

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)		2 Total pages filed: <b>51</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	Manuel				
NICKNAME	LAST	SUFFIX			
Manny		Pelaez		Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>12402 Abbey Park San Antonio TX 78249</b>				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( 210 )	PHONE NUMBER <b>902-9265</b>	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$
	Chad			Date Processed	
	NICKNAME	LAST	SUFFIX	Date Imaged	
Taylor					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>3115 Pinto Pass San Antonio TX 78247</b>				
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 210 )	PHONE NUMBER <b>875-8747</b>	EXTENSION		
9 REPORT TYPE	30th Day Before General Election				
10 PERIOD COVERED	<div>Month Day Year</div> <div>1/1/2019 THROUGH 3/25/2019</div>				
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year	5/4/2019	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other Description		
12 OFFICE	OFFICE HELD (if any) <b>District 8 Councilman</b>		13 OFFICE SOUGHT (if known) <b>Council District 8</b>		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

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

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	<b>\$ 0</b>
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 37434.00</b>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	<b>\$ 932.22</b>
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	<b>\$ 32850.45</b>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 31329.04</b>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	<b>\$ 0</b>

## 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 Manuel Pelaez, this the 4th day of April, 2019, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

# SUBTOTALS - COH

FORM C/OH  
COVER SHEET PG 3

<b>19</b> FILER NAME <b>Manuel Pelaez</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	<b>\$ 37434.00</b>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	<b>\$ 0</b>
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	<b>\$ 0</b>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 32850.45</b>
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	<b>\$ 0</b>
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	<b>\$ 0</b>
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	<b>\$ 0</b>
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	<b>\$ 0</b>
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	<b>\$ 0</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 28**

2 FILER NAME  
**Manuel Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**1/1/2019**

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

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

6 Contributor address; City; State; Zip Code  
**12835 Castle Bend  
San Antonio, TX 78230**

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

9 Employer (See instructions)  
**retired**

Date  
**1/3/2019**

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

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

Contributor address; City; State; Zip Code  
**25 Calle Anacua  
Brownsville, TX 78520**

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

Employer (See instructions)  
**n/a**

Date  
**1/14/2019**

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

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

Contributor address; City; State; Zip Code  
**21105 IH 10 West  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Auto Dealer**

Employer (See instructions)  
**Audi Dominion**

Date  
**1/15/2019**

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

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

Contributor address; City; State; Zip Code  
**600 E. Market Street #3302  
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)  
**Dailey/ Wells**

Employer (See instructions)  
**Self**

**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 28**

2 FILER NAME  
**Manuel Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**1/15/2019**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jo Anne Wells**

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

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

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

9 Employer (See instructions)  
**Self**

Date  
**1/15/2019**

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

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

Contributor address; City; State; Zip Code  
**12018 Indigo Bend  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Real Estate**

Employer (See instructions)  
**Mosaic Development**

Date  
**1/15/2019**

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

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

Contributor address; City; State; Zip Code  
**128 W Mistletoe Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Kruger, Carlson**

Date  
**1/15/2019**

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

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

Contributor address; City; State; Zip Code  
**9366 Huebner Rd #107 A  
San Antonio, TX 78240**

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

Employer (See instructions)  
**Self**

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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.		<b>1</b> Total pages Schedule A1: <b>3 of 28</b>
<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/15/2019</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Colleen Ernst</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>9386 Huebner Rd #107 A</b> <b>San Antonio, TX 78240</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>n/a</b>		<b>9</b> Employer (See instructions) <b>n/a</b>
Date <b>1/16/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>James Burdine</b> ..... Contributor address; City; State; Zip Code <b>27211 Timberline Drive</b> <b>San Antonio, TX 78260</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>Pyramid Group</b>
Date <b>1/16/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mark Granados</b> ..... Contributor address; City; State; Zip Code <b>112 Warbler Way</b> <b>San Antonio, TX 78231</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>GFR Development</b>
Date <b>1/17/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Paul Basaldua</b> ..... Contributor address; City; State; Zip Code <b>3 Woltwood</b> <b>San Antonio, TX 78248</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Real Estate Developer</b>		Employer (See instructions) <b>Mosaic Development</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**4 of 28**

