

# 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>47</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <b>Jalen</b>	MI	OFFICE USE ONLY	
	NICKNAME	LAST <b>McKee-Rodriguez</b>	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>7362 Monets Gdn San Antonio TX 78218</b>			Date Received	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( )	PHONE NUMBER -	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <b>Taylor</b>	MI		
	NICKNAME	LAST <b>Watson</b>	SUFFIX	Date Processed	
				Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>743 Eleanor Ave 101 San Antonio TX 78209</b>				
8 CAMPAIGN TREASURER PHONE	AREA CODE ( )	PHONE NUMBER -	EXTENSION		
9 REPORT TYPE	<b>8th Day Before General Election</b>				
10 PERIOD COVERED	Month Day Year <b>3/28/2023</b>		THROUGH	Month Day Year <b>4/26/2023</b>	
11 ELECTION	ELECTION DATE Month Day Year <b>5/6/2023</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>Council District 2</b>		13 OFFICE SOUGHT (if known) <b>Council District 2</b>		

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>14 C/OH NAME</b> <b>Jalen McKee-Rodriguez</b>	<b>15 Filer ID</b> (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>	<small>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.</small>	
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME  <hr/> COMMITTEE ADDRESS  <hr/> COMMITTEE CAMPAIGN TREASURER NAME  <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS  <hr/>

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	<b>\$ 60.00</b>
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 9716.39</b>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	<b>\$ 0</b>
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	<b>\$ 13780.93</b>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 13333.46</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>*** 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>Jalen McKee-Rodriguez</u> , this the <u>28th</u> day of <u>April</u> , <u>2023</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>Jalen McKee-Rodriguez</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>\$ 9716.39</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>\$ 13780.93</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>\$ 0</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/28/2023**

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

7 Amount of contribution (\$)  
**7.50**

6 Contributor address; City; State; Zip Code  
**211 Hunstock Avenue  
San Antonio, TX 78210**

8 Principal occupation / Job title (See instructions)  
**Not Employed**

9 Employer (See instructions)  
**Not Employed**

Date  
**3/28/2023**

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

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

Contributor address; City; State; Zip Code  
**2454 Toftrees  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Brown & McDonald**

Date  
**3/28/2023**

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

Amount of contribution (\$)  
**25.00**

Contributor address; City; State; Zip Code  
**1440 W Bitters Rd #103  
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)  
**Taxi driver**

Employer (See instructions)  
**Self-employed**

Date  
**3/28/2023**

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

Amount of contribution (\$)  
**20.00**

Contributor address; City; State; Zip Code  
**238 stolnet St  
San Antonio, TX 78220**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

**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:  
**2 of 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/28/2023**

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

7 Amount of contribution (\$)  
**45.00**

6 Contributor address; City; State; Zip Code  
**10435 Horn Blvd  
San Antonio, TX 78240**

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

9 Employer (See instructions)  
**Consultant**

Date  
**3/28/2023**

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

Amount of contribution (\$)  
**10.00**

Contributor address; City; State; Zip Code  
**6617 Sutton Road  
Madison, WI 53711**

Principal occupation / Job title (See instructions)  
**Not employed**

Employer (See instructions)  
**Not employed**

Date  
**3/28/2023**

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

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**5039 Hamilton Wolfe Rd Apt 1208  
San Antonio, TX 78229**

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

Employer (See instructions)  
**Hospice**

Date  
**3/29/2023**

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

Amount of contribution (\$)  
**10.00**

Contributor address; City; State; Zip Code  
**6139 Bear Branch  
SAN ANTONIO, TX 78222**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**3 of 26**

2 FILER NAME  
**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/29/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Rachel Gray-Castro**

7 Amount of contribution (\$) **25.00**

6 Contributor address; City; State; Zip Code  
**5401 Timber Beach St.  
San Antonio, TX 78250**

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

9 Employer (See instructions)  
**NISD**

Date  
**3/29/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Matthew A Tompkins**

Amount of contribution (\$) **20.00**

Contributor address; City; State; Zip Code  
**115 Claremont Avenue Apt 1  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Project Manager**

Employer (See instructions)  
**US Army**

Date  
**3/29/2023**

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

Amount of contribution (\$) **30.00**

Contributor address; City; State; Zip Code  
**3706 Candlewind Ln  
San Antonio, TX 78244**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**3/29/2023**

