**2904 Feathercrest Drive  
San Antonio, TX 78728**

8 Principal occupation / Job title (See instructions)  
**business owner**

9 Employer (See instructions)  
**self**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Vasu Mekala**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**8302 Fern Bluff  
Round Rock, TX 78681**

Principal occupation / Job title (See instructions)  
**business owner**

Employer (See instructions)  
**self**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Imane Tarbouch**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**13327 Concordia Oak  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**business owner**

Employer (See instructions)  
**self**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**SA Apartment Association PAC**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**7527 Babcock Rd.  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**PAC**

Employer (See instructions)  
**SA Apartment Assoc. PAC**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>7 of 9</b>
2 FILER NAME <b>Mr Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/8/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Nizar Rafati</b> ..... 6 Contributor address; City; State; Zip Code <b>13623 Ascend Tier</b> <b>San Antonio, TX 78249</b>	7 Amount of contribution (\$) <b>400.00</b>
8 Principal occupation / Job title (See instructions) <b>business owner</b>		9 Employer (See instructions) <b>self</b>
Date <b>5/8/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Babcock Retailers LLC</b> ..... Contributor address; City; State; Zip Code <b>542 White Cyn</b> <b>San Antonio, TX 78260</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>business</b>		Employer (See instructions) <b>self</b>
Date <b>5/8/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>SAHLA PAC</b> ..... Contributor address; City; State; Zip Code <b>8531 N.New Braunfels</b> <b>San Antonio, TX 78217</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>PAC</b>		Employer (See instructions) <b>PAC</b>
Date <b>5/8/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Wenhao Wu</b> ..... Contributor address; City; State; Zip Code <b>19202 Kristen Way</b> <b>San Antonio, TX 78258</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>business owner</b>		Employer (See instructions) <b>self</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**8 of 9**

**2** FILER NAME  
**Mr Manuel Pelaez**

**3** Filer ID (Ethics Commission Filers)

**4** Date  
**5/8/2019**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**AFL-CIO**

**7** Amount of contribution (\$)  
**500.00**

**6** Contributor address; City; State; Zip Code  
**1625 L St. NW**  
**Washington, DC 20036**

**8** Principal occupation / Job title (See instructions)  
**National Organization**

**9** Employer (See instructions)  
**AFL-CIO**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Narinder Singh**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**20115 US Hwy 281 S**  
**San Antonio, TX 78221**

Principal occupation / Job title (See instructions)  
**business owner**

Employer (See instructions)  
**self**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Kin Yan Hui**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**7134 Quail Garden**  
**San Antonio, TX 78250**

Principal occupation / Job title (See instructions)  
**business owner**

Employer (See instructions)  
**self**

Date  
**5/8/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Charlie Amato**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**9311 San Pedro Ave. #600**  
**San Antonio, TX 78218**

Principal occupation / Job title (See instructions)  
**Chairman**

Employer (See instructions)  
**Southwest Business**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9 of 9</b>
2 FILER NAME <b>Mr Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/8/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Calvin Finch</b> ..... 6 Contributor address; City; State; Zip Code <b>6926 Dorothy Louise Dr.</b> <b>San Antonio, TX 78229</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>retired</b>		9 Employer (See instructions) <b>n/a</b>
Date <b>6/4/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Analco Gonzalez</b> ..... Contributor address; City; State; Zip Code <b>11703 Bridge Hampton</b> <b>San Antonio, TX 78251</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Managing Partner</b>		Employer (See instructions) <b>OCI Group</b>
Date <b>6/10/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>TREPAC</b> ..... Contributor address; City; State; Zip Code <b>PO Box 2246</b> <b>Austin, TX 78768</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>TREPAC Pac</b>		Employer (See instructions) <b>TREPAC</b>
Date <b>6/13/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Martin &amp; Drought P.C.</b> ..... Contributor address; City; State; Zip Code <b>300 Convent St.</b> <b>San Antonio, TX 78205</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Martin &amp; Drought</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1
2 FILER NAME Mr Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Contributor address; City; State; Zip Code	8 Amount of Contribution \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
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)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of Contribution \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements**

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1
2 FILER NAME Mr Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:  
1 of 1

2 FILER NAME  
Mr Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

7 Name of lender ☐ out-of-state PAC (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 / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral  
☐ none

15 ☐ Check if personal funds were deposited into political  
account (See instructions)

16 GUARANTOR  
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; . . . . . City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID# \_\_\_\_\_)

Loan Amount (\$)

Is lender a  
financial  
institution?

