CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete tl		Ethics Commission Filers)	2 Total pages fi 65	led:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRS		MI	OFFICE US	SE ONLY
NAME	NICKNAME LAST		SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUIT 3522 Paesano Pkwy #301 San Antonio TX 78231	TE#; CITY; S	TATE; ZIP CODE		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUM () -	MBER EXTE	ENSION	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR FIRS Mr Cha	· ·	MI	Receipt #	Amount \$
NAME	NICKNAME LAST		SUFFIX	Date Processed	
	Tayl	lor		Date Imaged	
TREASURER ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER PHONE	3115 Pinto Pass San Antonio TX 78247 AREA CODE PHONE NUM (210) 875-874		ENSION		
9 REPORT TYPE	30th Day Before Gener	ral Election			
10 PERIOD COVERED	Month Day	•	Month JGH 3/2	Day Year 27/2023	
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year 5/6/2023	Primary Run	Description		
12 OFFICE	OFFICE HELD (if any) Council District 8		13 OFFICE SOUGHT Council Distri		
		GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Manny Pelaez				15 Filer II) (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	COMMITTEES TO SUI THE CANDIDATE'S	PPORT THE CANDIDATE OR OFFICEHOLDER'S		TURES MAY CANDIDATES	ITURES MADE BY POLITICAL HAVE BEEN MADE WITHOUT AND OFFICEHOLDERS ARE
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRE	SS		
	SPECIFIC				
Additional Dance		COMMITTEE CAMPA	IGN TREASURER NAME		
Additional Pages		COMMITTEE CAMPA	IGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	1. PLEDGES, LO	EMIZED POLITICAL CONT DANS, OR GUARANTEES ONS MADE ELECTRONIC		\$	0
		TICAL CONTRIBUTIONS N PLEDGES, LOANS, OR	GUARANTEES OF LOANS)	\$	68320.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.		\$	501.86	
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	40679.63
CONTRIBUTION BALANCE	5. TOTAL POLIT		MAINTAINED AS OF THE LAST DAY	\$	74032.60
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	0
18 AFFIDAVIT					
			I swear, or affirm, under penalty of is true and correct and includes all me under Title 15, Election Code.		
			* * * Electronically		
AFFIX NOTARY STAM	P / SEAL ABOVE		Signature of Candidat	e or Officeho	older
Sworn to and subscribe of April ,	•	•		this t	he 7th day
Signature of officer adn	ninistering oath	Printed name of	officer administering oath	Title	of officer administering oath

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19	FILER NAME	20 Filer ID (Ethics Commission Filers)
	Manny Pelaez	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 68320.00
2.	X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUT	ONS \$0
3.	X SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	X SCHEDULE E: LOANS	\$ 0
5.	X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL	CONTRIBUTIONS \$ 36986.74
6.	X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	X SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITI	CAL CONTRIBUTIONS \$0
8.	X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	X SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL	FUNDS \$3692.89
10.	X SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS	TO A BUSINESS OF C/OH \$0
11.	X SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLIT	CAL CONTRIBUTIONS \$0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTR	RIBUTIONS \$0

SCHEDULE A1

	7	The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 1 of 36	
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)	
4	Date 2/13/2023	5 Full name of contributor ut-of-state P/ NuStar PAC	AC (ID#)	7 Amount of contribution (\$) 500.00	
		6 Contributor address; City; S PO Box 781609 San Antonio, TX 78278	State; Zip Code		
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru pac	ictions)	
	Date 2/14/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 50.00	
		Contributor address; City; S 6963 Willow Oak Dr San Antonio, TX 78249			
Principal occupation / Job title (See instructions) software engineer			Employer (See instructions) USAA		
Date Full name of contributor □ out-of-state F 2/14/2023 Tamara Benavides		AC (ID#)	Amount of contribution (\$) 500.00		
		Contributor address; City; S 17135 Darlington Run San Antonio, TX 78247	State; Zip Code		
	Principal occupa President	ation / Job title (See instructions)	Employer (See instru TamBen Enterprises	-	
	Date 2/14/2023	Judith Saucedo	AC (ID#)	Amount of contribution (\$) 25.00	
	Principal occupa	San Antonio, TX 78230 ation / Job title (See instructions)	Employer (See instru	uctions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

	1	he Instruction Guide explains how t	1 Total pages Schedule A1: 2 of 36		
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 2/15/2023	5 Full name of contributor Stephanie Jones	out-of-state P	AC (ID#)	7 Amount of contribution (\$) 50.00
		6 Contributor address; 000 0000 San Antonio, TX 78230	City;	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instru	ictions)
	Date 2/15/2023	Full name of contributor David Christian	Out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 25219 Doral Crest San Antonio, TX 78260	City;	State; Zip Code	
		Employer (See instru	ictions)		
	Date 2/15/2023	Full name of contributor Joanna Weidman	Out-of-state P	AC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; 7 Jordans Wood Cir San Antonio, TX 78248	City;		
	Principal occupa Executive	tition / Job title (See instructions)	Employer (See instructions) NuStar		ictions)
	Date 2/15/2023	Full name of contributor Pilar Castaneda	out-of-state P	AC (ID#)	Amount of contribution (\$) 50.00
		Contributor address; 18015 Yantis Way San Antonio, TX 78247	City;	State; Zip Code	
	Principal occupa EHS director	tition / Job title (See instructions)		Employer (See instru Yantis	ictions)

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

SCHEDULE A1

	Т	he Instruction Guide explains how t	1 Total pages Schedule A1: 3 of 36		
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 2/15/2023	5 Full name of contributor Mary Rose Brown	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; 48 Vineyard San Antonio, TX 78257	City;	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru NuStar	uctions)
	Date 2/16/2023	Full name of contributor Mr.& Mrs. Mark Rodriguez	out-of-state P	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 1122 Colorado #2399 Austin, TX 78701	City;	State; Zip Code	
Principal occupation / Job title (See instructions) attorney		Employer (See instru	uctions)		
	Date 2/16/2023	Full name of contributor Rick Cavender	out-of-state P/	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 2105 W I-10 San Antonio, TX 78257	City;	State; Zip Code	
	Principal occupa Business Owne	tion / Job title (See instructions) er		Employer (See instru Cavender Auto	uctions)
	Date 2/18/2023	Full name of contributor Richard Thum	Out-of-state P/	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 9806 Huebner Rd San Antonio, TX 78240	City;		
	Principal occupa	tion / Job title (See instructions) gement		Employer (See instru business owner	uctions)

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SCHEDULE A1

	т	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 2/18/2023	5 Full name of contributor ☐ out-of-state PA Michael Kennick	.C (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; City; S 8323 Magdalena Run Helotes, TX 78023	tate; Zip Code	
8	Principal occupa Engineer	tion / Job title (See instructions)	9 Employer (See instru- U.S. Airforce	ctions)
	Date 2/20/2023	Full name of contributor	.C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S 602 Camp Bullis Rd San Antonio, TX 78257	tate; Zip Code	
Principal occupation / Job title (See instructions) Athena Domain Inc			Employer (See instrubusiness owner	ctions)
	Date Full name of contributor ☐ out-of-state PAC 2/21/2023 Linebarger Goggan Blair & Simpson LLP		.C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S PO Box 17428 Austin, TX 78760	tate; Zip Code	
	Principal occupa attorneys	tion / Job title (See instructions)	Employer (See instru	ctions)
	Date 2/22/2023	Full name of contributor	.C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 108 River Oaks Wimberley, TX 78676	State; Zip Code	
	Principal occupa Engineering	tion / Job title (See instructions)	Employer (See instrubusiness owner	ctions)

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SCHEDULE A1

	-	The Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 5 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 2/22/2023	5 Full name of contributor Mitch Meyer	out-of-state P	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; 9 Penny Lane San Antonio, TX 78209	City;	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instrubusiness owner	uctions)
	Date 2/23/2023	Full name of contributor Alberto Milmo	☐ out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 514 El Paso San Antonio, TX 78207	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Milmo Group			Employer (See instru business owner	uctions)	
	Date 2/23/2023	Full name of contributor April Ancira	Out-of-state PAC (ID#)		Amount of contribution (\$) 500.00
		Contributor address; 31305 Keeneland Dr Boerne, TX 78015	City;	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instructions) Ancira Auto		uctions)
	Date 2/23/2023	Full name of contributor Jason Thompson	out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 31305 Keeneland Dr Boerne, TX 78015	City;	State; Zip Code	
Principal occupation / Job title (See instructions) GM			Employer (See instru	uctions)	