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

Amount of contribution (\$) **35.00**

Contributor address; City; State; Zip Code  
**100 N Santa Rosa St Apt 620  
San Antonio, TX 78207**

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

Employer (See instructions)  
**UTSA**

**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:  
**4 of 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/30/2023**

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

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

6 Contributor address; City; State; Zip Code  
**1104 C N. Quincy Street  
Arlington, VA 22201**

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

9 Employer (See instructions)  
**Center for Freethought Equality**

Date  
**3/30/2023**

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

Amount of contribution (\$)  
**15.00**

Contributor address; City; State; Zip Code  
**612 Martins Creek Dr  
Brunswick, MD 21716**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**3/30/2023**

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

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

Contributor address; City; State; Zip Code  
**209 Lone Falls Drive  
Universal City, TX 78148**

Principal occupation / Job title (See instructions)  
**Client services**

Employer (See instructions)  
**Capital Group**

Date  
**3/30/2023**

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

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

Contributor address; City; State; Zip Code  
**12836 Huntsman Lake Dr.  
San Antonio, TX 78249**

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

Employer (See instructions)  
**UTSA**

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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 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/30/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# **C00002089**)  
**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL COM**

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

6 Contributor address; City; State; Zip Code  
**501 3rd St  
Washington, DC 20001**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date  
**3/31/2023**

Full name of contributor ☐ out-of-state PAC (ID# **C00027342**)  
**INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS PC**

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

Contributor address; City; State; Zip Code  
**900 SEVENTH STREET  
Washington, DC 20001**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date  
**3/31/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**JULIETTE CANTU-DONALDSON**

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

Contributor address; City; State; Zip Code  
**276 NATALEN AVE  
SAN ANTONIO, TX 78209**

Principal occupation / Job title (See instructions)  
**Director of Purchasing**

Employer (See instructions)  
**SPFM LP**

Date  
**4/1/2023**

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

Amount of contribution (\$)  
**10.00**

Contributor address; City; State; Zip Code  
**8538 Wood Arbor  
San Antonio, TX 78251**

Principal occupation / Job title (See instructions)  
**Registered Nurse**

Employer (See instructions)  
**department of veterans affairs**

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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 26**

2 FILER NAME  
**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/1/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Erika de la Rosa**

7 Amount of contribution (\$)  
**25.00**

6 Contributor address; City; State; Zip Code  
**3806 Ridgeline Dr  
San Antonio, TX 78228**

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

9 Employer (See instructions)  
**Wells Fargo**

Date  
**4/1/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**LeReta Gatlin-McDavid**

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

Contributor address; City; State; Zip Code  
**3666 Versailles Drive  
San Antonio, TX 78219**

Principal occupation / Job title (See instructions)  
**Chief Of Operations**

Employer (See instructions)  
**COSA**

Date  
**4/1/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Rachel D. Melendes**

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

Contributor address; City; State; Zip Code  
**210 Hatcher Ave  
San Antonio, TX 78223**

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

Employer (See instructions)  
**UNITE HERE!**

Date  
**4/1/2023**

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

Amount of contribution (\$)  
**15.00**

Contributor address; City; State; Zip Code  
**13307 Lavel Spring  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

**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 26</b>
2 FILER NAME <b>Jalen McKee-Rodriguez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/1/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kimiya Factory</b> ..... 6 Contributor address; City; State; Zip Code <b>12021 N Shartel Ave</b> <b>Oklahoma City, OK 73114</b>	7 Amount of contribution (\$) <b>30.00</b>
8 Principal occupation / Job title (See instructions) <b>Kimiya</b>		9 Employer (See instructions) <b>Factory</b>
Date <b>4/2/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Robert Clifford</b> ..... Contributor address; City; State; Zip Code <b>8223 Evert St</b> <b>San Antonio, TX 78240</b>	Amount of contribution (\$) <b>30.00</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/2/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Bonnie Smith</b> ..... Contributor address; City; State; Zip Code <b>5527 Castle Glade Drive</b> <b>San Antonio, TX 78218</b>	Amount of contribution (\$) <b>30.00</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/3/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Colton Uden</b> ..... Contributor address; City; State; Zip Code <b>100 N Santa Rosa St Apt 620</b> <b>San Antonio, TX 78207</b>	Amount of contribution (\$) <b>10.00</b>
Principal occupation / Job title (See instructions) <b>Student</b>		Employer (See instructions) <b>None/Student</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>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**8 of 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/3/2023**

