

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: 49	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Manny	MI	OFFICE USE ONLY Date Received 8/19/2024 7:02:03AM	
	NICKNAME	LAST Pelaez	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3522 Paesano Pkwy #301 San Antonio TX 78231				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ()	PHONE NUMBER -	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST April	MI	Receipt #	Amount \$
	NICKNAME	LAST Ancira	SUFFIX	Date Processed 8/19/2024 7:02:03AM	
	Date Imaged				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 31305 Keeneland Drive Boerne TX 78015				
8 CAMPAIGN TREASURER PHONE	AREA CODE ()	PHONE NUMBER -	EXTENSION		
9 REPORT TYPE	July 15: Semi-Annual				
10 PERIOD COVERED	Month Day Year Month Day Year 4/2/2024 THROUGH 6/30/2024				
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year 5/3/2025	<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) City Councilman District 8		13 OFFICE SOUGHT (if known) Mayor		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Manny Pelaez	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S)	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.
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COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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☐ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 29560.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 38924.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8963.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

18 AFFIDAVIT

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.

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Manny Pelaez, this the 16th day of August, 2024, 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

19 FILER NAME Manny Pelaez		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 29326.50
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 233.50
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 37094.05
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1830.61
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/7/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Cesar Briones

7 Amount of contribution (\$)
0.50

6 Contributor address; City; State; Zip Code
732 Stoneway Dr
San Antonio, TX 78258

8 Principal occupation / Job title (See instructions)
Co-Founder

9 Employer (See instructions)
Herospace

Date
4/7/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Laura Barberena

Amount of contribution (\$)
1.00

Contributor address; City; State; Zip Code
135 Furr Dr
San Antonio, TX 78201

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self-employed

Date
4/9/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ruby McDonald

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
14919 Hidden Glen Woods
San Antonio, TX 78249

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
4/9/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Martha Vasquez

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
1426 Azul Way
San Antonio, TX 78224

Principal occupation / Job title (See instructions)
Coordinator

Employer (See instructions)
SAISD

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 17
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Samuel Mcculloch 6 Contributor address; City; State; Zip Code 4610 Hawthorn Woods San Antonio, TX 78249	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Self-employed		9 Employer (See instructions) Self-employed
Date 4/9/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Shearn Contributor address; City; State; Zip Code 1405 Spyglass Dr Austin, TX 78746	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
Date 4/9/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Kennick Contributor address; City; State; Zip Code 8323 Magdalena Run San Antonio, TX 78023	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) BES Enterprises Architecture
Date 4/9/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gary Greenberg Contributor address; City; State; Zip Code 5311 Auburn Rdg San Antonio, TX 78249	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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:
3 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/9/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jason Claunch

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**4719 Cole Ave #404
Dallas, TX 75205**

8 Principal occupation / Job title (See instructions)
Director of Operations

9 Employer (See instructions)
Iron Cactus

Date
4/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Eduardo Parra

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**28 Grantham Gln
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
CEO

Employer (See instructions)
Parra & Co

Date
4/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Diane Rath

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**68 Bristol Green
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
4/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brent Farney

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**8258 Pimlico Ln
Boerne, TX 78015**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Thomas J Henry Law PC

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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 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/10/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Matthew Starr

7 Amount of contribution (\$)
1000.00

6 Contributor address; City; State; Zip Code
**7334 Blanco Rd #200
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
COO

9 Employer (See instructions)
Foresight Asset Management

Date
4/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Levi Rodgers

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**3128 Napier Park
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)
Real Estate

Employer (See instructions)
Self-employed

Date
4/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Griffin Farney

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**847 E Ashby Pl #679
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Griffen Famy Cemetary-employed

Date
4/11/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tim Matus

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**23930 Spring Scent
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Founder