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SCHEDULE A1

	1	The Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1: 6 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 2/23/2023	5 Full name of contributor Bart Swider	out-of-state P	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; 25 Champion Trail San Antonio, TX 78258	City;	State; Zip Code	
8	Principal occupa President	ation / Job title (See instructions)		9 Employer (See instru Chesmar Homes	uctions)
	Date 2/23/2023	Full name of contributor Carson Trainer	out-of-state Pa	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 18 Cheslyn San Antonio, TX 78232	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Land Manager			Employer (See instru Chesmar Homes	uctions)	
	Date 2/26/2023	Full name of contributor Paul Weir	out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 128 Mery Trail San Antonio, TX 78232	City;		
	Principal occupa Owner	ation / Job title (See instructions)	Employer (See instructions) Longhorn Cafe		uctions)
	Date 2/27/2023	Full name of contributor Eman & Maged Mina	out-of-state P	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 94 Champion Cliff San Antonio, TX 78258	City;	State; Zip Code	
	Principal occupa Doctor	ation / Job title (See instructions)		Employer (See instru	uctions)

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

SCHEDULE A1

	т	he Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1: 7 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 2/28/2023	5 Full name of contributor Phil Watkins	☐ out-of-state Pa	AC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; 745 Tuxedo Ave. San Antonio, TX 78209	City;	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru Phil Watkins PC	ictions)
	Date 2/28/2023	Full name of contributor Roberta Prior	☐ out-of-state P	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 000 0000 San Antonio, TX 00000	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Community			Employer (See instructions) n/a		
	Date 2/28/2023	Full name of contributor James B Smith	Out-of-state PAC (ID#)		Amount of contribution (\$) 250.00
		Contributor address; 112 Pecan St #1800 San Antonio, TX 78205	City;	State; Zip Code	
	Principal occupa attorney	tion / Job title (See instructions)		Employer (See instru Dykema Gossett	actions)
	Date 2/28/2023	Full name of contributor Jeff Czar	out-of-state Pa	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 307 Huntington Shavano Park, TX 78231	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Partner		Employer (See instructions) King Fish LLC		ictions)	

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SCHEDULE A1

	,	The Instruction Guide explains how to o	complete this	form.	1 Total pages Schedule A1: 8 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 2/28/2023	5 Full name of contributor Valentina C Pelaez	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; 5410 Montbury Lane Katy, TX 77450	City; S	State; Zip Code	
8	Principal occup student	ation / Job title (See instructions)		9 Employer (See instru	ictions)
	Date 2/28/2023	Full name of contributor Shad Schmid	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 318 Waxberry Trail San Antonio, TX 78256	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) Real Estate			Employer (See instru King Fish	uctions)	
	Date Full name of contributor □ out-of-state PAC (ID#		AC (ID#)	Amount of contribution (\$) 25.00	
		Contributor address; 443 Pueblo Pintado Helotes, TX 78023	City; S	State; Zip Code	
	Principal occup Realtor	ation / Job title (See instructions)		Employer (See instru Found IT LLC	uctions)
	Date 2/28/2023	Full name of contributor Fernando & Norma Reyes	out-of-state PA	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 123 Lexington Ave #1201 San Antonio, TX 78205	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) Manager			Employer (See instru Reyes Automotive	uctions)	

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SCHEDULE A1

	1	The Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1: 9 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 2/28/2023	5 Full name of contributor Johnny Hernandez	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; 411 E Cevallos San Antonio, TX 78204	City;	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instru Self	ictions)
	Date 2/28/2023	Full name of contributor Jessica Stein	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 411 E Cevallos San Antonio, TX 78204	City;	State; Zip Code	
Principal occupation / Job title (See instruction District sales		ation / Job title (See instructions)	Employer (See instructions) Mars Candy		ictions)
Date Full name of contributor 2/28/2023 Patrick Shearer			Out-of-state PAC (ID#)		Amount of contribution (\$) 500.00
		Contributor address; PO Box 23129 San Antonio, TX 78223	City;	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)		Employer (See instru self	ictions)
	Date 3/1/2023	Full name of contributor Keith Mery	Out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 5157 Blanco Rd #E San Antion, TX 78216	City;	State; Zip Code	
	Principal occupa Manager	ation / Job title (See instructions)		Employer (See instru Elegant Limosine	ictions)

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 10 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/1/2023	5 Full name of contributor ☐ out-of-state PA Teryn Mery	C (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; City; S 5157 Blanco Rd #E San Antonio, TX 78216	tate; Zip Code	
8	Principal occupa Marketing Direct	ation / Job title (See instructions)	9 Employer (See instru Elegant Limousine	actions)
	Date 3/1/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S PO Box 696000 San Antonio, TX 78269	tate; Zip Code	
Principal occupation / Job title (See instructions) Employer (See in Valero			Employer (See instru Valero	ictions)
	Date 3/1/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 270 Terrell Rd San Antonio, TX 78209	tate; Zip Code	
	Principal occupa Real Estate	ition / Job title (See instructions)	Employer (See instru Self	ictions)
	Date 3/1/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; S 21105 IH 10 West San Antonio, TX 78257	state; Zip Code	
Principal occupation / Job title (See instructions) business owner		Employer (See instru self	actions)	

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SCHEDULE A1

	7	he Instruction Guide explains how to complete t	nis form.	1 Total pages Schedule A1: 11 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/1/2023	5 Full name of contributor ☐ out-of-state Paul Rosencrans	e PAC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; City; 142 Sentinel Drive Madera, CA 93636	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions) 9 Employer (See instructions) Fresno Unified School District		
	Date 3/1/2023	Full name of contributor ut-of-state	PAC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; 439 Calumet Place San Antonio, TX 78209	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	uctions)
	Date 3/1/2023	Full name of contributor ut-of-state	PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 8000 Donore Place #50 San Antonio, TX 78229	State; Zip Code	
	Principal occupa retired	ation / Job title (See instructions)	Employer (See instru	uctions)
	Date 3/2/2023	Full name of contributor ut-of-state	PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 8118 Datapoint San Antonio, TX 78229	State; Zip Code	
Principal occupation / Job title (See instructions) attorney		ation / Job title (See instructions)	Employer (See instru	uctions)

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

SCHEDULE A1

	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 12 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/2/2023	5 Full name of contributor ut-of-state PAG Sylvia Loza	C (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; City; Si 7701 Wurzbach #1008 San Antonio, TX 78229	tate; Zip Code	
8	Principal occup	ation / Job title (See instructions)	9 Employer (See instru n/a	ctions)
	Date 3/2/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; Si 106 S St Mary St #200 San Antonio, TX 78205	tate; Zip Code	
	Principal occup attorney	ation / Job title (See instructions)	Employer (See instru Braubach Law Firm	ctions)
	Date 3/2/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; Si 10855 W IH 10 San Antonio, TX 78230	tate; Zip Code	
	Principal occup Owner	ation / Job title (See instructions)	Employer (See instru Ancira Auto	ctions)
	Date 3/2/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; Si 1202 W Bitters San Antonio, TX 78216	tate; Zip Code	
Principal occupation / Job title (See instructions) Philantropist Employer (See instructions) Self			ctions)	

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SCHEDULE A1

	Т	he Instruction Guide explains how t	1 Total pages Schedule A1: 13 of 36		
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/2/2023	5 Full name of contributor David McGee	out-of-state Pa	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; 11603 Mill Rock Rd San Antonio, TX 78230	City;	State; Zip Code	
8	Principal occupa Banker/Attorne	ation / Job title (See instructions) y		9 Employer (See instru Amegy Bank of Tex	•
	Date 3/3/2023	Full name of contributor Rene Capistran	Out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 3512 La Soledad Court Brownsville, TX 78250	City;	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)		Employer (See instru Noble Builders	uctions)
	Date 3/5/2023	Full name of contributor Melinda Rodriguez	out-of-state P	AC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; 6215 Via La Cantera #473 San Antonio, TX 78256	City;		
	Principal occupa VP Business De	tion / Job title (See instructions) evelopment		Employer (See instru Lifecare	uctions)
	Date 3/5/2023	Full name of contributor Yen Yan	out-of-state P	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 122 Calumet Place San Antonio, TX 78209	City;	State; Zip Code	
	Principal occupa Real estate bro	tion / Job title (See instructions)		Employer (See instru	uctions)