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

7 Amount of contribution (\$)  
**15.00**

6 Contributor address; City; State; Zip Code  
**100 N Santa Rosa St Apt 620  
San Antonio, TX 78207**

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

9 Employer (See instructions)  
**None/Student**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**3452 Chateau Drive  
San Antonio, TX 78219**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/4/2023**

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

Amount of contribution (\$)  
**7.00**

Contributor address; City; State; Zip Code  
**336 CLAREMONT AVE Apt 2  
SAN ANTONIO, TX 78209**

Principal occupation / Job title (See instructions)  
**Security Data Technician**

Employer (See instructions)  
**CyberFortress**

Date  
**4/4/2023**

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

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

Contributor address; City; State; Zip Code  
**3419 Chateau Drive  
San Antonio, TX 78219**

Principal occupation / Job title (See instructions)  
**Marketing/Outreach**

Employer (See instructions)  
**Robinson Consulting Group**

**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:  
**9 of 26**

2 FILER NAME  
**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/5/2023**

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

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

6 Contributor address; City; State; Zip Code  
**1017 North Main Ave Ste 300  
San Antonio, TX 78212**

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

9 Employer (See instructions)  
**Munoz & Co**

Date  
**4/5/2023**

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

Amount of contribution (\$)  
**10.00**

Contributor address; City; State; Zip Code  
**2234 Fresno  
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)  
**Data analyst**

Employer (See instructions)  
**META**

Date  
**4/5/2023**

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

Amount of contribution (\$)  
**2.27**

Contributor address; City; State; Zip Code  
**1351 E 8th st  
Beaumont, CA 92223**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/5/2023**

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

Amount of contribution (\$)  
**4.55**

Contributor address; City; State; Zip Code  
**560 Little Lake Dr Unit 30  
Ann Arbor, MI 48103**

Principal occupation / Job title (See instructions)  
**Software Engineer**

Employer (See instructions)  
**RIIS LLC**

**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: <b>10 of 26</b>
2 FILER NAME <b>Jalen McKee-Rodriguez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/5/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Keegan</b> ..... 6 Contributor address; City; State; Zip Code <b>314 Tall Oaks Dr</b> <b>Durham, NC 27713</b>	7 Amount of contribution (\$) <b>10.00</b>
8 Principal occupation / Job title (See instructions) <b>Not employed</b>		9 Employer (See instructions) <b>Not employed</b>
Date <b>4/5/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Blair Sampson</b> ..... Contributor address; City; State; Zip Code <b>PO Box 17428</b> <b>Austin, TX 78750</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date <b>4/6/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>COURTNEY KISHBAUGH</b> ..... Contributor address; City; State; Zip Code <b>1841 West 50th Street</b> <b>CLEVELAND, OH 44102</b>	Amount of contribution (\$) <b>1.14</b>
Principal occupation / Job title (See instructions) <b>Director</b>		Employer (See instructions) <b>Cleveland Innovation Project</b>
Date <b>4/6/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Amir Zakaria</b> ..... Contributor address; City; State; Zip Code <b>3830 Glenellen</b> <b>San Antonio, TX 78257</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>RN</b>		Employer (See instructions) <b>TNAA</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>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>11 of 26</b>
<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/6/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Meagan Knuth</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>729 Junction Dr Apt 729</b> <b>Allen, TX 75013</b>	<b>7</b> Amount of contribution (\$) <b>7.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Lawyer</b>		<b>9</b> Employer (See instructions) <b>Self</b>
Date <b>4/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Susan Francis</b> ..... Contributor address; City; State; Zip Code <b>PO Box 307</b> <b>Hancock, NH 03449</b>	Amount of contribution (\$) <b>1.59</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Peter Belmont</b> ..... Contributor address; City; State; Zip Code <b>166 Columbia Hts</b> <b>Brooklyn, NY 11201</b>	Amount of contribution (\$) <b>1.14</b>
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions) <b>self</b>
Date <b>4/11/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sidney Love</b> ..... Contributor address; City; State; Zip Code <b>6019 Saint James Dr single family home</b> <b>West Bloomfield Township, MI 48322</b>	Amount of contribution (\$) <b>5.00</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**12 of 26**