Employer (See instructions)
Renu Robotics

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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: 5 of 17
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David McGee 6 Contributor address; City; State; Zip Code 000 000 San Antonio, TX 78205	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) CEO		9 Employer (See instructions) Amegy Bank
Date 4/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Francisco Guerra Contributor address; City; State; Zip Code 000 000 San Antonio, TX 78201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
Date 4/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown & McDonald Contributor address; City; State; Zip Code 100 NE Loop 410 San Antonio, TX 78216	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 4/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gary Joeris Contributor address; City; State; Zip Code 823 Arion #PkwY San Antonio, TX 78216	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Joeris Construction
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: 6 of 17
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rene Capistran 6 Contributor address; City; State; Zip Code 3512 La Soledad Court Brownsville, TX 78520	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) Self-employed
Date 4/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fermin Rajunov Contributor address; City; State; Zip Code 5 Wayward Oaks San Antonio, TX 78248	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Business Owner		Employer (See instructions) Self-employed
Date 4/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ronnie Sanders Contributor address; City; State; Zip Code 118 Summertime Dr San Antonio, TX 78216	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
Date 4/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lawrence Mann Contributor address; City; State; Zip Code 8000 Donore Pl #50 San Antonio, TX 78229	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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:
7 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/23/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ken Brown

7 Amount of contribution (\$)
1000.00

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

8 Principal occupation / Job title (See instructions)
Partner

9 Employer (See instructions)
Brown & McDonald PLLC

Date
4/23/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
William Wortman

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**10760 Capesthorne Way
Las Vegas, NV 89153**

Principal occupation / Job title (See instructions)
Director

Employer (See instructions)
Exact Imaging

Date
4/25/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Carla Ruiz

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**18 Devon Wood
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Self-employed

Date
5/14/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ryan Moe

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**613 NW Loop 410
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Ryan Moe PC

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
5/20/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
John Webb

7 Amount of contribution (\$)
1000.00

6 Contributor address; City; State; Zip Code
**10107 McAllister Fwy.
San Antonio, TX 78254**

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

9 Employer (See instructions)
Self-employed

Date
5/20/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shannon Loyd

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**78 Island Blvd
Fox Island, WA 98333**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Loyd Law Firm

Date
5/23/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bret Green

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**11107 Wurzbach #103
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Green Legal

Date
5/23/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Melanie Sanders

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**207 Woodcrest
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Reustoff & Sanders

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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:
9 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
5/23/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Marcella Della Casa

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**335 Brees Blvd
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Burleson LLP

Date
5/23/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Michael De La Paz

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1100 N W Loop 410 #360
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self-employed

Date
5/23/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Douglas Poneck

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**127 W Woodlawn Ave
San Antonio , TX 78312**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Escamilla Poneck

Date
5/23/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tom Newton

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**116 La Rue Ann Ct
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self-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:
10 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
5/24/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Linebarger Goggan Blair & Sampson LLP

7 Amount of contribution (\$)
1000.00

6 Contributor address; City; State; Zip Code
**PO Box 17428
Austin, TX 78760**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
5/28/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ian McLin

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**105 Villa Ann St
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Langley & Banack

Date
6/3/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Blake Yantis

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**6812 West Ave #100
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Mosaic Land Development

Date
6/13/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Royal Lea Law Office PLLC

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1901 NW Military HWY #218
San Antonio, TX 78213**

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 17

2 FILER NAME

Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
6/13/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Weiping Chan

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**19418 Cannon Hills Lane
Richmond, TX 77407**

8 Principal occupation / Job title (See instructions)
Professional Engineer

9 Employer (See instructions)
Self-employed

Date
6/13/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Linebarger Goggan Blair & Sampson LLP

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**PO Box 17428
Austin, TX 78760**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
6/13/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Richard Karam

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**8118 Datapoint
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self-employed

Date
6/22/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lee Finklea

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**126 Foxhall Ln
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Methodist Healthcare

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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:
12 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
6/27/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Eliot Howard

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**15522 Oak Grove Dr
San Antonio, TX 78255**

8 Principal occupation / Job title (See instructions)
Analysts

9 Employer (See instructions)
UTSA

Date
6/27/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tom Hoskins

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**12942 Legend Cave Dr
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self-employed

Date
6/27/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
David Prichard

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**10101 Reunion Pl
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self-employed