Lender address; . . . . . City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral  
☐ none

☐ Check if personal funds were deposited into political  
account (See Instructions)

GUARANTOR  
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; . . . . . City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

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If lender is out-of-state PAC, please see instruction guide for additional reporting requirements

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>1 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/26/2019</b>	<b>5</b> Payee name <b>Alamo Mailing</b>	
<b>6</b> Amount (\$) <b>2199.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>13114 Look Out Run San Antonio, TX 78233</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	<b>(b)</b> Description <b>postage</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

  

Date <b>4/26/2019</b>	Payee name <b>Alamo Mailing</b>	
Amount (\$) <b>2803.91</b>	Payee address; City; State; Zip Code <b>13114 Look Out Run San Antonio, TX 78233</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>postage</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

  

Date <b>4/26/2019</b>	Payee name <b>Mitzy Soria</b>	
Amount (\$) <b>140.00</b>	Payee address; City; State; Zip Code <b>1 Camino Santa Maria San Antonio, TX 78228</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>2 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/26/2019</b>	<b>5</b> Payee name <b>Walk Ons Bistreaux</b>	
<b>6</b> Amount (\$) <b>77.01</b>	<b>7</b> Payee address; City; State; Zip Code <b>11075 IH 10 West San Antonio, TX 78230</b>	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	<b>(b)</b> Description <b>campaign workers</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>4/27/2019</b>	Payee name <b>Troy Grohman</b>	
Amount (\$) <b>117.00</b>	Payee address; City; State; Zip Code <b>9522 Autumn Shade San Antonio, TX 78254</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>4/29/2019</b>	Payee name <b>David Price</b>	
Amount (\$) <b>498.38</b>	Payee address; City; State; Zip Code <b>19107 Two River Lane Boca Raton, FL 33498</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>campaign work</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>3 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/29/2019</b>	<b>5</b> Payee name <b>Facebook</b>	
<b>6</b> Amount (\$) <b>328.61</b>	<b>7</b> Payee address; City; State; Zip Code <b>1 Facebook Way Menlo Park, CA 94025</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>ads</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <b>4/29/2019</b>	Candidate / Officeholder name <b>Sushi Zushi</b>	
Amount (\$) <b>53.77</b>	Payee address; City; State; Zip Code <b>9687 Interstate 10 San Antonio, TX 78230</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <b>meeting</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <b>4/29/2019</b>	Candidate / Officeholder name <b>Prestige Printing</b>	
Amount (\$) <b>1428.90</b>	Payee address; City; State; Zip Code <b>8 Burwood Lane San Antonio, TX 78250</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>mailer</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>4 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/29/2019</b>	<b>5</b> Payee name <b>Nationbuilder</b>	
<b>6</b> Amount (\$) <b>89.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>520 South Grande Ave. Los Angeles, CA 90071</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description <b>website</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>4/30/2019</b>	Payee name <b>Bar B Cutie Restaurant</b>	
Amount (\$) <b>66.63</b>	Payee address; City; State; Zip Code <b>5603 Presidio Parkway San Antonio, TX 78249</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <b>Campaign team meeting</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>4/30/2019</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>56.39</b>	Payee address; City; State; Zip Code <b>1 Facebook Way Menlo Park, CA 94025</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>ads</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>5 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/30/2019</b>	<b>5</b> Payee name <b>Prestige Printing</b>		
<b>6</b> Amount (\$) <b>1304.41</b>	<b>7</b> Payee address; City; State; Zip Code <b>8 Burwood Lane San Antonio, TX 78250</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	<b>(b)</b> Description <b>mailer</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>5/1/2019</b>	Payee name <b>Noah Barshop</b>		
Amount (\$) <b>175.00</b>	Payee address; City; State; Zip Code <b>15715 Thrush Gate Lane San Antonio, TX 78248</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>5/1/2019</b>	Payee name <b>Emilio Serrano</b>		
Amount (\$) <b>159.00</b>	Payee address; City; State; Zip Code <b>1 Camino Santa Maria San Antonio, TX 78228</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>6 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/1/2019</b>	<b>5</b> Payee name <b>Alamo Mailing</b>		
<b>6</b> Amount (\$) <b>2818.52</b>	<b>7</b> Payee address; City; State; Zip Code <b>13114 Look Out Run San Antonio, TX 78223</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>postage</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>5/1/2019</b>	Payee name <b>Omar Morales</b>		
Amount (\$) <b>508.00</b>	Payee address; City; State; Zip Code <b>354 Latch Drive San Antonio, TX 78213</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>		Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>5/1/2019</b>	Payee name <b>Orlando Serrano Arzola</b>		
Amount (\$) <b>181.00</b>	Payee address; City; State; Zip Code <b>1 Camino Santa Maria San Antonio, TX 78228</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>		Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>7 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/1/2019</b>	<b>5</b> Payee name <b>Al Anstead</b>		
<b>6</b> Amount (\$) <b>150.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>2266 Regency Point San Antonio, TX 78231</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	<b>(b)</b> Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