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

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

**4** Date  
**1/17/2019**

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

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

**6** Contributor address; City; State; Zip Code  
**105 Blackhawk Trail  
San Antonio, TX 78232**

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

**9** Employer (See instructions)  
**Herrera Law Firm**

Date  
**1/17/2019**

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

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

Contributor address; City; State; Zip Code  
**1160 Rodalyn Drive  
San Antonio, TX 78006**

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

Employer (See instructions)  
**Cude Engineers**

Date  
**1/17/2019**

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

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

Contributor address; City; State; Zip Code  
**1160 Rodalyn Drive  
San Antonio, TX 78006**

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

Employer (See instructions)  
**n/a**

Date  
**1/17/2019**

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

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

Contributor address; City; State; Zip Code  
**4555 Krueger Rd.  
Washington, TX 77880**

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

Employer (See instructions)  
**n/a**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>5 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>1/17/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Chris Martinez</b> ..... 6 Contributor address; City; State; Zip Code <b>9855 Oakland Rd.</b> <b>San Antonio, TX 78240</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Project Mgr.</b>		9 Employer (See instructions) <b>Central Electric</b>
Date <b>1/17/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ernest Mora</b> ..... Contributor address; City; State; Zip Code <b>2511 Old Gate Rd.</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>CFO</b>		Employer (See instructions) <b>Central Electric Enterprises</b>
Date <b>1/19/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kelly Basaldua</b> ..... Contributor address; City; State; Zip Code <b>3 Woltwood</b> <b>San Antonio, TX 78248</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Southwest Children's Center</b>
Date <b>1/23/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Red McCombs</b> ..... Contributor address; City; State; Zip Code <b>PO Box 003</b> <b>San Antonio, TX 78201</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>McCombs</b>		Employer (See instructions) <b>Business Owner</b>

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**6 of 28**

2 FILER NAME  
**Manuel Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**1/23/2019**

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

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

6 Contributor address; City; State; Zip Code  
**215 W. Travis St.  
San Antonio, TX 78205**

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

9 Employer (See instructions)  
**Self Employed**

Date  
**1/23/2019**

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

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

Contributor address; City; State; Zip Code  
**2 Laurel Pl.  
San Antonio, TX 78209**

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

Employer (See instructions)  
**retired**

Date  
**1/23/2019**

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

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

Contributor address; City; State; Zip Code  
**12018 Indigo Bend  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Mosaic Development**

Date  
**1/23/2019**

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

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

Contributor address; City; State; Zip Code  
**326 Tophill Rd  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Real Estate**

Employer (See instructions)  
**Embrey Partners**

**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:  
**7 of 28**

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

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

**4** Date  
**1/24/2019**

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

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

**6** Contributor address; City; State; Zip Code  
**309 Irvington Dr.  
San Antonio, TX 78209**

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

**9** Employer (See instructions)  
**Terramark**

Date  
**1/24/2019**

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

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

Contributor address; City; State; Zip Code  
**6619 Broadway St.  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Oscar Garza Law Firm**

Date  
**1/24/2019**

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

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

Contributor address; City; State; Zip Code  
**13823 Ridge Chase Dr.  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Self**

Date  
**1/24/2019**

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

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

Contributor address; City; State; Zip Code  
**13823 Ridge Chase Dr.  
San Antonio, TX 78230**

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: <b>8 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>1/25/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cruz Paloma Cortez</b> ..... 6 Contributor address; City; State; Zip Code <b>219 Produce Road</b> <b>San Antonio, TX 78207</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Business Owner</b>		9 Employer (See instructions) <b>Cortez Restaurants</b>
Date <b>1/25/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tim Carrasco</b> ..... Contributor address; City; State; Zip Code <b>6963 Willow Oak St.</b> <b>San Antonio, TX 78249</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Systems Analyst</b>		Employer (See instructions) <b>USAA</b>
Date <b>1/28/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rod Riodan</b> ..... Contributor address; City; State; Zip Code <b>444 Ranch Pass</b> <b>Fair Oaks Ranch, TX 78015</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Finance</b>		Employer (See instructions) <b>Embrey Partners</b>
Date <b>1/28/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>James Andrews</b> ..... Contributor address; City; State; Zip Code <b>215 Luther Dr.</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Architect</b>		Employer (See instructions) <b>Overland Partners</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**9 of 28**