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

SCHEDULE A1

	1	he Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 14 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/5/2023	5 Full name of contributor ☐ out-of-state Rashin Mazaheri	PAC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; City; 106 S St Marys San Antonio, TX 78212	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru Dreyer & Mazaheri	uctions)
	Date 3/5/2023	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; City; 1012 Hedgestone Dr San Antonio, TX 78258	State; Zip Code	
	Principal occupa Manager	ation / Job title (See instructions)	Employer (See instru Bullet Venture LLC	uctions)
	Date 3/6/2023	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 8258 Pimlico Lane Boerne, TX 78015	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru Thomas J Henry	uctions)
	Date 3/6/2023	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 1500 Fawn Bluff San Antonio, TX 78248	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	uctions)

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SCHEDULE A1

	T	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 15 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/6/2023	5 Full name of contributor ☐ out-of-state P. William Greehey	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; City; PO Box 780489 San Antonio, TX 78278	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru Valero	ictions)
	Date 3/7/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 2717 Martin St San Antonio, TX 78207	State; Zip Code	
	Principal occupa attorney	ation / Job title (See instructions)	Employer (See instru self	ictions)
	Date 3/7/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 341 Redwood St San Antonio, TX 78209	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)	Employer (See instru	uctions)
	Date 3/7/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 7334 Blanco #200 San Antonio, TX 78216	State; Zip Code	
	Principal occupa President	ation / Job title (See instructions)	Employer (See instru Clermont LLC	ictions)

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SCHEDULE A1

	т	he Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 16 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/7/2023	5 Full name of contributor Jim Reed	☐ out-of-state PA	C (ID#)	7 Amount of contribution (\$) 250.00
		6 Contributor address; 7317 Ashton Place San Antonio, TX 78229	City; S		
8	Principal occupa President	ation / Job title (See instructions)		9 Employer (See instru SA Medical Foundat	-
	Date 3/7/2023	Full name of contributor James & Lora Watts	out-of-state PA	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 119 Umbria San Antonio, TX 78230	City; S	itate; Zip Code	
Principal occupation / Job title (See instructions) Employer (See in business owner self			Employer (See instru	ctions)	
	Date 3/7/2023	Full name of contributor Kevin & Michelle Klenke	☐ out-of-state PA	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 4423 Meredith Woods San Antonio, TX 78249		tate; Zip Code	
	Principal occupa	r Job title (See instructions)		Employer (See instru	ctions)
	Date 3/7/2023	Full name of contributor Kausi Subramaniam	☐ out-of-state PA	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 11 San Isidro San Antonio, TX 78261	City; S	tate; Zip Code	
	Principal occupation / Job title (See instructions) Dance instructor			Employer (See instru	ctions)

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SCHEDULE A1

	т	he Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 17 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/7/2023	5 Full name of contributor Damandeep Kahlon	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; 1801 Buttonwood St #704 Philadelphia, PA 19130	City; S	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru	ctions)
	Date 3/7/2023	Full name of contributor Parachur Nivedita	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 714 Chios Oak San Antonio, TX 78230	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) business owner Employer (See instructions) self					ctions)
	Date 3/7/2023	Full name of contributor Ankur Segon	☐ out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 4775 Old Church Rd Brookfield, WI 53045	City; S	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)		Employer (See instru	ctions)
	Date 3/7/2023	Full name of contributor Haris Tahir	Out-of-state PA	NC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 13538 Barsan Rd San Antonio, TX 78249	City; S	State; Zip Code	
	Principal occupation / Job title (See instructions) student			Employer (See instructions) family business	

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

SCHEDULE A1

	Т	he Instruction Guide explains how to complete this	orm.	1 Total pages Schedule A1: 18 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/7/2023	5 Full name of contributor	C (ID#)	7 Amount of contribution (\$) 250.00
		6 Contributor address; City; S 601 N Loop 410 #100 San Antonio, TX 78216	tate; Zip Code	
8	Principal occupa attorney	ation / Job title (See instructions)	9 Employer (See instru Davidson, Troilo, Re	ctions) eam, Garza Law Firm
	Date 3/7/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S 20006 Horizon Way San Antonio, TX 78258	tate; Zip Code	
	Principal occupa Business Devel	ation / Job title (See instructions)	Employer (See instru Wells Fargo	ctions)
	Date Full name of contributor ☐ out-of-state PAC (ID#) 3/7/2023 Ricardo Arzac		C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S 17595 Blanco Rd San Antonio, TX 78232	tate; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru Corzac	ctions)
	Date 3/8/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 100.00
	Principal occupa Community & U	ation / Job title (See instructions)	Employer (See instru	ctions)

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SCHEDULE A1

	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: 19 of 36
2	FILER NAME Manny Pelaez				3	Filer ID (Ethics Commission Filers)
4	Date 3/8/2023	5 Full name of contributor Ajay Tejwani	out-of-state Pr	AC (ID#)	7	Amount of contribution (\$) 100.00
8	Principal occupa	San Antonio, TX 78255 ation / Job title (See instructions) sultant		9 Employer (See instru	uctio	ons)
	Date 3/8/2023	Full name of contributor Jorge Herrera	Out-of-state P/	AC (ID#)		Amount of contribution (\$) 500.00
		Contributor address; 1800 W Commerce St San Antonio, TX 78207	City;	State; Zip Code		
	Principal occupa	ation / Job title (See instructions)		Employer (See instru Herrera Law firm	uctio	ons)
	Date 3/8/2023	Full name of contributor Matthew Starr	out-of-state P	AC (ID#)		Amount of contribution (\$) 500.00
		Contributor address; 7334 Blanco Rd #200 San Antonio, TX 78216	City;	State; Zip Code		
	Principal occupa	ation / Job title (See instructions)		Employer (See instructions) self		ons)
	Date 3/8/2023	Full name of contributor Walter & Pam Embrey	out-of-state P	AC (ID#)		Amount of contribution (\$) 1000.00
		Contributor address; 405 Wiltshire San Antonio, TX 78209	City;	State; Zip Code		
	Principal occupa	otion / Job title (See instructions)		Employer (See instru	uctio	ons)

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SCHEDULE A1

	1	The Instruction Guide explains how to complete this	1 Total pages Schedule A1: 20 of 36		
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)	
4	Date 3/8/2023	5 Full name of contributor ☐ out-of-state PA Clayton Estep	AC (ID#)	7 Amount of contribution (\$) 500.00	
		6 Contributor address; City; State; Zip Code 15403 White Fawn San Antonio, TX 78255			
8	Principal occupa Director of Ope	ation / Job title (See instructions) rations	9 Employer (See instru Hills and Dales Iceh	•	
	Date 3/8/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 500.00	
		Contributor address; City; S 5103 Newcastle Lane San Antonio, TX 78249	State; Zip Code		
Principal occupation / Job title (See instructions) Employer (See instructions) attorney self				actions)	
	Date 3/8/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 500.00	
		Contributor address; City; S 18 Devon Wood San Antonio, TX 78257	State; Zip Code		
	Principal occupa Doctor	ation / Job title (See instructions)	Employer (See instru Legacy Women's He		
	Date 3/8/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 100.00	
		Contributor address; City; S 8182 Two Winds San Antonio, TX 78255	State; Zip Code		
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	octions)	