  

Date <b>5/1/2019</b>	Payee name <b>Deanna Duran</b>		
Amount (\$) <b>96.00</b>	Payee address; City; State; Zip Code <b>5450 Rowley Road #78240 San Antonio, TX 78240</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

  

Date <b>5/3/2019</b>	Payee name <b>Costco</b>		
Amount (\$) <b>109.76</b>	Payee address; City; State; Zip Code <b>5611 UTSA Blvd. San Antonio, TX 78249</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <b>campaign supplies</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>8 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date <b>5/3/2019</b>	<b>5</b> Payee name <b>Amazon</b>					
<b>6</b> Amount (\$) <b>199.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>PO Box 81226 Seattle, WA 98108</b>					
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Event Expense</b>	<b>(b)</b> Description <b>microphone</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table border="0" style="width:100%"> <tr> <td style="width:50%">Candidate / Officeholder name</td> <td style="width:25%">Office sought</td> <td style="width:25%">Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				
Date <b>5/4/2019</b>	Payee name <b>Ginos Deli</b>					
Amount (\$) <b>164.32</b>	Payee address; City; State; Zip Code <b>13210 Huebner Road San Antonio, TX 78230</b>					
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <b>Volunteers</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table border="0" style="width:100%"> <tr> <td style="width:50%">Candidate / Officeholder name</td> <td style="width:25%">Office sought</td> <td style="width:25%">Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				
Date <b>5/4/2019</b>	Payee name <b>Babcock Social Club</b>					
Amount (\$) <b>910.80</b>	Payee address; City; State; Zip Code <b>5891 Babcock Road San Antonio, TX 78240</b>					
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Campaign Party</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table border="0" style="width:100%"> <tr> <td style="width:50%">Candidate / Officeholder name</td> <td style="width:25%">Office sought</td> <td style="width:25%">Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>9 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/4/2019</b>	<b>5</b> Payee name <b>Make a Wish Foundation</b>	
<b>6</b> Amount (\$) <b>1000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1931 NW Military Hwy. San Antonio, TX 78213</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	<b>(b)</b> Description <b>campaign volunteers with a cause</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <b>5/7/2019</b>	Candidate / Officeholder name <b>Deanna Duran</b>	
Amount (\$) <b>228.00</b>	Office sought <b>San Antonio, TX 78240</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <b>5/7/2019</b>	Candidate / Officeholder name <b>Eliseo Dorado</b>	
Amount (\$) <b>92.50</b>	Office sought <b>San Antonio, TN 78228</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>10 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/7/2019</b>	<b>5</b> Payee name <b>Deanna Duran</b>		
<b>6</b> Amount (\$) <b>228.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>5450 Rowley Road #112 San Antonio, TX 78240</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	<b>(b)</b> Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