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

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

**4** Date  
**1/29/2019**

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

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

**6** Contributor address; City; State; Zip Code  
**122 Roy Smith #4216**  
**San Antonio, TX 78215**

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

**9** Employer (See instructions)  
**Overland Partners**

Date  
**1/29/2019**

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

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

Contributor address; City; State; Zip Code  
**1903 Preakness Lane**  
**San Antonio, TX 78248**

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

Employer (See instructions)  
**NRP Group**

Date  
**1/29/2019**

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

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

Contributor address; City; State; Zip Code  
**8110 Pintado**  
**San Antonio, TX 78015**

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

Employer (See instructions)  
**Big Red Dog Engineering**

Date  
**1/29/2019**

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

Amount of contribution (\$)  
**150.00**

Contributor address; City; State; Zip Code  
**14018 Sage Blf**  
**San Antonio, TX 78216**

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

Employer (See instructions)  
**San Antonio Tourism Council**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**10 of 28**

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

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

**4** Date  
**1/29/2019**

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

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

**6** Contributor address; City; State; Zip Code  
**235 Ammann  
San Antonio, TX 78015**

**8** Principal occupation / Job title (See instructions)  
**President & Exec. Director**

**9** Employer (See instructions)  
**Real Estate Council**

Date  
**1/29/2019**

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

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

Contributor address; City; State; Zip Code  
**31305 Keeneland Drive  
Boerne, TX 78015**

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

Employer (See instructions)  
**Ancira Auto Group**

Date  
**1/29/2019**

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

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

Contributor address; City; State; Zip Code  
**1636 Santa Fe Trail Dr.  
San Antonio, TX 78232**

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

Employer (See instructions)  
**The RK Group**

Date  
**1/29/2019**

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

Amount of contribution (\$)  
**150.00**

Contributor address; City; State; Zip Code  
**18 Gallery Ct.  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Norton, Rose, Fulbright**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>11 of 28</b>
<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/29/2019</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>NuStar PAC</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>19003 IH 10 West</b> <b>San Antonio, TX 78257</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>PAC</b>		<b>9</b> Employer (See instructions) <b>NuStar</b>
Date <b>1/29/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Patrick Shearer</b> ..... Contributor address; City; State; Zip Code <b>PO Box 23129</b> <b>San Antonio, TX 78223</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Developer</b>		Employer (See instructions) <b>Self Employed</b>
Date <b>1/29/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Katie Harvey</b> ..... Contributor address; City; State; Zip Code <b>2 Queens Gate</b> <b>San Antonio, TX 78218</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>CEO</b>		Employer (See instructions) <b>KGBT Communications</b>
Date <b>1/31/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Heriberto Morales</b> ..... Contributor address; City; State; Zip Code <b>401 Quarry St.</b> <b>Eagle Pass, TX 78852</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Langley &amp; Banack Inc.</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>12 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>1/31/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>George Block</b> ..... 6 Contributor address; City; State; Zip Code <b>127 Burr Rd. #4</b> <b>San Antonio, TX 78209</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>retired</b>		9 Employer (See instructions) <b>retired</b>
Date <b>2/4/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Charles Gonzalez</b> ..... Contributor address; City; State; Zip Code <b>206 E. Locust St.</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Ogletree Deakins, P.C.</b>
Date <b>2/5/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Casey O'Neil</b> ..... Contributor address; City; State; Zip Code <b>854 Fawnway</b> <b>San Antonio, TX 78260</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>Glacier Homes</b>
Date <b>2/5/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rebecca O'Neil</b> ..... Contributor address; City; State; Zip Code <b>854 Fawnway</b> <b>San Antonio, TX 78260</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>13 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/5/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Thomas Yantis</b> ..... 6 Contributor address; City; State; Zip Code <b>1802 NW Military Dr.</b> <b>San Antonio, TX 78213</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Developer</b>		9 Employer (See instructions) <b>Mosaic Development</b>
Date <b>2/5/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Debra Guerrero</b> ..... Contributor address; City; State; Zip Code <b>3915 Skylark</b> <b>San Antonio, TX 78210</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Gov. Affairs</b>		Employer (See instructions) <b>NRP Group</b>
Date <b>2/5/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jessica Schiller</b> ..... Contributor address; City; State; Zip Code <b>2410 Wild Turkey W.</b> <b>San Antonio, TX 78232</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
Date <b>2/5/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Adam Schiller</b> ..... Contributor address; City; State; Zip Code <b>2410 Wild Turkey W.</b> <b>San Antonio, TX 78232</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Director of Sales</b>		Employer (See instructions) <b>GFR Development</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>14 of 28</b>
<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/6/2019</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kenneth Pruitt</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>5413 N. New Braunfels Ave.</b> <b>San Antonio, TX 78209</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Director of Development</b>		<b>9</b> Employer (See instructions) <b>GFR Development</b>
Date <b>2/6/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Catherine Granados</b> ..... Contributor address; City; State; Zip Code <b>112 Warbler Way</b> <b>San Antonio, TX 78213</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
Date <b>2/6/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cynthia Granados</b> ..... Contributor address; City; State; Zip Code <b>112 Warbler Way</b> <b>San Antonio, TX 78213</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
Date <b>2/6/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Caroline Granados</b> ..... Contributor address; City; State; Zip Code <b>112 Warbler Way</b> <b>San Antonio, TX 78213</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**15 of 28**