Date
6/27/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stephanie Jones

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**12803 Castle George St
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Self-employed

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: 13 of 17
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bret Green 6 Contributor address; City; State; Zip Code 11107 Wurzbach #103 San Antonio, TX 78230	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Green Legal
Date 6/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rob McDaniel Contributor address; City; State; Zip Code 20 Dominion Dr San Antonio, TX 78256	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Director		Employer (See instructions) Dominion HOA
Date 6/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Katherine Chism Contributor address; City; State; Zip Code 3718 Pinebluff Dr San Antonio, TX 78230	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Admin Assistant		Employer (See instructions) COLFA
Date 6/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JoAnne Wells Contributor address; City; State; Zip Code 610 E Market #3302 San Antonio, TX 78205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Senioer VP		Employer (See instructions) Wells Communication
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
6/27/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Richard Wells

7 Amount of contribution (\$)
1000.00

6 Contributor address; City; State; Zip Code
**610 E Market #3302
San Antonio, TX 78205**

8 Principal occupation / Job title (See instructions)
CEO

9 Employer (See instructions)
Wells Communication

Date
6/27/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Charles Jewell

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**13854 Bent Ridge Dr
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
6/27/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mary Worth

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**270 Terrell Rd
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Chief marketing officers

Employer (See instructions)
Morgans

Date
6/27/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wendy Black

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**431 King William St
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
Self-employed

Employer (See instructions)
Self-employed

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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:
15 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
6/27/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Robert Clare

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**3934 Pleasure Hill Dr
San Antonio, TX 78229**

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

9 Employer (See instructions)
Self-employed

Date
6/27/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ronnie Sanders

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**118 Summertime Dr
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Artist

Employer (See instructions)
Artist

Date
6/27/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Robert Worth

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**270 Terrell Rd
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Chairman

Employer (See instructions)
Worth & Associates

Date
6/28/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lance Aaron

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**25622 Lakota Winter
San Antonio, TX 78261**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
American Heritage LLC

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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:
16 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
6/28/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Marian Dyer

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**6830 Bella Colina
San Antonio, TX 78256**

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

9 Employer (See instructions)
Self-employed

Date
6/28/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Miguel Martinez

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**7615 N Songbird Ln
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
Self-employed

Employer (See instructions)
Self-employed

Date
6/28/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jason Morrow

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**28215 Heritage Trl
Boerne, TX 78015**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
UT Health

Date
6/28/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mercedes Medina

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**14102 Vistawood
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
SAISD

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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:
17 of 17

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
6/29/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Calvin Finch

7 Amount of contribution (\$)
300.00

6 Contributor address; City; State; Zip Code
**6926 Dorothy Louise
San Antonio, TX 78229**

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

9 Employer (See instructions)
Self-employed

Date
6/29/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Joe Soliz

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**8915 Datapoint Dr ##45B
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
Self-employed

Employer (See instructions)
Self-employed

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

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

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 Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0
5 Date 5/23/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Andrew Toscano 7 Contributor address; City; State; Zip Code 846 Culebra San Antonio, TX 78201	8 Amount of Contribution \$ 233.50 9 In-kind contribution description Food and beverage for fundraiser <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		

SCHEDULE B

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID# _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral
☐ none

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

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

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

Loan Amount (\$)

Is lender a
financial
institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral
☐ none