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SCHEDULE A1

	1	he Instruction Guide explains how to compl	ete this form.	1 Total pages Schedule A1: 21 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/8/2023	5 Full name of contributor ☐ out-of Gerald Lee	f-state PAC (ID#)	7 Amount of contribution (\$) 250.00
		6 Contributor address; Cit 111 Austin Hwy San Antonio, TX 78209	ty; State; Zip Code	
8	Principal occupa Consultant	ation / Job title (See instructions)	9 Employer (See instru Andrade-Van de Pu	•
	Date 3/8/2023	Full name of contributor	f-state PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; Cit 4555 Krueger Rd Washington, TX 77880	ty; State; Zip Code	
		Employer (See instru Place USA	uctions)	
	Date 3/8/2023	Full name of contributor	f-state PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; Cit 7323 Eagle Ledge San Antonio, TX 78249	ty; State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru Parra & Co.	uctions)
	Date 3/8/2023	Full name of contributor ut-of	f-state PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; Cit 11618 Wood Hbr San Antonio, TX 78249	ty; State; Zip Code	
Principal occupation / Job title (See instructions) general manager		Employer (See instru Habitat Constructio	•	

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SCHEDULE A1

		he Instruction Guide explains how to comp	form.	1 Total pages Schedule A1: 22 of 36	
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/8/2023	5 Full name of contributor ☐ out- Chad Taylor	of-state PA	.C (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; C 17595 Blanco Rd #200 San Antonio, TX 78260	 City; S	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instru Seville Partners LLC	
	Date 3/8/2023	Full name of contributor	of-state PA	.C (ID#)	Amount of contribution (\$) 200.00
		Contributor address; C 26127 Lost Creek Way Boerne, TX 78015	 City; S	ctate; Zip Code	
Principal occupation / Job title (See instructions) Property management			Employer (See instru Capstone Real Estat		
	Date 3/8/2023	Full name of contributor	of-state PA	.C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; C 3318 Sable Creek San Antonio, TX 78259	 Sity; S	State; Zip Code	
	Principal occupa Chairman	ntion / Job title (See instructions)		Employer (See instru Welcome Tech	ctions)
	Date 3/8/2023	Full name of contributor	of-state PA	.C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; C 29 Bristol Green San Antonio, TX 78209	 City; S	State; Zip Code	
	Principal occupa	ation / Job title (See instructions) r		Employer (See instru self	ctions)

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SCHEDULE A1

	1	The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 23 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/8/2023	5 Full name of contributor ut-of-state PA Marta Pelaez	C (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; City; S 2 Daventry Lane San Antonio, TX 78257	tate; Zip Code	
			9 Employer (See instru- Family Violence Pres	-
	Date 3/8/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 9103 Mellbrook St San Antonio, TX 78230	tate; Zip Code	
Principal occupation / Job title (See instructions) Emplo attorney self			Employer (See instru	ctions)
	Date 3/8/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S 13426 Baldwin Ridge San Antonio, TX 78249	tate; Zip Code	
	Principal occupa	r See instructions)	Employer (See instru	ctions)
	Date 3/8/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 422 Tower Drive San Antonio, TX 78232	tate; Zip Code	
	Principal occupa	r (See instructions)	Employer (See instru	ctions)

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SCHEDULE A1

		The Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 24 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/8/2023	5 Full name of contributor		AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; 3 Woltwood San Antonio, TX 78223	City;	State; Zip Code	
8	Principal occup	ation / Job title (See instructions)		9 Employer (See instru Mosaic	uctions)
	Date 3/8/2023	Full name of contributor Javier Tristan	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 966 Calico Garden San Antonio, TX 78258	City;	State; Zip Code	
	Principal occup business owne	ation / Job title (See instructions) er		Employer (See instru self	uctions)
	Date Full name of contributor □ out-of-state PAC (ID#) 3/8/2023 Clifton Douglass		AC (ID#)	Amount of contribution (\$) 500.00	
		Contributor address; 606 Garraty Rd San Antonio, TX 78209	City;	State; Zip Code	
Principal occupation / Job title (See instructions) business owner			Employer (See instru	uctions)	
	Date 3/8/2023	Full name of contributor Jennifer Teeter	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 7501 Loasa CV Austin, TX 78735	City;	State; Zip Code	
	Principal occup business	ation / Job title (See instructions)		Employer (See instru self	uctions)

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SCHEDULE A1

	٦	The Instruction Guide explains how to complete this	1 Total pages Schedule A1: 25 of 36			
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)		
4	Date 3/8/2023	5 Full name of contributor ☐ out-of-state PA Brian Teeter		7 Amount of contribution (\$) 500.00		
		6 Contributor address; City; S 7501 Loasa CV Austin, TX 78735	state; Zip Code			
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru	uctions)		
	Date 3/8/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 250.00		
		Contributor address; City; S 9222 Honey Creek Dr San Antonio, TX 78230	state; Zip Code			
			Employer (See instru Francis Energy	actions)		
	Date 3/8/2023	Full name of contributor	.C (ID#)	Amount of contribution (\$) 500.00		
		Contributor address; City; S 9939 Fredericksburg Rd #719 San Antonio, TX 78240	state; Zip Code			
	Principal occupa	ation / Job title (See instructions) r	Employer (See instru self	uctions)		
	Date 3/8/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 500.00		
	Contributor address; City; State; Zip Code 2019 Flint Oak San Antonio, TX 78248					
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	ictions)		

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 2 FILER NAME Manny Pelaez 4 Date 3/8/2023	on Filers)	
Manny Pelaez 4 Date 3/8/2023)	
Second Principal occupation / Job title (See instructions) City; State; Zip Code September Sep		
62 Serena Vista San Antonio, TX 78251 8 Principal occupation / Job title (See instructions) retired Date 3/8/2023 Full name of contributor Espinoza Law Firm Contributor address; 10202 Heritage St San Antonio, TX 78216 Principal occupation / Job title (See instructions) Employer (See instructions) Amount of contribution (\$) 500.00 City; State; Zip Code 10202 Heritage St San Antonio, TX 78216 Employer (See instructions))	
Tetired Date Solution Full name of contributor Out-of-state PAC (ID#) Amount of contribution (\$) Solution)	
3/8/2023 Espinoza Law Firm 500.00 Contributor address; City; State; Zip Code 10202 Heritage St San Antonio, TX 78216 Principal occupation / Job title (See instructions) Employer (See instructions))	
10202 Heritage St San Antonio, TX 78216 Principal occupation / Job title (See instructions) Employer (See instructions)		
	Employer (See instructions) Espinoza Law Firm	
Date Full name of contributor Out-of-state PAC (ID#) Amount of contribution (\$) 1000.00)	
Contributor address; City; State; Zip Code 325 Sonterry Blvd #210 San Antonio, TX 78258		
Principal occupation / Job title (See instructions) business owner Employer (See instructions) self		
Date Signature of contributor)	
Contributor address; City; State; Zip Code 13514 Shelbritt Rd San Antonio, TX 78249		
Principal occupation / Job title (See instructions) Employer (See instructions) retired n/a		

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SCHEDULE A1

	1	he Instruction Guide explains how	1 Total pages Schedule A1: 27 of 36		
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/8/2023	5 Full name of contributor Elizabeth Braden	out-of-state P	AC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; 918 Foxton San Antonio, TX 78260	City;	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru	uctions)
	Date 3/8/2023	Full name of contributor Rene Capistran	☐ out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 3512 La Soledad Court Brownsville, TX 78520	City;	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)		Employer (See instru Noble Texas	uctions)
	Date 3/8/2023	Full name of contributor Hope Andrade	out-of-state P	AC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; 123 Lexington #1604 San Antonio, TX 78205	City;	State; Zip Code	
	Principal occupa Business owne	tion / Job title (See instructions) r		Employer (See instru Andrade-Van de Pu	•
	Date 3/8/2023	Full name of contributor Jacques Braha	out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 10003 NW Military #2205 San Antonio, TX 78231	City;	State; Zip Code	
	Principal occupa Founding Partn	er		Employer (See instru	uctions)

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SCHEDULE A1

	7	he Instruction Guide explains how to complete	1 Total pages Schedule A1: 28 of 36	
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/8/2023	5 Full name of contributor		7 Amount of contribution (\$) 500.00
		6 Contributor address; City; 5612 Paradise Ridge Austin, TX 78731	State; Zip Code	
 8 Principal occupation / Job title (See instructions) 9 Employer (See instructions) Business owner Land Use Solution 			-	
	Date 3/8/2023	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 7510 Quail Run Dr San Antonio, TX 78209	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	uctions)
	Date 3/8/2023	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 2442 Enfield Grove Dr San Antonio, TX 78231	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	uctions)
	Date 3/8/2023	Full name of contributor Out-of-sta	te PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 21218 Harvest HLS San Antonio, TX 78258	State; Zip Code	
	Principal occupa Business owne	rs	Employer (See instru	uctions)