**2** FILER NAME  
**Jalen McKee-Rodriguez**

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

**4** Date  
**4/12/2023**

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

**7** Amount of contribution (\$)  
**15.00**

**6** Contributor address; City; State; Zip Code  
**1629 L ST NE Unit 301  
Washington, DC 20002**

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

**9** Employer (See instructions)  
**Local Progress**

Date  
**4/12/2023**

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

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

Contributor address; City; State; Zip Code  
**1 Venturers Field Rd  
Northampton, MA 01060**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/12/2023**

Full name of contributor ☐ out-of-state PAC (ID# **C00011114**)  
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES**

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

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

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date  
**4/13/2023**

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

Amount of contribution (\$)  
**1.14**

Contributor address; City; State; Zip Code  
**1950 sw 75th ave  
plantation, FL 33317**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>13 of 26</b>
2 FILER NAME <b>Jalen McKee-Rodriguez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/13/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rollin Dix</b> ..... 6 Contributor address; City; State; Zip Code <b>10154 south seeley avenue chicago, IL 60643</b>	7 Amount of contribution (\$) <b>1.00</b>
8 Principal occupation / Job title (See instructions) <b>Not Employed</b>		9 Employer (See instructions) <b>Not Employed</b>
Date <b>4/13/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Judy Zemel</b> ..... Contributor address; City; State; Zip Code <b>44 Cherry St. Brattleboro, VT 05301</b>	Amount of contribution (\$) <b>1.14</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/13/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lorna Wood</b> ..... Contributor address; City; State; Zip Code <b>1030 South Gay St. Auburn, AL 36830</b>	Amount of contribution (\$) <b>1.14</b>
Principal occupation / Job title (See instructions) <b>teacher</b>		Employer (See instructions) <b>self</b>
Date <b>4/13/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Elizabeth Garza</b> ..... Contributor address; City; State; Zip Code <b>9526 Contessa Dr San Antonio, TX 78216</b>	Amount of contribution (\$) <b>10.00</b>
Principal occupation / Job title (See instructions) <b>Teacher</b>		Employer (See instructions) <b>Saisd</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>		



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**14 of 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/15/2023**

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

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

6 Contributor address; City; State; Zip Code  
**13622 Inwood Park  
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)

**Chief Strategy Officer**

9 Employer (See instructions)

**Crosspoint Inc.**

Date  
**4/16/2023**

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

Amount of contribution (\$)  
**15.00**

Contributor address; City; State; Zip Code  
**6082 Covers Cove  
Cibolo, TX 78215**

Principal occupation / Job title (See instructions)

**Software Engineer**

Employer (See instructions)

**VNN Sports**

Date  
**4/18/2023**

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

Amount of contribution (\$)  
**5.00**

Contributor address; City; State; Zip Code  
**12 S Arlington St  
Greencastle, IN 46135**

Principal occupation / Job title (See instructions)

**Instructor**

Employer (See instructions)

**DePauw University**

Date  
**4/19/2023**

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

Amount of contribution (\$)  
**30.00**

Contributor address; City; State; Zip Code  
**7819 Quirt Dr  
San Antonio, TX 78227**

Principal occupation / Job title (See instructions)

**Educator**

Employer (See instructions)

**College Possible**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**15 of 26**

2 FILER NAME  
**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/19/2023**

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

7 Amount of contribution (\$)  
**15.00**

6 Contributor address; City; State; Zip Code  
**210 2104 Cullen Avenue  
Austin, TX 78757**

8 Principal occupation / Job title (See instructions)  
**Not Employed**

9 Employer (See instructions)  
**Not Employed**

Date  
**4/19/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Stonewall Democrats of San Antonio**

Amount of contribution (\$)  
**400.00**

Contributor address; City; State; Zip Code  
**PO Box 12814  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date  
**4/19/2023**

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

Amount of contribution (\$)  
**15.00**

Contributor address; City; State; Zip Code  
**9507 Apple Ridge Ln  
San Antonio, TX 78239**

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

Employer (See instructions)  
**RBFCU**

Date  
**4/20/2023**

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

Amount of contribution (\$)  
**20.00**

Contributor address; City; State; Zip Code  
**100 N Santa Rosa Apt 807  
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)  
**Director of Zoning and Planning**