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

GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

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

1 Total pages Schedule F1: 1 of 16	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2024	5 Payee name Broadway Bank	
6 Amount (\$) 2.00	7 Payee address; City; State; Zip Code 1177 NE Loop 410 San Antonio, TX 78209	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 4/4/2024	Payee name Texas Democratic Party	
Amount (\$) 2004.00	Payee address; City; State; Zip Code 1106 Lavaca St. #100 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Voter Data	Description Voter Data
	<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 4/8/2024	Payee name Constant Contact	
Amount (\$) 154.57	Payee address; City; State; Zip Code 3675 Precision Dr. Loveland, CA 80538	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Email program
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 2 of 16	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/12/2024	5 Payee name Manny Pelaez	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 3522 Paesano Pkwy #301 San Antonio, TX 78231	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Reimbursement on expense made with personal funds
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 4/23/2024	Payee name Viva Politics		
Amount (\$) 4500.00	Payee address; City; State; Zip Code 1850 Fredericksburg San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Consulting	
	<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 4/23/2024	Payee name Herospace Digital Consulting LLC		
Amount (\$) 5812.50	Payee address; City; State; Zip Code 1840 W Mulberry Ave San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Digital Consulting	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 3 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/23/2024	5 Payee name Picture Box		
6 Amount (\$) 5700.00	7 Payee address; City; State; Zip Code 1023 Springdale Rd Bldg. 10, #C Austin, TX 78721		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Video production
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/24/2024	Payee name Manny Pelaez		
Amount (\$) 252.20	Payee address; City; State; Zip Code 3522 Paesano Pkwy San Antonio, TX 78231		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description Reimbursement on expense made with personal funds
	<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 4/25/2024	Payee name Manny Pelaez		
Amount (\$) 1060.69	Payee address; City; State; Zip Code 3522 Paesano Pkwy San Antonio, TX 78231		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description Reimbursement on expense made with personal funds
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 4 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/25/2024	5 Payee name Handwrytten		
6 Amount (\$) 4.43	7 Payee address; City; State; Zip Code 9820 S. Kyrene Rd Tempe, AZ 85284		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees		(b) Description Cards
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 4/25/2024	Payee name Domingo Restaurant		
Amount (\$) 92.40	Payee address; City; State; Zip Code 123 N St Marys St San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Lunch with donors
	<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 4/26/2024	Payee name Yen Yan		
Amount (\$) 200.00	Payee address; City; State; Zip Code 10999 IH10 W #175 San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description Donation
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 5 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/2024	5 Payee name Woods of Shavano Community Assoc.		
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 13138 Parksites Woods St San Antonio, TX 78230		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Sponsorship
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/1/2024	Payee name Cesar E. Chavez Legacy and Educational Foundation		
Amount (\$) 2000.00	Payee address; City; State; Zip Code 1504 E Commerce St, San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description Donation
	<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 5/2/2024	Payee name Manny Pelaez		
Amount (\$) 17.72	Payee address; City; State; Zip Code 3522 Paesano Pkwy San Antonio, TX 78231		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description Reimbursement on expense made with personal funds
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 6 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 5/6/2024	5 Payee name Nationabuilder		
6 Amount (\$) 104.00	7 Payee address; City; State; Zip Code 520 South Grand Ave. Los Angeles, CA 90071		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 5/6/2024	Payee name James Rodriguez		
Amount (\$) 750.00	Payee address; City; State; Zip Code 000 000 San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Contract labor - security
	<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 5/7/2024	Payee name Constant Contact		
Amount (\$) 154.57	Payee address; City; State; Zip Code 3675 Precision Drive Loveland, CO 80538		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Email program
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 7 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 5/8/2024	5 Payee name Vista Print		
6 Amount (\$) 22.72	7 Payee address; City; State; Zip Code 275 Wymam St Waltham, MA 02451		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Cards
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/13/2024	Payee name Extra Space		
Amount (\$) 212.00	Payee address; City; State; Zip Code 9738 Huebner Rd San Antonio, TX 78240		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		Description Storage space
	<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 5/13/2024	Payee name Wild Birds Unlimed		
Amount (\$) 132.00	Payee address; City; State; Zip Code 14602 Huebner Rd San Antnio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift/Awards/Memorials Expense		Description Sister city gifts
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 8 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 5/15/2024	5 Payee name Facebook		
6 Amount (\$) 165.22	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital ads
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/17/2024	Payee name Handwrytten		
Amount (\$) 21.65	Payee address; City; State; Zip Code 9820 S. Kyrene Rd Tempe, AZ 85284		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Cards
	<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 5/22/2024	Payee name Taqueria Datapoint		