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SCHEDULE A1

		The Instruction Guide explains how to co	emplete this fo	orm.	1 Total pages Schedule A1: 29 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/8/2023	5 Full name of contributor	out-of-state PA0	C (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; 5826 IH 10 Frontage rd San Antonio, TX 78201	City; St	ate; Zip Code	
8	Principal occup attorneys	ation / Job title (See instructions)		9 Employer (See instru Begum Pelaez Prada	
	Date 3/8/2023	Full name of contributor	out-of-state PA0	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 2047 Rigsby Ave San Antonio, TX 78210	City; St	ate; Zip Code	
	Principal occup business owne	ation / Job title (See instructions) er		Employer (See instru self	ctions)
	Date 3/9/2023	Full name of contributor 🗆 o	out-of-state PA0	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 727 Elizabeth Rd San Antonio, TX 78209	City; Si	ate; Zip Code	
	Principal occup President	ation / Job title (See instructions)		Employer (See instru Feik Enterprises	ctions)
	Date 3/9/2023	Full name of contributor	out-of-state PA0	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 5410 Montbury Lane Katy, TX 77450	City; St	ate; Zip Code	
	Principal occup Director	ation / Job title (See instructions)		Employer (See instru	ctions)

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SCHEDULE A1

	٦	The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 30 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/10/2023	5 Full name of contributor ☐ out-of-state P. Harold McCall	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; City; 5707 IH 10 west San Antonio, TX 78201	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru Wayne Wright LLP	ctions)
	Date 3/13/2023	Full name of contributor ut-of-state P. Wayne Wright	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 5707 W IH 10 San Antonio, TX 78201	State; Zip Code	
	Principal occupa Attorney	ation / Job title (See instructions)	Employer (See instru Wayne Wright	ctions)
	Date 3/13/2023	Full name of contributor ut-of-state P. Beatrice Wright	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 10403 Metacomet St San Antonio, TX 78230	State; Zip Code	
	Principal occupa Office assistan	ation / Job title (See instructions) t	Employer (See instru Wayne Wright	ctions)
	Date 3/13/2023	Full name of contributor ut-of-state P. Caitlin Wright	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 10403 Metacomet St San Antonio, TX 78230	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	ctions)

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SCHEDULE A1

	1	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 31 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/13/2023	5 Full name of contributor	C (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; City; S 10403 Metacomet San Antonio, TX 78230	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru HEB	ctions)
	Date 3/13/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; S 335 Country Wood Dr San Antonio, TX 78216	State; Zip Code	
	Principal occupa Consultant	ation / Job title (See instructions)	Employer (See instru- Aldrete Strategic Pa	•
	Date 3/13/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 25.00
		Contributor address; City; S 7318 Stonewall Hi San Antoinio, TX 78256	State; Zip Code	
	Principal occupa faculty	ation / Job title (See instructions)	Employer (See instru Alamo Colleges	ctions)
	Date 3/15/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S 11315 Chapalote Ave San Antonio, TX 78249	State; Zip Code	
	Principal occupa Respiratory Spe	ation / Job title (See instructions) ecialist	Employer (See instru- AstraZeneca	ctions)

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SCHEDULE A1

	1	he Instruction Guide explains how to compl	ete this f	orm.	1 Total pages Schedule A1: 32 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/16/2023	5 Full name of contributor ☐ out-of Gerald Hill	f-state PA	C (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; Cit 30 Winthrop Downs San Antonio, TX 78257	ty; S	tate; Zip Code	
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instrun/a	ctions)
	Date 3/16/2023	Full name of contributor ut-of	f-state PA	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; Cit 4719 Cole Ave #404 Dallas, TX 75205	ty; S	tate; Zip Code	
	Principal occupa	ation / Job title (See instructions)		Employer (See instru self	ctions)
	Date 3/16/2023	Full name of contributor	f-state PA	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; Cit 601 E Sonterra San Antonio, TX 78258	ty; S	tate; Zip Code	
	Principal occupa	ation / Job title (See instructions)		Employer (See instru Rick Sheldon Real E	•
	Date 3/16/2023	Full name of contributor out-of	f-state PA	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; Cit 8120 Killarney Ct Wichita, KS 67206	ty; S	tate; Zip Code	
	Principal occupa	ation / Job title (See instructions)		Employer (See instru	ctions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

		The Instruction Guide explains how to	1 Total pages Schedule A1: 33 of 36		
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/16/2023	5 Full name of contributor Sandra Castillo	☐ out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; 1813 Parhaven San Antonio, TX 78232	City; S	State; Zip Code	
8	Principal occup	ation / Job title (See instructions)		9 Employer (See instru	uctions)
	Date 3/16/2023	Full name of contributor Michael & Mary Hogan	Out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 1535 Yosemite Oaks San Antonio, TX 78213	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) real estate			Employer (See instru self	ictions)	
	Date 3/16/2023	Full name of contributor Mike Giusti	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 1813 Parhaven Dr San Antonio, TX 78232	City;	State; Zip Code	
Principal occupation / Job title (See instructions) n/a		Employer (See instructions) n/a		uctions)	
	Date 3/16/2023	Full name of contributor Natasha Corcoran	☐ out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 9723 Garden Way St. John, IN 46373	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) business owner		Employer (See instr		actions)	

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	1	he Instruction Guide explains how t	o complete this	form.	1 Total pages Schedule A1: 34 of 36
2	FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)
4	Date 3/16/2023	5 Full name of contributor Texas Automobile Dealersh			7 Amount of contribution (\$) 500.00
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instru	actions)
	Date 3/17/2023	Full name of contributor Cloe Wright Contributor address; 5707 IH 10 San Antonio, TX 78201		AC (ID#)	Amount of contribution (\$) 500.00
	Principal occupa Co-founder	ation / Job title (See instructions)		Employer (See instru Wayne Wright Foun	•
	Date 3/20/2023	Full name of contributor Donald Oroian Contributor address; 2515 Plumbrook Dr San Antonio, TX 78258	out-of-state PA	AC (ID#)	Amount of contribution (\$) 250.00
	Principal occupa	ation / Job title (See instructions)		Employer (See instru ADA Consulting Gro	-
	Date 3/20/2023	Full name of contributor Roberto Kenigstein Contributor address; 5 Champions Lane San Antonio, TX 78257	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
	Principal occupa	ation / Job title (See instructions)		Employer (See instru	uctions)

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

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	Т	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 35 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/20/2023	5 Full name of contributor ☐ out-of-state PA Gary Greenberg	AC (ID#)	7 Amount of contribution (\$) 200.00
		6 Contributor address; City; S 5311 Auburn Rdg San Antonio, TX 78249	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru	ctions)
	Date 3/20/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S 105 Blackhawk Trail San Antonio, TX 78232	State; Zip Code	
	Principal occupa attorney	ation / Job title (See instructions)	Employer (See instru self	ctions)
	Date 3/21/2023	Full name of contributor	C (ID#)	Amount of contribution (\$) 40.00
		Contributor address; City; S 12835 Castle Bend San Antonio, TX 78230	State; Zip Code	
	Principal occupa retired	ation / Job title (See instructions)	Employer (See instru	ctions)
	Date 3/21/2023	Full name of contributor Out-of-state PA Heatley Cresta Bella LLC Contributor address; City; S 9901 E Valley Ranch #20205 Irving, TX 75063	C (ID#) State; Zip Code	Amount of contribution (\$) 500.00
	Principal occupa Real Estate	ation / Job title (See instructions)	Employer (See instru Heatley Cresta Bella	

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	7	The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 36 of 36
2	FILER NAME Manny Pelaez			3 Filer ID (Ethics Commission Filers)
4	Date 3/26/2023	5 Full name of contributor Out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 380.00
		6 Contributor address; City; S 5410 Montbury Ln Katy, TX 77450	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instrunda	uctions)
	Date 3/27/2023	Full name of contributor	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 12018 Indigo Bend San Antonio, TX 78230	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru Mosaic Land Develo	-
	Date	Full name of contributor	AC (ID#)	Amount of contribution (\$)
		Contributor address; City; S	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	uctions)
	Date	Full name of contributor	AC (ID#)	Amount of contribution (\$)
		Contributor address; City; S		
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	uctions)
		ATTACH ADDITIONAL COPIES O		