  

Date <b>5/7/2019</b>	Payee name <b>Al Anstead</b>		
Amount (\$) <b>75.00</b>	Payee address; City; State; Zip Code <b>2266 Regency Point San Antonio, TX 78231</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

  

Date <b>5/7/2019</b>	Payee name <b>Noah Barshop</b>		
Amount (\$) <b>102.00</b>	Payee address; City; State; Zip Code <b>15715 Thrush Gate Lane San Antonio, TX 78248</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>11 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/7/2019</b>	<b>5</b> Payee name <b>Noah Barshop</b>		
<b>6</b> Amount (\$) <b>385.50</b>	<b>7</b> Payee address; City; State; Zip Code <b>15715 Thrush Gate Lane San Antonio, TX 78248</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	<b>(b)</b> Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name			
Office sought			
Office held			
Date <b>5/7/2019</b>	Payee name <b>Yesenia Gomez</b>		
Amount (\$) <b>58.00</b>	Payee address; City; State; Zip Code <b>12727 Vista Del Norte #1027 San Antonio, TX 78216</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name			
Office sought			
Office held			
Date <b>5/7/2019</b>	Payee name <b>Raeann Alcorta</b>		
Amount (\$) <b>48.00</b>	Payee address; City; State; Zip Code <b>2707 Lake Arbor Street San Antonio, TX 78222</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name			
Office sought			
Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>12 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/7/2019</b>	<b>5</b> Payee name <b>Melody Ollervidez</b>	
<b>6</b> Amount (\$) <b>48.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>15713 Thrush Gate Lane San Antonio, TX 78248</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	<b>(b)</b> Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>5/8/2019</b>	Payee name <b>Jose Angel Molina</b>	
Amount (\$) <b>70.00</b>	Payee address; City; State; Zip Code <b>1 Camino Santa Maria San Antonio, TX 78228</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>5/9/2019</b>	Payee name <b>Prestige Printing</b>	
Amount (\$) <b>1253.54</b>	Payee address; City; State; Zip Code <b>8 Burwood Lane San Antonio, TX 78250</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>mailer</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>13 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date <b>5/9/2019</b>	<b>5</b> Payee name <b>Omar Morales</b>					
<b>6</b> Amount (\$) <b>144.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>354 Latch Drive San Antonio, TX 78213</b>					
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	<b>(b)</b> Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table border="0"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				
Date <b>5/10/2019</b>	Payee name <b>Viva Strategy Group</b>					
Amount (\$) <b>2908.65</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd. San Antonio, TX 78201</b>					
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>fundraising</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table border="0"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				
Date <b>5/10/2019</b>	Payee name <b>Mailchimp</b>					
Amount (\$) <b>53.30</b>	Payee address; City; State; Zip Code <b>675 Ponce DeLeon Ave #5000 Atlanta, GA 30308</b>					
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>email program</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table border="0"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>14 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/13/2019</b>	<b>5</b> Payee name <b>Frankie Gonzales Wolfe Campaign</b>	
<b>6</b> Amount (\$) <b>250.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>8930 Wurzbach Rd. San Antonio, TX 78240</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	<b>(b)</b> Description <b>contribution</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>5/14/2019</b>	Payee name <b>Troy Grohman</b>	
Amount (\$) <b>130.00</b>	Payee address; City; State; Zip Code <b>9522 Autumn Shade San Antonio, TX 78254</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>5/14/2019</b>	Payee name <b>Troy Grohman</b>	
Amount (\$) <b>156.00</b>	Payee address; City; State; Zip Code <b>9522 Autumn Shade San Antonio, TX 78254</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>15 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/14/2019</b>	<b>5</b> Payee name <b>Troy Grohman</b>		
<b>6</b> Amount (\$) <b>286.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>9522 Autumn Shade San Antonio, TX 78254</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	<b>(b)</b> Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