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

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

**4** Date  
**2/6/2019**

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

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

**6** Contributor address; City; State; Zip Code  
**223 Eugene Sasser**  
**San Antonio, TX 78260**

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

**9** Employer (See instructions)  
**GFR Development Services**

Date  
**2/6/2019**

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

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

Contributor address; City; State; Zip Code  
**223 Eugene Sasser**  
**San Antonio, TX 78260**

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

Employer (See instructions)  
**n/a**

Date  
**2/7/2019**

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

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

Contributor address; City; State; Zip Code  
**PO Box 780489**  
**San Antonio, TX 78278**

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

Employer (See instructions)  
**Valero Energy**

Date  
**2/7/2019**

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

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

Contributor address; City; State; Zip Code  
**48 Vineyard**  
**San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Chief Administrative Officer**

Employer (See instructions)  
**NuStar Energy Corporation**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>16 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/9/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tim Carrasco</b> ..... 6 Contributor address; City; State; Zip Code <b>6963 Willow Oak</b> <b>San Antonio, TX 78249</b>	7 Amount of contribution (\$) <b>50.00</b>
8 Principal occupation / Job title (See instructions) <b>Systems Analyst</b>		9 Employer (See instructions) <b>USAA</b>
Date <b>2/9/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Helen Cronenberger</b> ..... Contributor address; City; State; Zip Code <b>3923 Heights Way</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions) <b>retired</b>
Date <b>2/9/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Marilyn Choate</b> ..... Contributor address; City; State; Zip Code <b>14407 Cedar Glade</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>125.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>HOA</b>
Date <b>2/11/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Buddy Ford</b> ..... Contributor address; City; State; Zip Code <b>4702 Center Park Blvd.</b> <b>San Antonio, TX 78218</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>Texas Towing Corp.</b>

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**17 of 28**

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

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

**4** Date  
**2/12/2019**

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

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

**6** Contributor address; City; State; Zip Code  
**108 Geneseo  
San Antonio, TX 78209**

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

**9** Employer (See instructions)  
**Velocity Texas**

Date  
**2/12/2019**

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

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

Contributor address; City; State; Zip Code  
**43 Granburg  
San Antonio, TX 78218**

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

Employer (See instructions)  
**Self**

Date  
**2/12/2019**

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

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

Contributor address; City; State; Zip Code  
**300 E. Basse #128  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Self**