Employer (See instructions)  
**City of San Antonio**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>16 of 26</b>
<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/20/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Theresa Preston-Werner</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>325 Upper Toyon Dr</b> <b>Ross, CA 94957</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>co-founder</b>		<b>9</b> Employer (See instructions) <b>Preston-Werner Ventures</b>
Date <b>4/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Guillermo Nicolas</b> ..... Contributor address; City; State; Zip Code <b>114 Camp Street 107</b> <b>San Antonio, TX 78204</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jen Brown</b> ..... Contributor address; City; State; Zip Code <b>133 lotus</b> <b>San Antonio, TX 78210</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Arden Buck</b> ..... Contributor address; City; State; Zip Code <b>PO Box 1685</b> <b>Nederland, CO 80466</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Not employed</b>		Employer (See instructions) <b>self</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**17 of 26**

2 FILER NAME  
**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/22/2023**

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

7 Amount of contribution (\$)  
**12.00**

6 Contributor address; City; State; Zip Code  
**2210 Cherokee Cir  
Valparaiso, IN 46383**

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

9 Employer (See instructions)  
**VCAL Donuts**

Date  
**4/22/2023**

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

Amount of contribution (\$)  
**2.50**

Contributor address; City; State; Zip Code  
**3747 Alta Vista Ln.  
Dallas, TX 75229**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/22/2023**

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

Amount of contribution (\$)  
**83.33**

Contributor address; City; State; Zip Code  
**302 Starkeys Landing  
Shepherdstown, WV 25443**

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

Employer (See instructions)  
**Skinner Law Firm**

Date  
**4/22/2023**

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

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

Contributor address; City; State; Zip Code  
**125 W Agarita Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Bracewell**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**18 of 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/22/2023**

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

7 Amount of contribution (\$)  
**5.00**

6 Contributor address; City; State; Zip Code  
**3155 Mountain View Drive  
Laguna Beach, CA 92651**

8 Principal occupation / Job title (See instructions)  
**Not Employed**

9 Employer (See instructions)  
**Not Employed**

Date  
**4/22/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jo Ann Harris**

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

Contributor address; City; State; Zip Code  
**5931 Lakecrest  
San Antonio, TX 78222**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/22/2023**

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

Amount of contribution (\$)  
**9.00**

Contributor address; City; State; Zip Code  
**4716 greenpoint ave apt 3b  
Queens, NY 11104**

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

Employer (See instructions)  
**Consensys**

Date  
**4/22/2023**

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

Amount of contribution (\$)  
**7.50**

Contributor address; City; State; Zip Code  
**7617 Parkwood NW  
Albuquerque, NM 87120**

Principal occupation / Job title (See instructions)  
**Physical Therapist**

Employer (See instructions)  
**Robert Romero PT**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**19 of 26**

**2** FILER NAME  
**Jalen McKee-Rodriguez**

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

**4** Date  
**4/23/2023**

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

**7** Amount of contribution (\$)  
**100.00**

**6** Contributor address; City; State; Zip Code  
**515 hays street  
san antonio, TX 78202**

**8** Principal occupation / Job title (See instructions)  
**Not Employed**

**9** Employer (See instructions)  
**Not Employed**

Date  
**4/23/2023**

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

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

Contributor address; City; State; Zip Code  
**4318 Eulalee Dr  
San Antonio, TX 78220**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/23/2023**

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

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

Contributor address; City; State; Zip Code  
**1510 W Loop s  
Houston, TX 77027**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date  
**4/24/2023**

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

Amount of contribution (\$)  
**27.00**

Contributor address; City; State; Zip Code  
**247 Lilla Jean Dr  
San Antonio, TX 78223**

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

Employer (See instructions)  
**Vanessa Velazquez Photography**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**20 of 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/24/2023**

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

7 Amount of contribution (\$)  
**1.19**

6 Contributor address; City; State; Zip Code  
**400 N 53rd Ave W  
Duluth, MN 55425**

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

9 Employer (See instructions)  
**DCC**

Date  
**4/24/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Tom Preston-Werner**

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

Contributor address; City; State; Zip Code  
**325 Upper Toyon Dr  
Ross, CA 94957**

Principal occupation / Job title (See instructions)  
**co-founder**

Employer (See instructions)  
**Preston-Werner Ventures**

Date  
**4/24/2023**

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

Amount of contribution (\$)  
**10.00**

Contributor address; City; State; Zip Code  
**2135 3380 South  
Salt Lake City, UT 84109**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/24/2023**

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

Amount of contribution (\$)  
**2.50**

Contributor address; City; State; Zip Code  
**4701 Winterset dr  
Minnetonka, MN 55343**