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

	The Instruction Guide explains how to complete this form.	,	1 Total pages Schedule A2: 1 of 1		
2	FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)		
4	TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0		
5	Date 6 Full name of contributor out-of-state PAC (ID#		8 Amount of Contribution \$ 9 In-kind contribution description		
10	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FC	Check if travel outside of Texas, complete Schedule T OR 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 co	ontributor'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 out-of-state PAC (ID#	Code	Amount of Contribution \$ In-kind contribution description Check if travel outside of Texas, complete Schedule T		
	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FC	OR 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 co	ontributor's spouse (if any) (FOR JUDICIAL)		
	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDIII E	AS NEEDED		

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

PLEDGED CONTRIBUTIONS

SCHEDULE B

	1	The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1		
2	FILER NAME Manny Pelae	ez		3 Filer ID (Ethics Commission Filers)		
4	TOTAL OF U	JNITEMIZED PLEDGES		\$ 0		
5	Date	6 Full name of pledgor out-of-state PAC (ID# 7 Pledgor address; City; State; Zip Code		8 Amount of Pledge \$ 9 In-kind contribution description		
10	Principal occu	pation / Job title (See instructions)	1 Employer (S	Check if travel outside of Texas, complete Schedule Tee instructions)		
	Date	Full name of pledgor out-of-state PAC (ID# Pledgor address; City; State; Zip Code		Amount of Pledge \$		
	Principal occu	pation / Job title (See instructions)	Employer (S	Check if travel outside of Texas, complete Schedule T ee instructions)		
	Date	Full name of pledgor out-of-state PAC (ID# Pledgor address; City; State; Zip Code		Amount of Pledge \$		
	Principal occu	pation / Job title (See instructions)	Employer (S	Check if travel outside of Texas, complete Schedule T ee instructions)		
	Date	Full name of pledgor out-of-state PAC (ID# Pledgor address; City; State; Zip Code		Amount of Pledge \$ In-kind contribution description		
	Principal occu	pation / Job title (See instructions)	Employer (Se	Check if travel outside of Texas, complete Schedule T ee 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 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. 1 of 1 2 FILER NAME 3 Filer ID (Ethics Commission Filers) **Manny Pelaez** 4 TOTAL OF UNITEMIZED LOANS \$ o 5 Date of loan 7 Name of lender out-of-state PAC (ID#_ 9 Loan Amount (\$) 6 Is lender a 8 Lender address; City; State; Zip Code 10 Interest rate financial institution? 11 Maturity date **12** Principal occupation / Job title (See instructions) 13 Employer (See instructions) 14 Description of Collateral Check if personal funds were deposited into political account (See instructions) none **16** GUARANTOR 17 Name of guarantor 19 Amount Guaranteed (\$) **INFORMATION** 18 Guarantor address; City; State; Zip Code 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 Lender address; State; Zip Code Interest rate financial institution? Maturity date Principal occupation / Job title (See instructions) Employer (See instructions) **Description of Collateral** Check if personal funds were deposited into political account (See Instructions) none **GUARANTOR** Amount Guaranteed (\$) Name of guarantor **INFORMATION** City; State: Guarantor address: 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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District

Other (enter a category not listed above

Credit Card Payment	The Instruction Guide explains how to comp	lete this form	Cities (Cities a category not noted above)
1 Total pages Schedule F1: 1 of 12	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 1/3/2023	5 Payee name DJI Drones		
6 Amount (\$) 1200.96	7 Payee address; City; State; Zip C 7400 San Pedro San Antonio, TX 78216	Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: equipment	(b) Description video equipment	
	(c) Check if travel outside of Texas, complete schedule	T Check if A	ustin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 1/4/2023	Payee name SA Hispanic Chamber of Commerce		
Amount (\$) 4000.00	Payee address; City; State; Zip C 907 Billy Mitchell Blvd San Antonio, TX 78226	Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description sponsorship	
	Check if travel outside of Texas, complete schedule	T Check if A	ustin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 1/9/2023	Payee name Extra Space Storage		
Amount (\$) 173.00	Payee address; City; State; Zip 0 9738 Huebner Rd San Antonio, TX 78240	Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description storage unit	
	Check if travel outside of Texas, complete schedule	T Check if A	ustin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS SC	HEDULE AS NEEDE	D

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 2 of 12	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)	
4 Date 1/9/2023	5 Payee name Constant Contact			
6 Amount (\$) 133.25	7 Payee address; City; State; 3675 Precision Drive Loveland, CO 80538	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche	(b) Description email program		
	(c) Check if travel outside of Texas, complete s	chedule T Check if A	Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 1/11/2023	Payee name Jessica Lorenzi			
Amount (\$) 105.00	Payee address; City; State; 4156 St Charles Bay San Antonio, TX 78229	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Event Expense	Description food purchase re	imbursement	
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 1/12/2023	Payee name Paesanos			
Amount (\$) 128.24	Payee address; City; State; 3622 Paesano Pkwy San Antonio, TX 78231	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Event Expense	Description fundraising		
	Check if travel outside of Texas, complete s	chedule T Check if A	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED	

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)	
1 Total pages Schedule F1: 3 of 12	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)	
4 Date 1/24/2023	5 Payee name Cates Legal Group			
6 Amount (\$) 750.00	7 Payee address; City; State; 5910 Clermont Lane Austin, TX 78744	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Legal Services	(b) Description campaign legal s	ervices	
	(c) Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 1/30/2023	Payee name Texas Democratic PA			
Amount (\$) 920.00	Payee address; City; State; PO Box 15707 Austin, TX 78761	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description contribution		
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 1/30/2023	Payee name Nationbuilder			
Amount (\$) 104.00	Payee address; City; State; 520 S Grand Ave Los Angeles , CA 90071	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sct Fees	Description website		
	Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEED!	E D	

	EXPENDITURE CATEGORI	ES FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains ho	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor w to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 12	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 2/3/2023	5 Payee name City of San Antonio		
6 Amount (\$) 100.00	7 Payee address; City; State 100 Military Plaza San Antonio, TX 78205	; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this so Fees	filing fee	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Austin, TX, officeholder living expense Office held
Date 2/5/2023	Payee name Cibicue Perez		
Amount (\$) 400.00	Payee address; City; State 1011 Broadway St San Antonio, TX 78215	; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this so Salaries/Wages/Contract Labor	Description sign installation	
	Check if travel outside of Texas, complete	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 2/6/2023	Payee name Constant Contact		
Amount (\$) 133.25	Payee address; City; State 3675 Precision Drive Loveland, CO 80538	; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this so Fees	Description email program	
	Check if travel outside of Texas, complete	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDE	ED .