Date  
**2/12/2019**

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

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

Contributor address; City; State; Zip Code  
**2694 Lockhill Selma Rd.  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Escamilla & Poneck**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>18 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/12/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jay Hulings</b> ..... 6 Contributor address; City; State; Zip Code <b>15523 Clover Rdg</b> <b>San Antonio, TX 78248</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Davis &amp; Santos PC</b>
Date <b>2/12/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Patricio Alba</b> ..... Contributor address; City; State; Zip Code <b>7123 Cresta Bulivar</b> <b>San Antonio, TX 78256</b>	Amount of contribution (\$) <b>45.00</b>
Principal occupation / Job title (See instructions) <b>Area Vice President</b>		Employer (See instructions) <b>Acera Surgical</b>
Date <b>2/12/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Justin Vitek</b> ..... Contributor address; City; State; Zip Code <b>6811 Washita Way</b> <b>San Antonio, TX 78256</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>McMillen Vitek Investments</b>
Date <b>2/12/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Clayton Estep</b> ..... Contributor address; City; State; Zip Code <b>270 Losoya</b> <b>San Antonio, TX 78205</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>General Manager</b>		Employer (See instructions) <b>Babcock Social Pub</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>19 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/12/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Trisha Chan</b> ..... 6 Contributor address; City; State; Zip Code <b>2209 Princess Julia Lane</b> <b>Lutz, FL 33549</b>	7 Amount of contribution (\$) <b>45.00</b>
8 Principal occupation / Job title (See instructions) <b>homemaker</b>		9 Employer (See instructions) <b>homemaker</b>
Date <b>2/13/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Steven Garza</b> ..... Contributor address; City; State; Zip Code <b>210 Ridge Bluff</b> <b>San Antonio, TX 78216</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
Date <b>2/14/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Bradford Beldon</b> ..... Contributor address; City; State; Zip Code <b>35 Royal Waters Dr.</b> <b>San Antonio, TX 78248</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>Beldon Roofing Company</b>
Date <b>2/14/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Richard Thum</b> ..... Contributor address; City; State; Zip Code <b>15 Tuscany Court</b> <b>San Antonio, TX 78257</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>Five Star Cleaners</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/14/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Michael Bernard</b> ..... 6 Contributor address; City; State; Zip Code <b>8602 Post Oak Ln.</b> <b>San Antonio, TX 78217</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Dykema</b>
Date <b>2/15/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gail Markson</b> ..... Contributor address; City; State; Zip Code <b>4610 Pinecomb Woods St.</b> <b>San Antonio, TX 78249</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
Date <b>2/19/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Beth Laughead</b> ..... Contributor address; City; State; Zip Code <b>5975 Lockhill Rd.</b> <b>San Antonio, TX 78240</b>	Amount of contribution (\$) <b>150.00</b>
Principal occupation / Job title (See instructions) <b>retired adminstrator</b>		Employer (See instructions) <b>retired</b>
Date <b>2/25/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Nancy Kelley</b> ..... Contributor address; City; State; Zip Code <b>7 Links Green</b> <b>San Antonio, TX 78257</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**21 of 28**

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

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

**4** Date  
**2/25/2019**

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

**7** Amount of contribution (\$)  
**200.00**

**6** Contributor address; City; State; Zip Code  
**5311 Auburn Rdg  
San Antonio, TX 78249**

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

**9** Employer (See instructions)  
**Retired**

Date  
**2/25/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Linebarger, Goggan, Blair, Sampson Law Office**

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

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

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

Employer (See instructions)  
**Linebarger, Goggan, Blair, Sampson Law Firm**

Date  
**2/25/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Davidson, Troilo, Ream, Garza**

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

Contributor address; City; State; Zip Code  
**601 NW Loop 410 #100  
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)  
**Committee for Civic Awareness**

Employer (See instructions)  
**Davidson, Troilo, Ream, Garza Law Firm**

Date  
**2/25/2019**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Heriberto Guerra Jr.**

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

Contributor address; City; State; Zip Code  
**1 Lone Star Pass #41  
San Antonio, TX 78264**

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

Employer (See instructions)  
**SAWS**

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**22 of 28**

2 FILER NAME  
**Manuel Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/27/2019**

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

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

6 Contributor address; City; State; Zip Code  
**7334 Carriage Lane  
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)  
**149 Figher Wing ANG**

9 Employer (See instructions)  
**U.S. Airforce**

Date  
**2/27/2019**

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

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

Contributor address; City; State; Zip Code  
**13295 Hunters View St.  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Food Retailer**

Employer (See instructions)  
**Self**

Date  
**3/1/2019**

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

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

Contributor address; City; State; Zip Code  
**4512 Elohi  
Austin, TX 78746**

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

Employer (See instructions)  
**UTSA Blvd LP**

Date  
**3/1/2019**

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

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

Contributor address; City; State; Zip Code  
**2995 Woodside Rd. #400  
Woodside, CA 94062**