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

Employer (See instructions)  
**Na**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**21 of 26**

2 FILER NAME  
**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/24/2023**

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

7 Amount of contribution (\$)  
**5.00**

6 Contributor address; City; State; Zip Code  
**7403 Newhall Lane  
Austin, TX 78746**

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

9 Employer (See instructions)  
**Self**

Date  
**4/24/2023**

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

Amount of contribution (\$)  
**7.50**

Contributor address; City; State; Zip Code  
**718 Via Los Santos  
San Dimas, CA 91773**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/24/2023**

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

Amount of contribution (\$)  
**25.00**

Contributor address; City; State; Zip Code  
**1975 SE Crystal Lake Dr Apt 242  
Corvallis, OR 97333**

Principal occupation / Job title (See instructions)  
**social worker**

Employer (See instructions)  
**self**

Date  
**4/24/2023**

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

Amount of contribution (\$)  
**25.00**

Contributor address; City; State; Zip Code  
**363 Amber Ash Drive  
Kyle, TX 78640**

Principal occupation / Job title (See instructions)  
**RMA - WOMENS HEALTH**

Employer (See instructions)  
**ASCENSION KYLE**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**22 of 26**

2 FILER NAME  
**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/24/2023**

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

7 Amount of contribution (\$)  
**1.19**

6 Contributor address; City; State; Zip Code  
**2217 Stone Post Rd  
Manhattan, KS 66502**

8 Principal occupation / Job title (See instructions)  
**Not Employed**

9 Employer (See instructions)  
**Not Employed**

Date  
**4/24/2023**

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

Amount of contribution (\$)  
**2.38**

Contributor address; City; State; Zip Code  
**PO Box 307  
Hancock, NH 03449**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**4/25/2023**

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

Amount of contribution (\$)  
**2.50**

Contributor address; City; State; Zip Code  
**2217 Stone Post Rd  
Manhattan, KS 66502**

Principal occupation / Job title (See instructions)  
**Not employed**

Employer (See instructions)  
**Not employed**

Date  
**4/25/2023**

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

Amount of contribution (\$)  
**21.00**

Contributor address; City; State; Zip Code  
**8810 Scotsman Drive  
Austin, TX 78750**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

**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:  
**23 of 26**

2 FILER NAME  
**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/25/2023**

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

7 Amount of contribution (\$)  
**2.50**

6 Contributor address; City; State; Zip Code  
**645 Lake Front Place Apt.102  
Virginia Beach, VA 23452**

8 Principal occupation / Job title (See instructions)  
**Not Employed**

9 Employer (See instructions)  
**Not Employed**

Date  
**4/25/2023**

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

Amount of contribution (\$)  
**1.19**

Contributor address; City; State; Zip Code  
**601 Nelray Blvd  
Austin, TX 78751**

Principal occupation / Job title (See instructions)  
**Graduate Student Fellow**

Employer (See instructions)  
**University of Texas at Austin**

Date  
**4/25/2023**

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

Amount of contribution (\$)  
**7.50**

Contributor address; City; State; Zip Code  
**3681 E. Warren Rd  
Waitsfield, VT 05673**

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

Employer (See instructions)  
**none**

Date  
**4/25/2023**

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

Amount of contribution (\$)  
**10.00**

Contributor address; City; State; Zip Code  
**1 NONQUITT AVE  
SOUTH DARTMOUTH, MA 02748**

Principal occupation / Job title (See instructions)  
**Admin Asst**

Employer (See instructions)  
**Middlesex School**

**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:  
**24 of 26**

2 FILER NAME

**Jalen McKee-Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/25/2023**

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

7 Amount of contribution (\$)  
**20.00**

6 Contributor address; City; State; Zip Code  
**14 Walnut  
Sharon, MA 02067**

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

9 Employer (See instructions)  
**Vetco**

Date  
**4/25/2023**

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

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

Contributor address; City; State; Zip Code  
**1610 Viridian Park Lane  
Arlington, TX 76006**

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

Employer (See instructions)  
**Lockheed Martin**

Date  
**4/25/2023**

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

Amount of contribution (\$)  
**7.00**

Contributor address; City; State; Zip Code  
**139 Emerson Pl. Apt. 107  
Brooklyn, NY 11205**

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

Employer (See instructions)  
**National Labor Relations Board (U.S. Government)**