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	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)	
1 Total pages Schedule F1: 5 of 12	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)	
4 Date 2/6/2023	5 Payee name Don on Grayson			
6 Amount (\$) 135.72	7 Payee address; City; State; 303 E Grayson St San Antoino, TX 78215	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Food/Beverage Expense	(b) Description fundraising meet	ing	
	(c) Check if travel outside of Texas, complete sch	nedule T Check if A	Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held	
Date 2/8/2023	Payee name Extra Space Storage			
Amount (\$) 198.00	Payee address; City; State; 9738 Huebner Rd San Antonio, TX 78240	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Fees	dule) Description storage space		
	Check if travel outside of Texas, complete sch	nedule T Check if A	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 2/10/2023	Payee name Range			
Amount (\$) 166.51	Payee address; City; State; 125 E Houston St San Antonio, TX 78205	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Food/Beverage Expense	Description campaign event		
	Check if travel outside of Texas, complete sch	nedule T Check if A	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	· · · · · · · · · · · · · · · · · · ·	& Related Expense		
1 Total pages Schedule F1: 6 of 12	2 FILER NAME Manny Pelaez 3 Filer ID (Ethics Comm	nission Filers)		
4 Date 2/14/2023	5 Payee name Norma Denham & Associates			
6 Amount (\$) 1500.00	7 Payee address; City; State; Zip Code 15706 Knoll Cliff San Antonio, TX 78247			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description fundraiser			
	(c) Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living	j expense		
9 Complete ONLY if direct expenditure to benefit C/C				
Date 2/24/2023	Payee name Cates Legal Group			
Amount (\$) 750.00	Payee address; City; State; Zip Code 5910 Clermont San Antonio, TX 78744			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Legal Services Description legal			
	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living	j expense		
Complete ONLY if direct expenditure to benefit C/C				
Date 2/28/2023	Payee name Chris Ortiz			
Amount (\$) 350.00	Payee address; City; State; Zip Code 000 0000 San Antonio, TX 78205			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense Description Mariachi Trio, senior center event			
	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living	j expense		
Complete ONLY if direct expenditure to benefit C/C	<u> </u>			
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking	•	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense	
Advertising Expense Consulting Expense		Office Overhead/Rental Expense Polling Expense	Transportation Equipment & Related Expense Travel in District	
Contributions/Donations Made By		Printing Expense	Travel Out Of District	
Candidate/Officeholder/Political C	Committee Legal Services S	Salaries/Wages/Contract Labor	Other (enter a category not listed above)	
Credit Card Payment	The Instruction Guide explains how to	o complete this form		
1 Total pages Schedule F1: 7 of 12	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
2/28/2023	Metal Promo LLC			
6 Amount (\$)	7 Payee address; City; State;	Zip Code		
2679.19	1700 S Lamar Blvd			
	Austin, TX 78704			
8	(a) Category (See categories listed at the top of this sched	dule) (b) Description		
PURPOSE	Gift/Awards/Memorials Expense	fiesta medals		
OF				
EXPENDITURE				
	(c) Check if travel outside of Texas, complete sch	hedule T Check if A	Austin, TX, officeholder living expense	
$\textbf{9} \ \text{Complete} \ \underline{\text{ONLY}} \ \text{if direct}$		Office sought	Office held	
expenditure to benefit C/C	DH			
Date	Payee name			
2/28/2023	Nationbuilder			
Amount (\$)	Payee address; City; State;	Zip Code		
104.00	520 S Grand Ave			
	Los Angeles, CA 94025			
	Cataman (See estagarian listed at the tax of this cahad	dula) Description		
	Category (See categories listed at the top of this sched	dule) Description website		
PURPOSE	1 000			
OF EXPENDITURE				
EXPENDITORE	Check if traval autoids of Tayas, complete ask	hadula T Chack if A	Austin TV officeholder living evenes	
0 1 0 0 1 1 0	Check if travel outside of Texas, complete sch	<u>—</u>	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
experientare to belieff of	511			
Date	Payee name			
3/2/2023	Paesanos			
Amount (\$)	Payee address; City; State;	Zip Code		
104.31	3622 Paesano Pkwy			
	San Antonio, TX 78231			
	Category (See categories listed at the top of this sched	dule) Description		
PURPOSE	Food/Beverage Expense	campaign meetin	g	
OF	, , , , , , , , , , , , , , , , , , ,	. •		
EXPENDITURE				
EXI ENDITORE	Check if travel outside of Texas, complete sch	hedule T Check if A	Austin, TX, officeholder living expense	
Complete ONLY if alter at				
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
experientare to benefit O/C				
	ATTACH ADDITIONAL COPIES OF THI	IS SCHEDULE AS NEEDE	ED .	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gifts/Awards/Memorials Expense Printing Expense Travel Out Of District Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form		
1 Total pages Schedule F1: 8 of 12	2 FILER NAME Manny Pelaez 3 Filer ID (Ethics Commission Filers)		
4 Date 3/2/2023	5 Payee name Jeremy Roberts Campaign		
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 1515 Spanish Oaks San Antonio, TX 78213		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution		
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held		
Date 3/6/2023	Payee name Constant Contact		
Amount (\$) 133.26	Payee address; City; State; Zip Code 3635 Precision Drive Loveland, CO 80538		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees Description email		
	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	· ·		
Date 3/8/2023	Payee name Extra Space Storage		
Amount (\$) 198.00	Payee address; City; State; Zip Code 9738 Huebner San Antonio, TX 78240		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees Description storage		
	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C			
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

	EXPENDITURE CATEGOR	IES FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains ho	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor w to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 9 of 12	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 3/8/2023	5 Payee name Cibi Perez		
6 Amount (\$) 400.00	7 Payee address; City; State 1011 Broadway San Antonio, TX 78215	e; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this s Event Expense	event bartender	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Austin, TX, officeholder living expense Office held
Date 3/8/2023	Payee name Ginos		
Amount (\$) 641.00	Payee address; City; State 13210 Huebner Rd San Antonio, TX 78230	e; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Food/Beverage Expense	chedule) Description fundraiser	
	Check if travel outside of Texas, complete	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 3/13/2023	Payee name Cover Three		
Amount (\$) 210.34	Payee address; City; State 1806 N 1604 W San Antonio, TX 78248	e; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Event Expense	chedule) Description fundraising	
	Check if travel outside of Texas, complete	e schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDE	ED

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Travel in District Travel Out Of District Other (enter a category not listed above) The Instruction Guide explains how to complete this form		
1 Total pages Schedule F1: 10 of 12	2 FILER NAME Manny Pelaez 3 Filer ID (Ethics Commission Filers)		
4 Date 3/18/2023	5 Payee name Northwest Democrats		
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 7122 San Pedro Ave #114 San Antonio, TX 78216		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		
9 Complete ONLY if direct expenditure to benefit C/C			
Date 3/19/2023	Payee name Sign Busters		
Amount (\$) 3754.00	Payee address; City; State; Zip Code PO Box 241018 San Antonio, TX 78224		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor Description Sign labor		
-	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C			
Date 3/20/2023	Payee name Viva Politics		
Amount (\$) 5500.00	Payee address; City; State; Zip Code 1850 Fredericksburg Rd San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor Description political consultant		
	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	· · · · · · · · · · · · · · · · · · ·		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loa Fees Offi Food/Beverage Expense Pol Gifts/Awards/Memorials Expense Prir	in Repayment/Reimbursement ce Overhead/Rental Expense lling Expense nting Expense aries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Manny Pelaez	omplete this form	3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2023	5 Payee name Cesar Chavez Foundation		
6 Amount (\$) 3000.00	7 Payee address; City; State; 2 1504 E Commerce San Antonio, TX 78205	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description foundation contr	ibution
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Austin, TX, officeholder living expense Office held
Date 3/20/2023	Payee name JVC Media		
Amount (\$) 1515.50	Payee address; City; State; 2 9335 Lammerton San Antonio, TX 78250	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule Printing Expense	Description campaign signs	
	Check if travel outside of Texas, complete sched	dule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 3/21/2023	Payee name Norma Denham & Associates		
Amount (\$) 6125.00	Payee address; City; State; 2 15706 Knoll Cliff San Antonio, TX 78247	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule Salaries/Wages/Contract Labor	Description fundraiser	
-	Check if travel outside of Texas, complete sche	dule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDE	E D

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Advertising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Fees 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 Salaries/Wages/Contract Labor Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 12 of 12 **Manny Pelaez** 4 Date 5 Payee name 3/22/2023 **Stripe** 6 Amount (\$) 7 Payee address; City; State; Zip Code 272.35 354 Oyster Point San Francisco, CA 94080 (a) Category (See categories listed at the top of this schedule) 8 (b) Description Stripe transfer fee (card processing fees) Fees **PURPOSE** OF **EXPENDITURE** (c) Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Amount (\$) Payee address: City: State: Zip Code Category (See categories listed at the top of this schedule) Description **PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Amount (\$) Payee address; City; Zip Code State; Category (See categories listed at the top of this schedule) Description **PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/Donations Made By Candidate/Officeholder/Political Co	Gifts/Awards/Memorials Expense Printing	g Expense es/Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
The Instruction Guide explains how to complete this form			
1 Total pages Schedule F2: 1 of 1	2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
	ED UNPAID INCURRED OBLIGATIONS		\$ 0
5 Date	6 Payee name		
7 Amount (\$)	8 Payee address; City; State; Z	p Code	
9 TYPE OF EXPENDITURE	Political Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description	
	(c) Check if travel outside of Texas, complete sched	ule T Check	if Austin, TX, officeholder living expense
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date	Payee name		
Amount (\$)	Payee address; City; State; Z	p Code	
TYPE OF EXPENDITURE	Political Non-Political		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas, complete sched	ule T Check	if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