Amount (\$) 46.93	Payee address; City; State; Zip Code 4503 De Zavala Rd San Antonio, TX 78249		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Staff breakfast
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 9 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 5/24/2024	5 Payee name Backyard on Broadway		
6 Amount (\$) 16.49	7 Payee address; City; State; Zip Code 2411 Broadway San Antonio, TX 78215		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food and beverage at fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/24/2024	Payee name Uber Eats		
Amount (\$) 21.17	Payee address; City; State; Zip Code 1455 Market St #400 San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Staff lunch
	<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 5/24/2024	Payee name Uber Eats		
Amount (\$) 151.23	Payee address; City; State; Zip Code 1455 Market St #400 San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Staff lunch
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 10 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 5/28/2024	5 Payee name Angkor Bistro		
6 Amount (\$) 88.08	7 Payee address; City; State; Zip Code 3111 TPC Pkwy San Antonio, TX 78259		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meeting with donor
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/28/2024	Payee name Nationabuilder		
Amount (\$) 104.00	Payee address; City; State; Zip Code 520 South Grand Ave. Los Angeles, CA 90071		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Website
	<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 5/28/2024	Payee name Broadway Bank		
Amount (\$) 3.00	Payee address; City; State; Zip Code 1177 NE Loop 410 San Antonio, TX 78209		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking		Description Fee
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 11 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 5/28/2024	5 Payee name Mi Tierra		
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 218 Produce Row San Antonio, TX 78207		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor lunch
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/28/2024	Payee name Hotel Emma		
Amount (\$) 88.78	Payee address; City; State; Zip Code 136 E Grayson St San Antonio, TX 78215		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Meeting with donor
	<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 5/30/2024	Payee name Viva Politics		
Amount (\$) 8000.00	Payee address; City; State; Zip Code 1850 Fredericksburg San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense		Description Campaign management
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 12 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 5/31/2024	5 Payee name Cates Legal Group PLLC		
6 Amount (\$) 1500.00	7 Payee address; City; State; Zip Code 20210 Silver Stream San Antonio, TX 78259		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Legal Services		(b) Description Legal services
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 6/6/2024	Payee name Go Daddy		
Amount (\$) 44.34	Payee address; City; State; Zip Code 14455 North Hayden Rd Scottsdale, AZ 85260		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Web URL
	<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 6/6/2024	Payee name Panaderia Jimenez		
Amount (\$) 30.02	Payee address; City; State; Zip Code 1846 Fredericksburg Rd San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Staff meeting
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 13 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/7/2024	5 Payee name Handwrytten		
6 Amount (\$) 4.43	7 Payee address; City; State; Zip Code 9820 S. Kyrene Rd Tempe, AZ 85284		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees		(b) Description Cards
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held
Date 6/7/2024	Payee name Constant Contact		
Amount (\$) 154.57	Payee address; City; State; Zip Code 3675 Precision Drive Loveland, CO 80538		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Email program
	<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 6/10/2024	Payee name Taqueria Datapoint		
Amount (\$) 28.12	Payee address; City; State; Zip Code 4503 De Zavala Rd San Antonio, TX 78249		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Staff meeting
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 14 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/12/2024	5 Payee name Total Wine		
6 Amount (\$) 319.34	7 Payee address; City; State; Zip Code 125 NW Loop 419 San Antonio, TX 78216		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food and beverage for fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 6/14/2024	Payee name Facebook		
Amount (\$) 213.24	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital ads
	<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 6/18/2024	Payee name Extra Space		
Amount (\$) 252.20	Payee address; City; State; Zip Code 9738 Huebner Rd San Antonio, TX 78240		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		Description Storage space
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 15 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/24/2024	5 Payee name Taqueria Datapoint		
6 Amount (\$) 55.96	7 Payee address; City; State; Zip Code 4503 De Zavala Rd San Antonio, TX 78249		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Staff meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 6/25/2024	Payee name Viva Strategy Group		
Amount (\$) 350.00	Payee address; City; State; Zip Code 3529 Eva Jane Rd San Antonio, TX 78261		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense		Description Consulting
	<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 6/28/2024	Payee name Nationbuilder		
Amount (\$) 104.00	Payee address; City; State; Zip Code 520 South Grand Ave Los Angeles, CA 90071		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Website
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 16 of 16	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/30/2024	5 Payee name Stripe		
6 Amount (\$) 555.48	7 Payee address; City; State; Zip Code 185 Berry Street #550 San Francisco, CA 94107		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees		(b) Description Total credit card processing fees for reporting period
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 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		
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			
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
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			