Date  
**4/26/2023**

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

Amount of contribution (\$)  
**30.00**

Contributor address; City; State; Zip Code  
**403 Calumet Pl  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Trinity University**

**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>25 of 26</b>
2 FILER NAME <b>Jalen McKee-Rodriguez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/26/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daqavise Winston</b> ..... 6 Contributor address; City; State; Zip Code <b>125 W South St #2700</b> <b>Indianapolis, IN 46206</b>	7 Amount of contribution (\$) <b>25.00</b>
8 Principal occupation / Job title (See instructions) <b>Supervisor</b>		9 Employer (See instructions) <b>GNC</b>
Date <b>4/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Margarita Avila</b> ..... Contributor address; City; State; Zip Code <b>605 Winterfield Dr 2427</b> <b>Hutto, TX 78634</b>	Amount of contribution (\$) <b>30.00</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jeremy Vargas</b> ..... Contributor address; City; State; Zip Code <b>650 Palisade Ave</b> <b>Yonkers, NY 10703</b>	Amount of contribution (\$) <b>12.00</b>
Principal occupation / Job title (See instructions) <b>Quality Assurance Engineer</b>		Employer (See instructions) <b>New Visions for Public Schools</b>
Date <b>4/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lisa Petrakis</b> ..... Contributor address; City; State; Zip Code <b>1810 W Gramercy Pl</b> <b>San Antonio, TX 78201</b>	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See instructions) <b>Program Coordinator</b>		Employer (See instructions) <b>University Health System</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>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>26 of 26</b>
2 FILER NAME <b>Jalen McKee-Rodriguez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/26/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lauren Gonzales</b> ..... 6 Contributor address; City; State; Zip Code <b>3634 Southport</b> <b>San Antonio, TX 78224</b>	7 Amount of contribution (\$) <b>30.00</b>
8 Principal occupation / Job title (See instructions) <b>Teacher</b>		9 Employer (See instructions) <b>Jubilee Academy</b>
Date <b>4/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Susan Edelstein</b> ..... Contributor address; City; State; Zip Code <b>308 Heidinger Drive</b> <b>Cary, NC 27511</b>	Amount of contribution (\$) <b>5.00</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kimani Mitchell</b> ..... Contributor address; City; State; Zip Code <b>7706 Coffee Mill</b> <b>San Antonio, TX 78252</b>	Amount of contribution (\$) <b>15.00</b>
Principal occupation / Job title (See instructions) <b>Assistant Principal</b>		Employer (See instructions) <b>KIPP Texas</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)
<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 Jalen McKee-Rodriguez		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 Jalen McKee-Rodriguez		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  
Jalen McKee-Rodriguez

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 6</b>	<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/28/2023</b>	<b>5</b> Payee name <b>Prestige Printing</b>		
<b>6</b> Amount (\$) <b>1715.76</b>	<b>7</b> Payee address; City; State; Zip Code <b>8 Burwood Ln</b> <b>San Antonio, TX 78216</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>Printing</b>
	<b>(c)</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			
Date <b>3/29/2023</b>	Payee name <b>LGM Job For You</b>		
Amount (\$) <b>2017.50</b>	Payee address; City; State; Zip Code <b>3666 Versailles</b> <b>San Antonio, TX 78219</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>		Description <b>Canvassing</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			
Date <b>4/3/2023</b>	Payee name <b>Jennifer Longoria</b>		
Amount (\$) <b>1000.00</b>	Payee address; City; State; Zip Code <b>403 Basswood Dr</b> <b>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>Data</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			

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>2 of 6</b>	<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/4/2023</b>	<b>5</b> Payee name <b>Frontera Strategies</b>		
<b>6</b> Amount (\$) <b>1000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>2614 Arlene Park San Antonio, TX 78251</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>Fundraising</b>
	<b>(c)</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			
Date <b>4/4/2023</b>	Payee name <b>Spoke</b>		
Amount (\$) <b>282.23</b>	Payee address; City; State; Zip Code <b>13742 Harper St Santa Ana, CA 92703</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Other: Other</b>		Description <b>Phone Bank</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			
Date <b>4/5/2023</b>	Payee name <b>LGM Job For You</b>		
Amount (\$) <b>1799.90</b>	Payee address; City; State; Zip Code <b>3666 Versailles San Antonio, TX 78219</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>		Description <b>Canvassing</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			