	T	he Instruction Guide explains how to complete this form.	1 Total pages Schedule F3: 1 of 1
2	FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4	Date	5 Name of person from whom investment is purchased	
		6 Address of person from whom investment is purchased; City;	State; Zip Code
		7 Description of investment	
		8 Amount of investment (\$)	
	Date	Name of person from whom investment is purchased	
		Address of person from whom investment is purchased; City;	State; Zip Code
		Description of investment	
		Amount of investment (\$)	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By

Event Expense Fees

Food/Beverage Expense Gifts/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense

Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel in District Travel Out Of District

The Instruction Guide explains how to complete this form			
1 Total pages Schedule F4: 1 of 1	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0	
5 Date	6 Payee name		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
9 TYPE OF EXPENDITURE	Political Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	b) Description	
	(c) Check if travel outside of Texas, complete schedule T	Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
TYPE OF EXPENDITURE	Political Non-Political		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas, complete schedule T	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
	ATTACH ADDITIONAL COPIES OF THIS SCHED	DULE AS NEEDED	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Advertising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/Donations Made By Gifts/Awards/Memorials Expense Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 1 of 3 **Manny Pelaez** 4 Date 5 Payee Name 2/6/2023 Lowes 6 Amount (\$) 7 Payee address; City; State; Zip Code 139.31 18303 Rim Drive **X** Reimbursement from San Antonio, TX 78230 political contributions intended sign materials 8 (a) Category (See categories listed at the top of this schedule) (b) Description **PURPOSE** Other: signs OF **EXPENDITURE** (c) Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 2/12/2023 **Home Depot** Payee address; City; Zip Code Amount (\$) State; 12871 DeZavala Reimbursement from San Antonio, TX 78230 political contributions intended Category (See categories listed at the top of this schedule) Description sign hanging **PURPOSE** Other: sign hanging supplies OF **EXPENDITURE** Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 2/16/2023 Pasha Amount (\$) Payee address; City; State; Zip Code 158.60 1207 N Loop 1604 **X** Reimbursement from San Antonio, TX 78230 political contributions intended Category (See categories listed at the top of this schedule) campaign meeting Description **PURPOSE** Food/Beverage Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Check if travel outside of Texas, complete schedule T Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment			
4 Tatal manage Cabadula Co	The Instruction Guide explains how to complete this form		
1 Total pages Schedule G: 2 of 3	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Manny Pelaez		
4 Date 3/9/2023	5 Payee Name HEB		
6 Amount (\$) 38.45 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 12777 IH 10 W San Antonio, TX 78230		
PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Event Expense (b) Description fundraising event		
EXPENDITURE	(c) Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held		
Date 3/9/2023	Payee name Lowes		
Amount (\$) 139.31 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 18303 Rim Dr San Antonio, TX 78257		
PURPOSE OF Category (See categories listed at the top of this schedule) Other: sign repair Description campaign sign supplies			
EXPENDITURE	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held OH		
Date 3/24/2023	Payee name Groomers		
Amount (\$) 1322.99 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9801 Mccullough San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense Description 13th annual Paella challenge		
LA LIBITORE	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C			
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gifts/Awards/Memorials Expense Printing Expense Travel Out Of District Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above)		
Credit Card Payment	The Instruction Guide explains how to complete this form		
1 Total pages Schedule G:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
3 of 3	Manny Pelaez		
4 Date	5 Payee Name		
3/25/2023	Groomers		
6 Amount (\$) 861.25 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 9801 McCollough San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense (b) Description Paella Challenge		
	(C) Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/O			
Date 3/25/2023	Payee name HEB		
Amount (\$) 662.25 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 12777 IH 10 San Antonio, TX 78230		
PURPOSE OF	Category (See categories listed at the top of this schedule) Event Expense Description Paella Challenge		
EXPENDITURE	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C			
Date 3/25/2023	Payee name Party City		
Amount (\$) 335.03 Reimbursement from political contributions intended	Payee address; City; State; Zip Code 13419 San Pedro San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense Description paella challenge decor		
	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C			
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political C	ommittee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above)	
Credit Card Payment The Instruction Guide explains how to complete this form		
1 Total pages Schedule H: 1 of 1	2 FILER NAME Manny Pelaez 3 Filer ID (Ethics Commission Filers)	
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) (b) Description	
	(c) Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name Office sought Office held OH	
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description	
	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held OH	
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description	
	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	

SCHEDULE

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule I: 1 of 1	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) (b) Description	(See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Description	(See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Description	(See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Description	(See instructions regarding type of information required.)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	EEDED

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

SCHEDULE K

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule K: 1 of 1
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Name of person from whom amount is received	8 Amount (\$)
	6 Address of person from whom amount is received; City; State;	Zip Code
	7 Purpose for which amount is received	eck 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 Che	eck 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 Che	eck 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 Che	eck if political contribution returned to filer
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS	S NEEDED

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

SCHEDULE T

The Ins	truction Guide e	1 Total pages Schedule T: 1 of 1				
2 FILER NAME Manny Pelaez				3 Filer ID (Ethics Commission Filers)		
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee						
5 Contribution / Expenditure reported on:						
Schedule A2	Schedule	B Schedule B(J)	Schedule C2	Schedule D	Schedule F1	
Schedule F2	Schedule	F4 Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS	
6 Dates of travel	Dates of travel 7 Name of person(s) traveling					
	8 Departure cit	y or name of departure location	on			
	9 Destination of	ity or name of destination loca	ation			
10 Means of transportation						
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee						
Contribution / Expendi	ture reported on					
Schedule A2	Schedule	B Schedule B(J)	Schedule C2	Schedule D	Schedule F1	
Schedule F2	Schedule	F4 Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS	
Dates of travel	es of travel Name of person(s) traveling					
	Departure city or name of departure location					
	Destination of	ity or name of destination loca	ation			
Means of transportation		Purpose of travel (including name of conference, seminar, or other event)				
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee						
Contribution / Expendi	ture reported on					
Schedule A2	Schedule	B Schedule B(J)	Schedule C2	Schedule D	Schedule F1	
Schedule F2	Schedule	F4 Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS	
Dates of travel	ates of travel Name of person(s) traveling					
Departure city		ty or name of departure location				
Destination city or name of destination location						
Means of transportation		Purpose of travel (including name of conference, seminar, or other event)				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

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CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form. •• Complete only if "Report Type" on page 1 is marked "Final Report" ••				
C/OH NA		Filer ID (Ethics Commission Filers)		
SIGNA	TURE			
a repo	ot expect any further political contributions or political expenditures in con ort as a final report terminates my campaign treasurer appointment. I also outions or make any campaign expenditures without a campaign treasure	understand that I may not accept any campaign		
		Signature of Candidate / Officeholder		
	WHO IS NOT AN OFFICEHOLDER lete A & B below only if you are not an officeholder. ••			
A.	CAMPAIGN FUNDS			
Chec	k only one:			
	I do not have unexpended contributions or unexpended interest or inco	me earned from political contributions.		
	I have unexpended contributions or unexpended interest or income ear convert unexpended political contributions or unexpended interest or in also understand that I must file an annual report of unexpended contrib or unexpended interest or income earned on political contributions long understand that I must dispose of unexpended political contributions an contributions in accordance with the requirements of Election Code, § 2	come earned on political contributions to personal use. I utions and that I may not retain unexpended contributions er than six years after filing this final report. Further, I d unexpended interest or income earned on political		
В.	ASSETS			
Chec	k only one:			
	I do not retain assets purchased with political contributions or interest o	r other income from political contributions.		
	I do retain assets purchased with political contributions or interest or off may not convert assets purchased with political contributions or interest use. I also understand that I must dispose of assets purchased with political Code, § 254.204.	t or other income from political contributions to personal		
		Signature of Candidate		
	EHOLDER lete this section only if you are an officeholder. ••			
	I am aware that I remain subject to filing requirements applicable to an am also aware that I will be required to file reports of unexpended contr I retain political contributions, interest of other income from political con interest or other income from political contributions.	ibutions if, after filing the last required report as an officeholder		
		Signature of Officeholder		