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

Employer (See instructions)  
**Schumacher Interests Inc.**

**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.		<b>1</b> Total pages Schedule A1: <b>23 of 28</b>
<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/3/2019</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Joe Soliz</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>8915 Datapoint #45B</b> <b>San Antonio, TX 78229</b>	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Nurse</b>		<b>9</b> Employer (See instructions) <b>Retired</b>
Date <b>3/8/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Susan Lisk</b> ..... Contributor address; City; State; Zip Code <b>8922 Brae Bnd</b> <b>San Antonio, TX 78249</b>	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>3/8/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Orlando Velasquez</b> ..... Contributor address; City; State; Zip Code <b>12235 Vance Jackson</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Law Office of Orlando Velasquez</b>
Date <b>3/10/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Bracewell PAC</b> ..... Contributor address; City; State; Zip Code <b>711 Louisiana St. #2300</b> <b>Houston, TX 77002</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>PAC</b>		Employer (See instructions) <b>Bracewell PAC</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>24 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/10/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>John Gatens</b> ..... 6 Contributor address; City; State; Zip Code <b>8000 Donore Pl #51</b> <b>San Antonio, TX 78229</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>n/a</b>		9 Employer (See instructions) <b>n/a</b>
Date <b>3/10/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Catherine Mann</b> ..... Contributor address; City; State; Zip Code <b>8000 Donore Pl</b> <b>San Antonio, TX 78229</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
Date <b>3/11/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Michael Gibbs</b> ..... Contributor address; City; State; Zip Code <b>611 Hillsong</b> <b>San Antonio, TX 78258</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Whataburger</b>
Date <b>3/13/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rebecca Cedillo</b> ..... Contributor address; City; State; Zip Code <b>75 Longsord</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>Strategic Initiatives Consulting</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>25 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/13/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Eleanor Sprowl</b> ..... 6 Contributor address; City; State; Zip Code <b>4218 Apple Tree Woods</b> <b>San Antonio, TX 78249</b>	7 Amount of contribution (\$) <b>50.00</b>
8 Principal occupation / Job title (See instructions) <b>n/a</b>		9 Employer (See instructions) <b>n/a</b>
Date <b>3/14/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sylvia Loza</b> ..... Contributor address; City; State; Zip Code <b>7701 Wurzbach Rd #1008</b> <b>San Antonio, TX 78229</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>3/14/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mitsuko Ramos</b> ..... Contributor address; City; State; Zip Code <b>202 E. Houston #505</b> <b>San Antonio, TX 78205</b>	Amount of contribution (\$) <b>150.00</b>
Principal occupation / Job title (See instructions) <b>Gov. Relations</b>		Employer (See instructions) <b>Self Employed</b>
Date <b>3/15/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kent A. Mantle</b> ..... Contributor address; City; State; Zip Code <b>5726 Quail Cyn</b> <b>San Antonio, TX 78249</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>General Manager</b>		Employer (See instructions) <b>Elegant Ride</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>26 of 28</b>
<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/15/2019</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Charles Garza</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>13202 George Rd.</b> <b>San Antonio, TX 78230</b>	<b>7</b> Amount of contribution (\$) <b>150.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Owner</b>		<b>9</b> Employer (See instructions) <b>Spirits Business</b>
Date <b>3/15/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>John Atterbury</b> ..... Contributor address; City; State; Zip Code <b>24165 IH 10 #217</b> <b>San Antonio, TX 78257</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>AT&amp;T Retired</b>
Date <b>3/15/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Louis Barrios</b> ..... Contributor address; City; State; Zip Code <b>1102 Morgans Peak</b> <b>San Antonio, TX 78258</b>	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See instructions) <b>President/Owner</b>		Employer (See instructions) <b>Los Barrios Restaurants</b>
Date <b>3/15/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Schneider</b> ..... Contributor address; City; State; Zip Code <b>1580 S. Main St.</b> <b>Boerne, TX 78006</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Business Owner</b>		Employer (See instructions) <b>Self</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>27 of 28</b>
2 FILER NAME <b>Manuel Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/15/2019</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>George Mery</b> ..... 6 Contributor address; City; State; Zip Code <b>5157 Blanco Rd.</b> <b>San Antonio, TX 78216</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>President</b>		9 Employer (See instructions) <b>Elegant Ride</b>
Date <b>3/16/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Darril Wilburn</b> ..... Contributor address; City; State; Zip Code <b>15618 Portales Pass</b> <b>San Antonio, TX 78023</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Partner</b>		Employer (See instructions) <b>Honsha Associates</b>
Date <b>3/20/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ken Lawrence</b> ..... Contributor address; City; State; Zip Code <b>13307 Hunters Hollow St.</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired USAF</b>
Date <b>3/20/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Emil Swize</b> ..... Contributor address; City; State; Zip Code <b>3019 Elm Creek Place</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>Emil Swize &amp; Associates</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>28 of 28</b>
<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/22/2019</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jim Reed</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>7317 Ashton Pl</b> <b>San Antonio, TX 78229</b>	<b>7</b> Amount of contribution (\$) <b>200.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>President</b>		<b>9</b> Employer (See instructions) <b>San Antonio Medical Foundation</b>
Date <b>3/23/2019</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Narciso Cano</b> ..... Contributor address; City; State; Zip Code <b>9202 Standing Creek Lane</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>99.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>n/a</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