**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>3 of 6</b>	<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/5/2023</b>	<b>5</b> Payee name <b>ActBlue</b>		
<b>6</b> Amount (\$) <b>130.29</b>	<b>7</b> Payee address; City; State; Zip Code <b>PO Box 441146 Somerville, MA 22144</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>Fees</b>
	<b>(c)</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 <b>Jalen McKee-Rodriguez</b>	Office sought <b>Council District 2</b>	Office held <b>Council District 2</b>

  

Date <b>4/11/2023</b>	Payee name <b>ActBlue</b>		
Amount (\$) <b>197.02</b>	Payee address; City; State; Zip Code <b>PO Box 441146 Somerville, MA 22144</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Fees</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 <b>Jalen McKee-Rodriguez</b>	Office sought <b>Council District 2</b>	Office held <b>Council District 2</b>

  

Date <b>4/12/2023</b>	Payee name <b>LGM Job For You</b>		
Amount (\$) <b>900.00</b>	Payee address; City; State; Zip Code <b>3666 Versailles San Antonio, TX 78219</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>		Description <b>Canvassing</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 <b>Jalen McKee-Rodriguez</b>	Office sought <b>Council District 2</b>	Office held <b>Council District 2</b>

**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>4 of 6</b>	<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/17/2023</b>	<b>5</b> Payee name <b>MailChimp</b>		
<b>6</b> Amount (\$) <b>62.36</b>	<b>7</b> Payee address; City; State; Zip Code <b>675 Ponce de Leon AVE NE #5000 Atlanta, GA 30308</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: Other: Other</b>		<b>(b)</b> Description <b>E-Blast</b>
	<b>(c)</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			
Date <b>4/18/2023</b>	Payee name <b>LGM Job For You</b>		
Amount (\$) <b>1883.00</b>	Payee address; City; State; Zip Code <b>3666 Versailles San Antonio, TX 78219</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>		Description <b>Canvassing</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			
Date <b>4/18/2023</b>	Payee name <b>LGM Job For You</b>		
Amount (\$) <b>247.50</b>	Payee address; City; State; Zip Code <b>3666 Versailles San Antonio, TX 78219</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>		Description <b>Canvassing</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			

**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>5 of 6</b>	<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/21/2023</b>	<b>5</b> Payee name <b>Prestige Printing</b>		
<b>6</b> Amount (\$) <b>1161.52</b>	<b>7</b> Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</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>Printing</b>
	<b>(c)</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			
Date <b>4/21/2023</b>	Payee name <b>MailChimp</b>		
Amount (\$) <b>28.25</b>	Payee address; City; State; Zip Code <b>675 Ponce de Leon AVE NE #5000 Atlanta, GA 30308</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Other: Other</b>		Description <b>E-Blast</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			
Date <b>4/26/2023</b>	Payee name <b>JVC Media</b>		
Amount (\$) <b>236.00</b>	Payee address; City; State; Zip Code <b>9335 Lamerton 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>Signage</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 <b>Jalen McKee-Rodriguez</b> Office sought <b>Council District 2</b> Office held <b>Council District 2</b>			

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>6 of 6</b>	<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/26/2023</b>	<b>5</b> Payee name <b>LGM Job For You</b>	
<b>6</b> Amount (\$) <b>1119.60</b>	<b>7</b> Payee address; City; State; Zip Code <b>3666 Versailles San Antonio, TX 78219</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>Canvassing</b>
	<b>(c)</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 <b>Jalen McKee-Rodriguez</b>	Office sought <b>Council District 2</b> Office held <b>Council District 2</b>

Date	Payee name		
Amount (\$)	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 (\$)	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

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

# 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>Jalen McKee-Rodriguez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<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
	<b>(c)</b> <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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# 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

**Jalen McKee-Rodriguez**

**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 (\$)

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



# 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>Jalen McKee-Rodriguez</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>
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<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
	<b>(c)</b> <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
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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	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 G: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Jalen McKee-Rodriguez</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	
	<b>(c)</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	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>Jalen McKee-Rodriguez</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
	<b>(c)</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	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>Jalen McKee-Rodriguez</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.)	
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

Jalen McKee-Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount (\$)

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

7 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

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**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: <b>1 of 1</b>
2 FILER NAME <b>Jalen McKee-Rodriguez</b>		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <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>		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 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;"> <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		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <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		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <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)	

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# 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  
**Jalen McKee-Rodriguez**

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 or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

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