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

1 Total pages Schedule F2: 1 of 1	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

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

11 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
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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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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
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

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

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F4: 1 of 1	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

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

11 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
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Amount (\$)	Payee address; City; State; Zip Code
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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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

1 Total pages Schedule G: 1 of 2	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/5/2024	5 Payee Name Young Womens Leadership Academy Foundation	
6 Amount (\$) 500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 155 Concord Plaza San Antonio, TX 78216	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political	(b) Description Donation for fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 4/22/2024	Payee name Vista Print		
Amount (\$) 252.20 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 275 Wymam St Waltham, MA 02451		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Cards	
	<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 4/22/2024	Payee name Vista Print		
Amount (\$) 1060.69 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 275 Wymam St Waltham, MA 02451		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Hats and printed materials	
	<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

1 Total pages Schedule G: 2 of 2	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/1/2024	5 Payee Name Handwrytten	
6 Amount (\$) 17.72 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 9820 S. Kyrene Rd Tempe, AZ 85284	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Cards
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 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		
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			

Date	Payee name		
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code		
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			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

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

Manny Pelaez

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: 1 of 1
2 FILER NAME Manny Pelaez		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; padding: 5px 0;"><div><input type="checkbox"/> Schedule A2</div><div><input type="checkbox"/> Schedule B</div><div><input type="checkbox"/> Schedule B(J)</div><div><input type="checkbox"/> Schedule C2</div><div><input type="checkbox"/> Schedule D</div><div><input type="checkbox"/> Schedule F1</div><div><input type="checkbox"/> Schedule F2</div><div><input type="checkbox"/> Schedule F4</div><div><input type="checkbox"/> Schedule G</div><div><input type="checkbox"/> Schedule H</div><div><input type="checkbox"/> Schedule COH-UC</div><div><input type="checkbox"/> Schedule B-SS</div></div>		
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; padding: 5px 0;"><div><input type="checkbox"/> Schedule A2</div><div><input type="checkbox"/> Schedule B</div><div><input type="checkbox"/> Schedule B(J)</div><div><input type="checkbox"/> Schedule C2</div><div><input type="checkbox"/> Schedule D</div><div><input type="checkbox"/> Schedule F1</div><div><input type="checkbox"/> Schedule F2</div><div><input type="checkbox"/> Schedule F4</div><div><input type="checkbox"/> Schedule G</div><div><input type="checkbox"/> Schedule H</div><div><input type="checkbox"/> Schedule COH-UC</div><div><input type="checkbox"/> Schedule B-SS</div></div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"><div><input type="checkbox"/> Schedule A2</div><div><input type="checkbox"/> Schedule B</div><div><input type="checkbox"/> Schedule B(J)</div><div><input type="checkbox"/> Schedule C2</div><div><input type="checkbox"/> Schedule D</div><div><input type="checkbox"/> Schedule F1</div><div><input type="checkbox"/> Schedule F2</div><div><input type="checkbox"/> Schedule F4</div><div><input type="checkbox"/> Schedule G</div><div><input type="checkbox"/> Schedule H</div><div><input type="checkbox"/> Schedule COH-UC</div><div><input type="checkbox"/> Schedule B-SS</div></div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

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
Manny Pelaez

Filer ID (Ethics Commission Filers)

SIGNATURE

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

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

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

A. CAMPAIGN FUNDS

Check only one:

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

B. ASSETS

Check only one:

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

Signature of Candidate

OFFICEHOLDER

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

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

Signature of Officeholder