## 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 Manuel Pelaez		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)  7 Contributor address; City; State; Zip Code	8 Amount of Contribution \$ 9 In-kind contribution description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)  Contributor address; City; State; Zip Code	Amount of Contribution \$ In-kind contribution description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			



# PLEDGED CONTRIBUTIONS

## SCHEDULE B

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

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:  
1 of 1

2 FILER NAME  
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

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

9 Loan Amount (\$)

6 Is lender a  
financial  
institution?

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

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral  
☐ none

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

16 GUARANTOR  
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

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

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

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

Loan Amount (\$)

Is lender a  
financial  
institution?

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

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral  
☐ none

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

GUARANTOR  
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

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

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>1 of 8</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/1/2019</b>	<b>5</b> Payee name <b>Viva Politics</b>		
<b>6</b> Amount (\$) <b>4000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd. San Antonio, TX 78201</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	<b>(b)</b> Description <b>campaign management</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>1/2/2019</b>	Payee name <b>Roberto Trevino Campaign</b>		
Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>PO Box 15975 San Antonio, TX 78212</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	Description <b>contribution</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>1/10/2019</b>	Payee name <b>Viva Strategy Group</b>		
Amount (\$) <b>1961.93</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd. San Antonio, TX 78205</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>Fundraising</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>2 of 8</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/15/2019</b>	<b>5</b> Payee name <b>Prestige Printing</b>	
<b>6</b> Amount (\$) <b>218.67</b>	<b>7</b> Payee address; City; State; Zip Code <b>8 Burwood Lane San Antonio, TX 78216</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	<b>(b)</b> Description <b>palm cards</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>1/21/2019</b>	Payee name <b>Clear Channel Outdoor</b>	
Amount (\$) <b>2500.00</b>	Payee address; City; State; Zip Code <b>3714 North Pan Am Expressway San Antonio, TX 78219</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Billboard</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>1/30/2019</b>	Payee name <b>Total Wines</b>	
Amount (\$) <b>270.59</b>	Payee address; City; State; Zip Code <b>17530 La Cantera #103 San Antonio, TX 78257</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Events</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>3 of 8</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/30/2019</b>	<b>5</b> Payee name <b>Broadway Bank</b>		
<b>6</b> Amount (\$) <b>222.50</b>	<b>7</b> Payee address; City; State; Zip Code <b>1177 NE Loop 410 San Antonio, TX 78209</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>		<b>(b)</b> Description <b>Check/account research fee</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

  

Date <b>1/31/2019</b>	Payee name <b>Gabriels</b>		
Amount (\$) <b>274.61</b>	Payee address; City; State; Zip Code <b>10235 Ironside San Antonio, TX 78230</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>		Description <b>events</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

  