  

Date <b>5/14/2019</b>	Payee name <b>Viva Politics</b>		
Amount (\$) <b>4000.00</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd. San Antonio, TX 78201</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>campaign management</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

  

Date <b>5/14/2019</b>	Payee name <b>Beau Anderson</b>		
Amount (\$) <b>300.00</b>	Payee address; City; State; Zip Code <b>14200 Vance Jackson Rd. #20208 San Antonio, TX 78249</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>16 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/16/2019</b>	<b>5</b> Payee name <b>Andrew Solano</b>		
<b>6</b> Amount (\$) <b>2000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>14056 Cedar Canyon San Antonio, TX 78230</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	<b>(b)</b> Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>5/17/2019</b>	Payee name <b>Laura Garza</b>		
Amount (\$) <b>500.00</b>	Payee address; City; State; Zip Code <b>13230 Baldwin Ridge San Antonio, TX 78249</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>5/17/2019</b>	Payee name <b>Emilio Serrano</b>		
Amount (\$) <b>258.00</b>	Payee address; City; State; Zip Code <b>1 Camino Santa Maria San Antonio, TX 78228</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>campaign work</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>17 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/20/2019</b>	<b>5</b> Payee name <b>Jada Sullivan Campaign</b>	
<b>6</b> Amount (\$) <b>200.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>000 n/a</b> <b>San Antonio, TX 00000</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	<b>(b)</b> Description <b>run-off</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>5/20/2019</b>	Payee name <b>Upwork</b>	
Amount (\$) <b>175.00</b>	Payee address; City; State; Zip Code <b>475 Brannen Street</b> <b>San Francisco, CA 94107</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>graphic design</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>5/23/2019</b>	Payee name <b>Sign Busters</b>	
Amount (\$) <b>300.00</b>	Payee address; City; State; Zip Code <b>PO Box 241018</b> <b>San Antonio, TX 78224</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>signs</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>18 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/24/2019</b>	<b>5</b> Payee name <b>Andrew Solano</b>		
<b>6</b> Amount (\$) <b>120.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>14056 Cedar Canyon San Antonio, TX 78230</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Loan Repayment/Reimbursement</b>	<b>(b)</b> Description <b>reimbursement for campaign supplies</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>5/28/2019</b>	Payee name <b>Melissa Havdra Campaign</b>		
Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>PO Box 769677 San Antonio, TX 78245</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	Description <b>run-off</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>5/29/2019</b>	Payee name <b>Nationbuilder</b>		
Amount (\$) <b>89.00</b>	Payee address; City; State; Zip Code <b>520 South Grande Avenue Los Angeles, CA 90007</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>website program</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>19 of 19</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>5/31/2019</b>	<b>5</b> Payee name <b>Facebook</b>	
<b>6</b> Amount (\$) <b>267.71</b>	<b>7</b> Payee address; City; State; Zip Code <b>1 Facebook Way Menlo Park, CA 94025</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>ads</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name           Office sought           Office held		
Date <b>6/10/2019</b>	Payee name <b>Mailchimp</b>	
Amount (\$) <b>53.30</b>	Payee address; City; State; Zip Code <b>675 Ponce DeLeon Ave. #5000 Atlanta, GA 30308</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>email program</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name           Office sought           Office held		
Date <b>6/11/2019</b>	Payee name <b>Viva Strategy Group</b>	
Amount (\$) <b>4000.00</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg San Antonio, TX 78201</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>election</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name           Office sought           Office held		

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# UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gifts/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)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F2: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		<b>\$ 0</b>
<b>5</b> Date	<b>6</b> Payee name	
<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code	
<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F3**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F3:  
**1 of 1**