Date <b>2/1/2019</b>	Payee name <b>Viva Politics</b>		
Amount (\$) <b>4000.00</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd. San Antonio, TX 78201</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>		Description <b>campaign management</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>4 of 8</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/5/2019</b>	<b>5</b> Payee name <b>NW Democrats</b>		
<b>6</b> Amount (\$) <b>500.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>5403 Jackwood Dr. San Antonio, TX 78238</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>		<b>(b)</b> Description <b>contribution</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>2/7/2019</b>	Payee name <b>Lone Star Media</b>		
Amount (\$) <b>313.93</b>	Payee address; City; State; Zip Code <b>1011 N. Frio St. San Antonio, TX 78207</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Banners</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>2/7/2019</b>	Payee name <b>Lone Star Media</b>		
Amount (\$) <b>1027.18</b>	Payee address; City; State; Zip Code <b>1011 N. Frio St. San Antonio, TX 78207</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Signs and t-shirts</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>5 of 8</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/8/2019</b>	<b>5</b> Payee name <b>City of San Antonio</b>	
<b>6</b> Amount (\$) <b>100.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>115 Plaza De Armas San Antonio, TX 78205</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description <b>Filing fee</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>2/9/2019</b>	Payee name <b>The Well</b>	
Amount (\$) <b>456.57</b>	Payee address; City; State; Zip Code <b>5539 UTSA Blvd. San Antonio, TX 78249</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Campaign kick off</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>2/20/2019</b>	Payee name <b>Sign Busters</b>	
Amount (\$) <b>3312.00</b>	Payee address; City; State; Zip Code <b>PO Box 241018 San Antonio, TX 78224</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Sign set up &amp; maintenance</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>6 of 8</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/24/2019</b>	<b>5</b> Payee name <b>SkyLine Embroidery</b>	
<b>6</b> Amount (\$) <b>1420.78</b>	<b>7</b> Payee address; City; State; Zip Code <b>2044 Bedell Ave Del Rio, TX 78840</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	<b>(b)</b> Description <b>Baseball caps</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>3/1/2019</b>	Payee name <b>Viva Politics</b>	
Amount (\$) <b>4000.00</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd. San Antonio, TX 78201</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>campaign management</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>3/1/2019</b>	Payee name <b>Viva Strategy Group</b>	
Amount (\$) <b>2031.17</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd. San Antonio, TX 78205</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>Fundraising</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>7 of 8</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/8/2019</b>	<b>5</b> Payee name <b>Hills and Dales</b>	
<b>6</b> Amount (\$) <b>253.50</b>	<b>7</b> Payee address; City; State; Zip Code <b>15403 White Fawn Drive San Antonio, TX 78255</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Event Expense</b>	<b>(b)</b> Description <b>Fundraiser</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

  

Date <b>3/10/2019</b>	Payee name <b>Viva Strategy Group</b>	
Amount (\$) <b>2060.90</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd. San Antonio, TX 78205</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>Fundraising</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

  

Date <b>3/11/2019</b>	Payee name <b>Prestige Printing</b>	
Amount (\$) <b>1315.24</b>	Payee address; City; State; Zip Code <b>8 Burwood Lane San Antonio, TX 78216</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>Doorhangers</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>8 of 8</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/14/2019</b>	<b>5</b> Payee name <b>Los Barrios Restaurant</b>		
<b>6</b> Amount (\$) <b>237.91</b>	<b>7</b> Payee address; City; State; Zip Code <b>4223 Blanco Rd. San Antonio, TX 78212</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Event Expense</b>	<b>(b)</b> Description <b>Fundraiser</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name           Office sought           Office held			
Date <b>3/19/2019</b>	Payee name <b>Lone Star Media</b>		
Amount (\$) <b>1190.75</b>	Payee address; City; State; Zip Code <b>1011 N. Frio St. San Antonio, TX 78207</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>signs</b>  <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name           Office sought           Office held			
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description	
		<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name           Office sought           Office held			

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# UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

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

# 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  
**Manuel Pelaez**

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

**4** Date

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

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

**7** Description of investment

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

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

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# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F4: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Manuel Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$ 0</b>
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<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

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

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

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

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

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

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

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

**SCHEDULE G**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

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

  

Date	Payee name		
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address;                      City;      State;      Zip Code		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)  Description <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH      Candidate / Officeholder name      Office sought      Office held			

  

Date	Payee name		
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address;                      City;      State;      Zip Code		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)  Description <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH      Candidate / Officeholder name      Office sought      Office held			

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

## SCHEDULE H

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

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

**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.

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

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

**SCHEDULE K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Manuel 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**

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

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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

C/OH NAME  
**Manuel Pelaez**

Filer ID (Ethics Commission Filers)

## SIGNATURE

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

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

## FILER WHO IS NOT AN OFFICEHOLDER

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

### A. CAMPAIGN FUNDS

Check only one:

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

### B. ASSETS

Check only one:

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

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

## OFFICEHOLDER

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

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

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