**2** FILER NAME  
**Mr Manuel Pelaez**

**3** Filer ID (Ethics Commission Filers)

**4** Date

**5** Name of person from whom investment is purchased

.....  
**6** Address of person from whom investment is purchased; City; State; Zip Code

**7** Description of investment

**8** Amount of investment (\$)

Date

Name of person from whom investment is purchased

.....  
Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

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# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gifts/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)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F4: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$ 0</b>
--	-------------

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gifts/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)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule G: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee Name	
<b>6</b> Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule)  <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)  Description <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)  Description <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

## SCHEDULE H

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule H: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Business name	
<b>6</b> Amount (\$)	<b>7</b> Business address;                      City;        State;        Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description
		<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                      Candidate / Officeholder name                      Office sought                      Office held		
Date	Business name	
Amount (\$)	Business address;                      City;        State;        Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description
		<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH                      Candidate / Officeholder name                      Office sought                      Office held		
Date	Business name	
Amount (\$)	Business address;                      City;        State;        Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description
		<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH                      Candidate / Officeholder name                      Office sought                      Office held		

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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee name	
<b>6</b> Amount (\$)	<b>7</b> Payee address;                      City;      State;      Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category    (See instructions for examples of acceptable categories.)	<b>(b)</b> Description    (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address;                      City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category    (See instructions for examples of acceptable categories.)	Description    (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address;                      City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category    (See instructions for examples of acceptable categories.)	Description    (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address;                      City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category    (See instructions for examples of acceptable categories.)	Description    (See instructions regarding type of information required.)

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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

**SCHEDULE K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Mr Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date  
5/22/2019

5 Name of person from whom amount is received  
Manuel Pelaez

8 Amount (\$)  
81.69

6 Address of person from whom amount is received; City; State; Zip Code  
12402 Abbey Park  
San Antonio, TX 78249

7 Purpose for which amount is received  
Refund, campaign expense (vista print)

☒ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

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# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

**SCHEDULE T**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule T: <b>1 of 1</b>
<b>2</b> FILER NAME <b>Mr Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
<b>5</b> Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"><div><input type="checkbox"/> Schedule A2</div><div><input type="checkbox"/> Schedule B</div><div><input type="checkbox"/> Schedule B(J)</div><div><input type="checkbox"/> Schedule C2</div><div><input type="checkbox"/> Schedule D</div><div><input type="checkbox"/> Schedule F1</div><div><input type="checkbox"/> Schedule F2</div><div><input type="checkbox"/> Schedule F4</div><div><input type="checkbox"/> Schedule G</div><div><input type="checkbox"/> Schedule H</div><div><input type="checkbox"/> Schedule COH-UC</div><div><input type="checkbox"/> Schedule B-SS</div></div>		
<b>6</b> Dates of travel	<b>7</b> Name of person(s) traveling	
	<b>8</b> Departure city or name of departure location	
	<b>9</b> Destination city or name of destination location	
<b>10</b> Means of transportation	<b>11</b> Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"><div><input type="checkbox"/> Schedule A2</div><div><input type="checkbox"/> Schedule B</div><div><input type="checkbox"/> Schedule B(J)</div><div><input type="checkbox"/> Schedule C2</div><div><input type="checkbox"/> Schedule D</div><div><input type="checkbox"/> Schedule F1</div><div><input type="checkbox"/> Schedule F2</div><div><input type="checkbox"/> Schedule F4</div><div><input type="checkbox"/> Schedule G</div><div><input type="checkbox"/> Schedule H</div><div><input type="checkbox"/> Schedule COH-UC</div><div><input type="checkbox"/> Schedule B-SS</div></div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
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Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.  
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

C/OH NAME  
**Mr Manuel Pelaez**

Filer ID (Ethics Commission Filers)

## SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

\_\_\_\_\_  
Signature of Candidate / Officeholder

## FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

### A. CAMPAIGN FUNDS

Check only one:

- ☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- ☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

### B. ASSETS

Check only one:

- ☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.
- ☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

## OFFICEHOLDER

•• Complete this section *only* if you are an officeholder. ••

- ☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest of other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder