

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)		2 Total pages filed: <b>88</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <b>Marina</b>	MI <b>A</b>	OFFICE USE ONLY Date Received <b>6/20/2023 11:54:03AM</b>	
	NICKNAME	LAST <b>Gavito</b>	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>1850 Fredericksburg San Antonio TX 78201</b>				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( <b>210</b> )	PHONE NUMBER <b>867-7342</b>	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <b>Edward</b>	MI <b>D</b>	Receipt #	Amount \$
	NICKNAME	LAST <b>Garza</b>	SUFFIX	Date Processed <b>6/20/2023 11:54:03AM</b>	
	Date Imaged				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>1903 W Magnolia San Antonio TX 78201</b>				
8 CAMPAIGN TREASURER PHONE	AREA CODE ( <b>210</b> )	PHONE NUMBER <b>355-8565</b>	EXTENSION		
9 REPORT TYPE	<b>30th Day Before General Election</b>				
10 PERIOD COVERED	Month Day Year <b>1/18/2023</b> THROUGH <b>3/27/2023</b>				
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year <b>5/6/2023</b>	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any) <b>None</b>		13 OFFICE SOUGHT (if known) <b>Council District 7</b>		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

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

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	<b>\$ 1174.00</b>
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 65177.16</b>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	<b>\$ 275.00</b>
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	<b>\$ 25410.81</b>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 35793.19</b>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	<b>\$ 2075.00</b>

## 18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

\*\*\* Electronically Certified \*\*\*

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Marina A Gavito, this the 20th day of June, 2023, to certify which, witness my hand and seal of office.

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

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

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

# SUBTOTALS - COH

## FORM C/OH COVER SHEET PG 3

<b>19</b> FILER NAME <b>Marina A Gavito</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	<b>\$ 59129.00</b>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<b>\$ 6048.16</b>
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	<b>\$ 0</b>
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	<b>\$ 2075.00</b>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 25410.81</b>
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	<b>\$ 0</b>
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	<b>\$ 0</b>
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	<b>\$ 0</b>
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	<b>\$ 0</b>
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	<b>\$ 0</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**1/19/2023**

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

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

6 Contributor address; City; State; Zip Code  
**3711 River Falls  
San Antonio, TX 78259**

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

9 Employer (See instructions)  
**Retired**

Date  
**1/20/2023**

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

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

Contributor address; City; State; Zip Code  
**3010 Whisper Fern  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Retired**

Date  
**1/21/2023**

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

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

Contributor address; City; State; Zip Code  
**211 Hunters Branch St S  
Shavano Park, TX 78231**

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

Employer (See instructions)  
**Half Priced Real Estate**

Date  
**1/26/2023**

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

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

Contributor address; City; State; Zip Code  
**25 Picadilly Circle  
Brownsville, TX 78521**

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

Employer (See instructions)  
**Cameron County**

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

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**2 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**1/26/2023**

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

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

6 Contributor address; City; State; Zip Code  
**PO Box 5962  
Brownsville, TX 78523**

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

9 Employer (See instructions)  
**Retired**

Date  
**1/26/2023**

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

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

Contributor address; City; State; Zip Code  
**7388 Highland Pine St.  
Brownsville, TX 78526**

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

Employer (See instructions)  
**Retired**

Date  
**1/26/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 622  
Olmito, TX 78575**

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

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

Date  
**1/26/2023**

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

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

Contributor address; City; State; Zip Code  
**25 East Sam Pearl Blvd  
Brownsville, TX 78520**

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

Employer (See instructions)  
**Self**

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>3 of 54</b>
<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/26/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Yulianna Noyola</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>7388 Highland Pine St</b> <b>Brownsville, TX 78526</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Administrative Assistant</b>		<b>9</b> Employer (See instructions) <b>OP10.33</b>
Date <b>1/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lynn Watson</b> ..... Contributor address; City; State; Zip Code <b>206 Alta Vista Drive</b> <b>San Marcos, TX 78666</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Self-employed</b>
Date <b>1/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>George Gavito</b> ..... Contributor address; City; State; Zip Code <b>3005 Old Alice Rd #500D</b> <b>Brownsville, TX 78521</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>1/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jeff Landers</b> ..... Contributor address; City; State; Zip Code <b>3736 Twisted Oak</b> <b>San Antonio, TX 78217</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Sr. Vice President</b>		Employer (See instructions) <b>Encore Bank</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**4 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**1/31/2023**

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

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

6 Contributor address; City; State; Zip Code  
**415 Jackson Street #401  
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)  
**Senior Sales Manager**

9 Employer (See instructions)  
**Cloudflare**

Date  
**1/31/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 8490  
SAN ANTONIO, TX 78208**

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

Employer (See instructions)  
**Dixie flag & Banner**

Date  
**1/31/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Henry Van de Putte III**

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

Contributor address; City; State; Zip Code  
**803 West Oltorf Street  
Austin, TX 78704**

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

Employer (See instructions)  
**Meals on Wheels Central Texas**

Date  
**1/31/2023**

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

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

Contributor address; City; State; Zip Code  
**8 Inwood Mist  
San Antonio, TX 78248**

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

Employer (See instructions)  
**homemaker**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**5 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**1/31/2023**

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

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

6 Contributor address; City; State; Zip Code  
**8 Inwood Mist  
San Antonio, TX 78248**

8 Principal occupation / Job title (See instructions)  
**Sr. Vice-President**

9 Employer (See instructions)  
**SB**

Date  
**1/31/2023**

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

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

Contributor address; City; State; Zip Code  
**439 Calumet Place  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Port San Antonio**

Date  
**2/1/2023**

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

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

Contributor address; City; State; Zip Code  
**708 Canterbury Hill  
San Antonio, TX 78209**

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

Employer (See instructions)  
**SAVE**

Date  
**2/2/2023**

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

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

Contributor address; City; State; Zip Code  
**105 Mimosa Drive  
San Antonio, TX 78213**

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

Employer (See instructions)  
**Bowling Green State University**

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**6 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/2/2023**

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

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

6 Contributor address; City; State; Zip Code  
**2101 West Summit Ave  
San Antonio, TX 78201**

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

9 Employer (See instructions)  
**retired**

Date  
**2/2/2023**

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

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

Contributor address; City; State; Zip Code  
**4709 Sara Dr  
Austin, TX 78721**

Principal occupation / Job title (See instructions)  
**Account Lead**

Employer (See instructions)  
**Accenture**

Date  
**2/2/2023**

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

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

Contributor address; City; State; Zip Code  
**427 S. Saint Marys Street  
San Antonio, TX 78205**

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

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

Date  
**2/5/2023**

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

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

Contributor address; City; State; Zip Code  
**3 Chelsea Green  
San Antonio, TX 78257**

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

Employer (See instructions)  
**homemaker**

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>7 of 54</b>
<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/6/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Raul Lomeli-Azoubel</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>3318 Sable Creek</b> <b>San Antonio, TX 78259</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Chairman</b>		<b>9</b> Employer (See instructions) <b>Welcome Tech, Inc</b>
Date <b>2/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Alejandra Villarreal</b> ..... Contributor address; City; State; Zip Code <b>2719 Castanet Street</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions) <b>retired</b>
Date <b>2/9/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Emmanuel Zacharias</b> ..... Contributor address; City; State; Zip Code <b>18022 Via del Arbol</b> <b>San Antonio, TX 78257</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Homemaker</b>		Employer (See instructions) <b>Homemaker</b>
Date <b>2/9/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Yesenia Monarres</b> ..... Contributor address; City; State; Zip Code <b>19209 Heather Forest</b> <b>San Antonio, TX 78258</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Dental</b>		Employer (See instructions) <b>Stone Ridge Dental</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>8 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/9/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Danielle Petty</b> ..... 6 Contributor address; City; State; Zip Code <b>1307 Mount Vieja Drive</b> <b>San Antonio, TX 78213</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>Senior Marketing &amp; Leasing</b>		9 Employer (See instructions) <b>Lillibridge Healthcare Services</b>
Date <b>2/9/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Russell Reyes</b> ..... Contributor address; City; State; Zip Code <b>32110 Mid Hollow Drive</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>self-employed</b>		Employer (See instructions) <b>Perico's Mexican Restaurant</b>
Date <b>2/9/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Neils Agather</b> ..... Contributor address; City; State; Zip Code <b>300 West French Pl</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Musician</b>		Employer (See instructions) <b>Self</b>
Date <b>2/9/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kristen Connor</b> ..... Contributor address; City; State; Zip Code <b>8650 Terra DI</b> <b>San Antonio, TX 78255</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Analyst</b>		Employer (See instructions) <b>VA</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**9 of 54**

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**2/9/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**150 E . Lynwood Ave  
San Antonio, TX 78212**

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

**9** Employer (See instructions)  
**AMD**

Date  
**2/9/2023**

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

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

Contributor address; City; State; Zip Code  
**8651 Terra Dale  
San Antonio, TX 78255**

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

Employer (See instructions)  
**homemaker**

Date  
**2/9/2023**

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

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

Contributor address; City; State; Zip Code  
**8651 Terra Dale  
San Antonio, TX 78255**

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

Employer (See instructions)  
**Lead Hubb**

Date  
**2/9/2023**

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

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

Contributor address; City; State; Zip Code  
**3119 Sable Creek  
San Antonio, TX 78259**

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

Employer (See instructions)  
**homemaker**

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**10 of 54**

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**2/10/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**111 AXIS CIR  
Boerne, TX 78006**

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

**9** Employer (See instructions)  
**Axis Holdings**

Date  
**2/10/2023**

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

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

Contributor address; City; State; Zip Code  
**502 Oakleaf Dr  
San Antonio, TX 78209**

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

Employer (See instructions)  
**N/A**

Date  
**2/11/2023**

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

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

Contributor address; City; State; Zip Code  
**318 East Nottingham Dr  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Clark Hill**

Date  
**2/12/2023**

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

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

Contributor address; City; State; Zip Code  
**12170 Shoal Creek Drive  
Frisco, TX 75035**

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

Employer (See instructions)  
**Diocese of Dallas**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**11 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/12/2023**

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

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

6 Contributor address; City; State; Zip Code  
**634 East Mandalay Drive  
San Antonio, TX 78212**

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

9 Employer (See instructions)  
**Santana Group**

Date  
**2/12/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 12037  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**District Judge**

Employer (See instructions)  
**State of Texas**

Date  
**2/12/2023**

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

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

Contributor address; City; State; Zip Code  
**3334 Nantucket Dr  
San Antonio, TX 78230**

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

Employer (See instructions)  
**USAA**

Date  
**2/14/2023**

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

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

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

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

Employer (See instructions)  
**r26D LLC**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**12 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/14/2023**

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

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

6 Contributor address; City; State; Zip Code  
**13519 Topaz Lake  
Helotes, TX 78023**

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

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

Date  
**2/15/2023**

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

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

Contributor address; City; State; Zip Code  
**2717 North Pine Street  
San Antonio, TX 78209**

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

Employer (See instructions)  
**USAA**

Date  
**2/15/2023**

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

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

Contributor address; City; State; Zip Code  
**903 W Huisache Ave  
San Antonio, TX 78201**

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

Employer (See instructions)  
**STRAC**

Date  
**2/15/2023**

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

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

Contributor address; City; State; Zip Code  
**16526 Loma Landing  
Helotes, TX 78023**

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

Employer (See instructions)  
**The IMG Studio**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>13 of 54</b>
<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/15/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Louis Escareno</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>2717 W Martin St</b> <b>San Antonio, TX 78207</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Attorney</b>		<b>9</b> Employer (See instructions) <b>Self-employed</b>
Date <b>2/16/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Marisa Ayala</b> ..... Contributor address; City; State; Zip Code <b>11111 Catchfly Field</b> <b>Helotes, TX 78023</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Event Planner</b>		Employer (See instructions) <b>Self</b>
Date <b>2/16/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sarah Bodner</b> ..... Contributor address; City; State; Zip Code <b>1838 W. Magnolia</b> <b>San Antonio, TX 78201</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>homemaker</b>		Employer (See instructions) <b>homemaker</b>
Date <b>2/16/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gloria Hernandez</b> ..... Contributor address; City; State; Zip Code <b>8415 Fredricksburg Rd #805</b> <b>San Antonio, TX 78229</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>14 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/16/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Belinda V Molina</b> ..... 6 Contributor address; City; State; Zip Code <b>126 Barrera St</b> <b>San Antonio, TX 78210</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>Homemaker</b>		9 Employer (See instructions) <b>N/A</b>
Date <b>2/16/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lisa Bombin</b> ..... Contributor address; City; State; Zip Code <b>136 Barilla Place</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Communications</b>		Employer (See instructions) <b>Unico Communications</b>
Date <b>2/16/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Akeem Brown</b> ..... Contributor address; City; State; Zip Code <b>1447 E Crockett St</b> <b>San Antonio, TX 78202</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>CEO</b>		Employer (See instructions) <b>Essence Prep</b>
Date <b>2/16/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Monica Garza</b> ..... Contributor address; City; State; Zip Code <b>618 W. Magnolia Ave.</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Sales</b>		Employer (See instructions) <b>H-E-B</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>15 of 54</b>
<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/16/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Priscilla Dupré</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>1010 Wiltshire Avenue</b> <b>Terrell Hills, TX 78209</b>	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Sr Executive Assistant</b>		<b>9</b> Employer (See instructions) <b>LiftFund</b>
Date <b>2/16/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Callie Ramirez</b> ..... Contributor address; City; State; Zip Code <b>110 Paseo Encinal Street</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Physician Assistant</b>		Employer (See instructions) <b>Stone Oak Family Practice</b>
Date <b>2/16/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Michelle Lugalía-Hollon</b> ..... Contributor address; City; State; Zip Code <b>2202 W Magnolia Ave</b> <b>San Antonio, TX 78201</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>Layers of Change LLC</b>
Date <b>2/17/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Marcel Johnson</b> ..... Contributor address; City; State; Zip Code <b>111 Indigo Bend</b> <b>Boerne, TX 78006</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Business Development</b>		Employer (See instructions) <b>Port San Antonio</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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**1** Total pages Schedule A1:  
**16 of 54**

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**2/17/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**205 Canada Verde  
San Antonio, TX 78232**

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

**9** Employer (See instructions)  
**PlainsCapital Bank**

Date  
**2/17/2023**

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

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

Contributor address; City; State; Zip Code  
**214 Post Oak Way  
Shavano Park, TX 78230**

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

Employer (See instructions)  
**Valero Energy**

Date  
**2/17/2023**

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

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

Contributor address; City; State; Zip Code  
**6505 Laurel Hill Drive  
San Antonio, TX 78229**

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

Employer (See instructions)  
**retired**

Date  
**2/17/2023**

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

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

Contributor address; City; State; Zip Code  
**317 Rosewood Ave  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Exec VP**

Employer (See instructions)  
**La Prensa**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**17 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/18/2023**

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

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

6 Contributor address; City; State; Zip Code  
**765 Estes Ave  
San Antonio, TX 78209**

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

9 Employer (See instructions)  
**BY Design Home Staging**

Date  
**2/18/2023**

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

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

Contributor address; City; State; Zip Code  
**10410 Pelican Oak Drive  
San Antonio, TX 78254**

Principal occupation / Job title (See instructions)  
**Fundraising Consultnat**

Employer (See instructions)  
**Eskin Fundraising Training LLC**

Date  
**2/18/2023**

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

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

Contributor address; City; State; Zip Code  
**211 Green Meadow Blvd  
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)  
**Grant Director**

Employer (See instructions)  
**Alamo Colleges District**

Date  
**2/19/2023**

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

Amount of contribution (\$)  
**110.00**

Contributor address; City; State; Zip Code  
**200 Briarcliff Dr.  
San Antonio, TX 78213**

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

Employer (See instructions)  
**SATX Consultants**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**2/19/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Christina Bocanegra-Perez**

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

**6** Contributor address; City; State; Zip Code  
**6411 Laurelhill  
San Antonio, TX 78229**

**8** Principal occupation / Job title (See instructions)  
**Director, Innovation Program**

**9** Employer (See instructions)  
**Community Family Medicine, PA**

Date  
**2/20/2023**

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

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

Contributor address; City; State; Zip Code  
**23 Queens Heath  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**Casa Brisa**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**12951 Huebner Rd #78066  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Dryden Labs**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**7323 Eagle Ledge  
San Antonio, TX 78249**

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

Employer (See instructions)  
**Parra & Co**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**19 of 54**

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**2/21/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**3627 Boulder Peak  
San Antonio, TX 78247**

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

**9** Employer (See instructions)  
**CyberFortress**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**114 Santa Ursula  
Helotes, TX 78023**

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

Employer (See instructions)  
**Central Catholic High School**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**127 E Hermosa Dr  
San Antonio, TX 78212**

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

Employer (See instructions)  
**BAMC**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**300 East Basse Road #1110  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Event planning**

Employer (See instructions)  
**Biffle Event Productions**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**20 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/21/2023**

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

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

6 Contributor address; City; State; Zip Code  
**6060 Talley Road  
San Antonio, TX 78253**

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

9 Employer (See instructions)  
**Momentum physical therapy**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**3218 Falling Brook  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Fin advisor**

Employer (See instructions)  
**Northwestern Mutual**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**103 Happy Trail  
Shavano Park, TX 78231**

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

Employer (See instructions)  
**Visit San Antonio**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**204 Fawn Dr  
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)  
**First VP**

Employer (See instructions)  
**CBRE**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**21 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/21/2023**

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

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

6 Contributor address; City; State; Zip Code  
**26039 Copperas Lane  
San Antonio, TX 78260**

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

9 Employer (See instructions)  
**TX River Company**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**526 Refugio  
San Antonio, TX 78210**

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

Employer (See instructions)  
**Oxbow Development Group**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**344 Harmon  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Copperhead Construction**

Date  
**2/21/2023**

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

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

Contributor address; City; State; Zip Code  
**1320 Austin Hwy #7207  
San Antonio, TX 78209**

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

Employer (See instructions)  
**CBRE**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**22 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/23/2023**

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

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

6 Contributor address; City; State; Zip Code  
**109 Lou Cir  
San Antonio, TX 78213**

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

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

Date  
**2/24/2023**

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

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

Contributor address; City; State; Zip Code  
**502 Furr Drive #3  
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)  
**Executive Director**

Employer (See instructions)  
**Mexican American Civil Rights Institute**

Date  
**2/24/2023**

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

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

Contributor address; City; State; Zip Code  
**123 Brackenridge Ave #121  
San Antonio, TX 78209**

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

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

Date  
**2/24/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jose De La Cruz**

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

Contributor address; City; State; Zip Code  
**8011 Radiant Star  
San Antonio, TX 78252**

Principal occupation / Job title (See instructions)  
**State Government Affairs Manager**

Employer (See instructions)  
**Microsoft**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**23 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/24/2023**

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

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

6 Contributor address; City; State; Zip Code  
**335 Country Wood Drive  
San Antonio, TX 78216**

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

9 Employer (See instructions)  
**Aldrete Strategic Partners, LLC**

Date  
**2/24/2023**

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

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

Contributor address; City; State; Zip Code  
**2827 Old Moss Rd  
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)  
**UX Designer**

Employer (See instructions)  
**Expedia Group**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 10281  
San Antonio, TX 78217**

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

Employer (See instructions)  
**Well Med Medical Group**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**214 Blackjack Oak  
Shavano Park, TX 78230**

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

Employer (See instructions)  
**homemaker**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**24 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/25/2023**

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

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

6 Contributor address; City; State; Zip Code  
**6243 IH 10 West #955  
San Antonio, TX 78201**

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

9 Employer (See instructions)  
**George Salinas Injury Lawyers**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**10742 Palomino Bend  
San Antonio, TX 78254**

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

Employer (See instructions)  
**ESO Ventures**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**12904 Essen Forest  
San Antonio, TX 78023**

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

Employer (See instructions)  
**SAWS**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**7026 Baywater Drive  
San Antonio, TX 78229**

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

Employer (See instructions)  
**Shyfts**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**25 of 54**

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**2/25/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**1381 River Way  
San Antonio, TX 78070**

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

**9** Employer (See instructions)  
**Adelaide Services, LLC**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**103 Ewing Place  
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)  
**Litigation clerk**

Employer (See instructions)  
**Pronto Process**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**231 Wickes St  
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)  
**Public relations**

Employer (See instructions)  
**Broadway bank**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**127 E Dewey Pl  
San Antonio, TX 78212**

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

Employer (See instructions)  
**marcus benavidez**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**26 of 54**

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**2/25/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Emily Calderon Galdeano**

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

**6** Contributor address; City; State; Zip Code  
**203 Northcrest Drive  
San Antonio, TX 78213**

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

**9** Employer (See instructions)  
**Elevate Consulting Group**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**11635 Amberdeen cove  
San Antonio, TX 78245**

Principal occupation / Job title (See instructions)  
**Executive assistant**

Employer (See instructions)  
**USAA**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**2518 Fairfield Bend Dr  
San Antonio, TX 78231**

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

Employer (See instructions)  
**CloudReach**

Date  
**2/25/2023**

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

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

Contributor address; City; State; Zip Code  
**150 E Lynwood Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**USAA**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>27 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/25/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Elisa Bernal</b> ..... 6 Contributor address; City; State; Zip Code <b>3010 Whisper Fern</b> <b>San Antonio, TX 78230</b>	7 Amount of contribution (\$) <b>200.00</b>
8 Principal occupation / Job title (See instructions) <b>Retired</b>		9 Employer (See instructions) <b>Retired</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Chip Cortez Haas</b> ..... Contributor address; City; State; Zip Code <b>204 E. Melrose Dr</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Lobbyist</b>		Employer (See instructions) <b>Self Employed</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Carino Cortez Haas</b> ..... Contributor address; City; State; Zip Code <b>204 E. Melrose Dr</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Director</b>		Employer (See instructions) <b>Mi Tierra Familia</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Andrea Ramirez</b> ..... Contributor address; City; State; Zip Code <b>2502 W Gramercy</b> <b>San Antonio, TX 78228</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>28 of 54</b>
<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/25/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Patricia Padilla</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>254 E Quill</b> <b>San Antonio, TX 78228</b>	<b>7</b> Amount of contribution (\$) <b>200.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Retired</b>		<b>9</b> Employer (See instructions) <b>Retired</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Javier Padilla</b> ..... Contributor address; City; State; Zip Code <b>254 E Quill</b> <b>San Antonio, TX 78228</b>	Amount of contribution (\$) <b>300.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jesse Pineda</b> ..... Contributor address; City; State; Zip Code <b>7606 Braun Oak</b> <b>San Antonio, TX 78250</b>	Amount of contribution (\$) <b>150.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Raul Reyna</b> ..... Contributor address; City; State; Zip Code <b>10410 Avalon Rdg</b> <b>San Antonio, TX 78240</b>	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>29 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/25/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Michele Robeldo</b> ..... 6 Contributor address; City; State; Zip Code <b>8315 Kingsway</b> <b>San Antonio, TX 78254</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>Retired</b>		9 Employer (See instructions) <b>Retired</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Leticia Van De Putte</b> ..... Contributor address; City; State; Zip Code <b>222 Herweck Dr</b> <b>San Antonio, TX 78213</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>Andrade-VandePutte &amp; Associates</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mary Rogers</b> ..... Contributor address; City; State; Zip Code <b>6347 Mondean St</b> <b>San Antonio, TX 78240</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>2/25/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Margaret V Ruiz</b> ..... Contributor address; City; State; Zip Code <b>222 Melliff Dr</b> <b>San Antonio, TX 78216</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>30 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/25/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Michelle Ruiz</b> ..... 6 Contributor address; City; State; Zip Code <b>2301 W. Kings Hwy</b> <b>San Antonio, TX 78201</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>Manager</b>		9 Employer (See instructions) <b>Gonzaba Medical Group</b>
Date <b>2/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Esther Pipoly</b> ..... Contributor address; City; State; Zip Code <b>13711 Pebble Oak Drive</b> <b>San Antonio, TX 78231</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Grief &amp; Crisis Consultant</b>		Employer (See instructions) <b>Loss of Life Advocates</b>
Date <b>2/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Yvette Robinson</b> ..... Contributor address; City; State; Zip Code <b>1861 Split Mountain</b> <b>Canyon Lake, TX 78133</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Construction</b>		Employer (See instructions) <b>Robinson GC</b>
Date <b>2/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Linda Chavez-Thompson</b> ..... Contributor address; City; State; Zip Code <b>6226 Meadow Haven</b> <b>San Antonio, TX 78239</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**31 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**2/27/2023**

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

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

6 Contributor address; City; State; Zip Code  
**PO Box 1361  
San Antonio, TX 78295**

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

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

Date  
**2/27/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 1361  
San Antonio, TX 78295**

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

Employer (See instructions)  
**RK Group**

Date  
**3/1/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 696000  
San Antonio, TX 78269**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date  
**3/1/2023**

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

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

Contributor address; City; State; Zip Code  
**424 Lamar  
San Antonio, TX 78202**

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

Employer (See instructions)  
**USAA**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>32 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/1/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Alejandra Villarreal</b> ..... 6 Contributor address; City; State; Zip Code <b>2719 Castanet Street</b> <b>San Antonio, TX 78230</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>retired</b>		9 Employer (See instructions) <b>retired</b>
Date <b>3/2/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ana Maldonado</b> ..... Contributor address; City; State; Zip Code <b>7630 Eagle Ledge</b> <b>San Antonio, TX 78249</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Director</b>		Employer (See instructions) <b>USAA</b>
Date <b>3/2/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mary H Worth</b> ..... Contributor address; City; State; Zip Code <b>270 Terrel Rd</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>N/A</b>
Date <b>3/2/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Robert Worth</b> ..... Contributor address; City; State; Zip Code <b>270 Terrel Rd</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Founder</b>		Employer (See instructions) <b>Worth &amp; Associates</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**33 of 54**

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**3/3/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**331 West Gramercy Pl  
San Antonio, TX 78212**

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

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

Date  
**3/4/2023**

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

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

Contributor address; City; State; Zip Code  
**120 Street #1309  
San Antonio, TX 78215**

Principal occupation / Job title (See instructions)  
**Technology Entrepreneur**

Employer (See instructions)  
**Irys Technologies, Inc.**

Date  
**3/5/2023**

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

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

Contributor address; City; State; Zip Code  
**6410 Laurelhill Dr  
San Antonio, TX 78229**

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

Employer (See instructions)  
**Retired**

Date  
**3/7/2023**

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

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

Contributor address; City; State; Zip Code  
**6505 Laurel Hill Dr  
San Antonio, TX 78229**

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

Employer (See instructions)  
**retired**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/10/2023**

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

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

6 Contributor address; City; State; Zip Code  
**1102 Morgans Peak  
San Antonio, TX 78258**

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

9 Employer (See instructions)  
**Los Barrios family Restaurants**

Date  
**3/11/2023**

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

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

Contributor address; City; State; Zip Code  
**2432 Benrus Boulevard  
San Antonio, TX 78237**

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

Employer (See instructions)  
**Self**

Date  
**3/11/2023**

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

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

Contributor address; City; State; Zip Code  
**2 Victory Green  
San Antonio, TX 78257**

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

Employer (See instructions)  
**retired**

Date  
**3/13/2023**

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

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

Contributor address; City; State; Zip Code  
**132 East Magnolia Avenue  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Flores Holdings LLC**

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>35 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/13/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kausi Subramaniam</b> ..... 6 Contributor address; City; State; Zip Code <b>11 San Isidro</b> <b>San Antonio, TX 78261</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Dance instructor</b>		9 Employer (See instructions) <b>Kalalaya- self employed</b>
Date <b>3/14/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mandy Zaransky</b> ..... Contributor address; City; State; Zip Code <b>1424 Maple Avenue</b> <b>Wilmette, IL 60091</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>SVP Marketing</b>		Employer (See instructions) <b>Institute of Food Technologists</b>
Date <b>3/14/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Grace Villarreal</b> ..... Contributor address; City; State; Zip Code <b>3715 Sunshine Ranch</b> <b>San Antonio, TX 78228</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>3/15/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lupita Fulghum</b> ..... Contributor address; City; State; Zip Code <b>5707 Mystic Bend</b> <b>Brownsville, TX 78526</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Realtor</b>		Employer (See instructions) <b>RCR Real Connect Realty</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/15/2023**

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

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

6 Contributor address; City; State; Zip Code  
**5707 Mystic Bend  
Brownsville, TX 78526**

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

9 Employer (See instructions)  
**Sierra Title Company**

Date  
**3/15/2023**

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

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

Contributor address; City; State; Zip Code  
**1026 North Hermitage Ave. #3  
Chicago, IL 60622**

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

Employer (See instructions)  
**Mars**

Date  
**3/16/2023**

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

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

Contributor address; City; State; Zip Code  
**2400 McCullough #15558  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Retired**

Date  
**3/17/2023**

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

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

Contributor address; City; State; Zip Code  
**12823 Queens Forest  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Retired**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>37 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/18/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Virginia Sandoval</b> ..... 6 Contributor address; City; State; Zip Code <b>6963 Willow Oak Street</b> <b>San Antonio, TX 78249</b>	7 Amount of contribution (\$) <b>50.00</b>
8 Principal occupation / Job title (See instructions) <b>Scrum Master</b>		9 Employer (See instructions) <b>USAA</b>
Date <b>3/19/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Paul Stahl</b> ..... Contributor address; City; State; Zip Code <b>21715 Chaucer Hill</b> <b>San Antonio, TX 78256</b>	Amount of contribution (\$) <b>150.00</b>
Principal occupation / Job title (See instructions) <b>Sales Manager</b>		Employer (See instructions) <b>DynaTouch</b>
Date <b>3/19/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Richard Elizondo</b> ..... Contributor address; City; State; Zip Code <b>115 Halvern Dr</b> <b>San Antonio, TX 78228</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>3/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lukin Taylor Gilliland</b> ..... Contributor address; City; State; Zip Code <b>901 Northeast I-410 Loop</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Investor</b>		Employer (See instructions) <b>Self Employed</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>38 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/20/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Alan Schoenbaum</b> ..... 6 Contributor address; City; State; Zip Code <b>800 W 5th #505</b> <b>Austin, TX 78703</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>Lawyer</b>		9 Employer (See instructions) <b>Alan Schoenbaum, PC</b>
Date <b>3/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Brandon Seale</b> ..... Contributor address; City; State; Zip Code <b>202 Ridgehaven Pl</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Executive</b>		Employer (See instructions) <b>Howard Energy Partners</b>
Date <b>3/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mario Saenz</b> ..... Contributor address; City; State; Zip Code <b>222 E Quill Dr</b> <b>San Antonio, TX 78228</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Director of Sales</b>		Employer (See instructions) <b>Fresenius Medical Care</b>
Date <b>3/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Wes Bright</b> ..... Contributor address; City; State; Zip Code <b>711 Elizabeth Rd</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Consultant/Coach</b>		Employer (See instructions) <b>Bright Endeavors, LLC</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/21/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Patrick W Christensen**

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

6 Contributor address; City; State; Zip Code  
**328 Mistletoe Ave  
San Antonio, TX 78212**

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

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

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**732 Freeman  
San Antonio, TX 78228**

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

Employer (See instructions)  
**Retired**

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**16218 Deer Pass  
San Antonio, TX 78232**

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

Employer (See instructions)  
**Retired**

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 790086  
San Antonio, TX 78279**

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

Employer (See instructions)  
**Joeris General Contractors**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/22/2023**

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

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

6 Contributor address; City; State; Zip Code  
**3006 Single Peak  
San Antonio, TX 78261**

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

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

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 100153  
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)  
**County Commissioner**

Employer (See instructions)  
**Bexar County**

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**3 Horns Cross  
San Antonio, TX 78257**

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

Employer (See instructions)  
**Retired**

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**4737 View Drive  
San Antonio, TX 78228**

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

Employer (See instructions)  
**Ryno General Contractors LLC**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**3/22/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Diana B Guadiano**

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

**6** Contributor address; City; State; Zip Code  
**3202 Eisenhower Rd #302**  
**San Antonio, TX 78209**

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

**9** Employer (See instructions)  
**Holt**

Date  
**3/22/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**SA Fire and Police Pens Assoc**

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

Contributor address; City; State; Zip Code  
**11603 W Coker #201A**  
**San Antonio, TX 78216**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**930 Sunshine DrEast**  
**San Antonio, TX 78228**

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

Employer (See instructions)  
**retired**

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**507 Northstar Drive**  
**San Antonio, TX 78216**

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

Employer (See instructions)  
**retired**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/22/2023**

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

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

6 Contributor address; City; State; Zip Code  
**7500 Callaghan Rd #123  
san antonio, TX 78229**

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

9 Employer (See instructions)  
**The MMG Consulting Firm**

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**4815 Shavano Ct  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Law Offices of Garcia & Ramirez, P.C.**

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**2719 Castanet Street  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Affiliated Foods Inc.**

Date  
**3/22/2023**

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

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

Contributor address; City; State; Zip Code  
**239 West Hollywood Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Self employed**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/22/2023**

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

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

6 Contributor address; City; State; Zip Code  
**319 W Kings Hwy  
San Antonio, TX 78212**

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

9 Employer (See instructions)  
**MM Creative LLC**

Date  
**3/23/2023**

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

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

Contributor address; City; State; Zip Code  
**114 Santa Ursula  
Helotes, TX 78023**

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

Employer (See instructions)  
**Central Catholic High School**

Date  
**3/23/2023**

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

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

Contributor address; City; State; Zip Code  
**81 Sistine  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Local Government Relations**

Employer (See instructions)  
**CPS Energy**

Date  
**3/23/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Alfonso E Alonso Jr**

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

Contributor address; City; State; Zip Code  
**3118 Twisted Creek  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Retired**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**44 of 54**

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**3/23/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**6407 View Point  
San Antonio, TX 78229**

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

**9** Employer (See instructions)  
**Benson Enterprises**

Date  
**3/23/2023**

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

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

Contributor address; City; State; Zip Code  
**19223 Trailview  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**REAL STATE INVESTOR**

Employer (See instructions)  
**RGV INC**

Date  
**3/23/2023**

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

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

Contributor address; City; State; Zip Code  
**2047 Rigsby Ave  
San Antonio, TX 78210**

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

Employer (See instructions)  
**Clay Jackson Inc**

Date  
**3/23/2023**

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

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

Contributor address; City; State; Zip Code  
**326 Big Oak Dr  
Adkins , TX 78101**

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

Employer (See instructions)  
**Texas Towing**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/23/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jane H Macon**

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

6 Contributor address; City; State; Zip Code  
**300 Convent St #2700  
San Antonio, TX 78205**

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

9 Employer (See instructions)  
**Bracewell LLP**

Date  
**3/23/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 120250  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Retired**

Date  
**3/23/2023**

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

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

Contributor address; City; State; Zip Code  
**101 Linda Dr  
San Antonio, TX 78216**

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

Employer (See instructions)  
**Retired**

Date  
**3/24/2023**

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

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

Contributor address; City; State; Zip Code  
**6510 Pemwoods  
San Antonio, TX 78240**

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

Employer (See instructions)  
**UHS**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**3/26/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**439 Calumet Place**  
**San Antonio, TX 78209**

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

**9** Employer (See instructions)  
**State of Texas**

Date  
**3/26/2023**

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

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

Contributor address; City; State; Zip Code  
**300 e. basse #2520**  
**san antonio, TX 78209**

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

Employer (See instructions)  
**andrade vandeputte and associates**

Date  
**3/26/2023**

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

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

Contributor address; City; State; Zip Code  
**150 E Lynwood Ave**  
**San Antonio, TX 78212**

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

Employer (See instructions)  
**USAA**

Date  
**3/26/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Gregory Van De Putte**

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

Contributor address; City; State; Zip Code  
**222 Herweck Drive**  
**San Antonio, TX 78213**

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

Employer (See instructions)  
**Sgws**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME  
**Marina A Gavito**

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

**4** Date  
**3/26/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**740 Barchester Dr #A  
San Antonio, TX 78216**

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

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

Date  
**3/26/2023**

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

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

Contributor address; City; State; Zip Code  
**2526 Old Gate Rd  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Retired**

Date  
**3/26/2023**

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

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

Contributor address; City; State; Zip Code  
**3010 Whisper Fern  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Retired**

Date  
**3/26/2023**

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

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

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

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

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>48 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/26/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cecilia Herrera</b> ..... 6 Contributor address; City; State; Zip Code <b>105 Blackhawk Trl</b> <b>San Antonio, TX 78232</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Retired</b>		9 Employer (See instructions) <b>Retired</b>
Date <b>3/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Carmen Viramontes</b> ..... Contributor address; City; State; Zip Code <b>301 West Skyview Drive</b> <b>San Antonio, TX 78228</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>3/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Henry VanDePutte</b> ..... Contributor address; City; State; Zip Code <b>222 Herweck Dr</b> <b>Castle Hills, TX 78213</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Exec Dir</b>		Employer (See instructions) <b>Meals on Wheels</b>
Date <b>3/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Joe Jesse Sanchez</b> ..... Contributor address; City; State; Zip Code <b>3711 River Falls</b> <b>San Antonio, TX 78259</b>	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**49 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/27/2023**

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

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

6 Contributor address; City; State; Zip Code  
**21430 Scenic Loop Road  
Helotes, TX 78023**

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

9 Employer (See instructions)  
**N/A**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**7915 Woodchase Dr  
San Antonio, TX 78240**

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

Employer (See instructions)  
**Retired**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**112 East Pecan Street #1450  
San Antonio, TX 78205**

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

Employer (See instructions)  
**Chamberlain Hrdlicka**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**2311 Willow  
Austin, TX 78702**

Principal occupation / Job title (See instructions)  
**City Council**

Employer (See instructions)  
**City of Austin**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**50 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/27/2023**

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

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

6 Contributor address; City; State; Zip Code  
**23426 Collin canyon  
San Antonio, TX 78255**

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

9 Employer (See instructions)  
**Norton Rose Fulbright US LLP**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**6827 Rock Rd  
San Antonio, TX 78229**

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

Employer (See instructions)  
**R4 Strategies**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**2630 Inwood Briar  
San Antonio, TX 78248**

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

Employer (See instructions)  
**Spire Investigations**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**9200 Texas Oaks Drive  
Austin, TX 78748**

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

Employer (See instructions)  
**Center for cog therapies**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>51 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/27/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Spencer</b> ..... 6 Contributor address; City; State; Zip Code <b>149 Kitty Kat Lane</b> <b>Boerne, TX 78006</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>CEO</b>		9 Employer (See instructions) <b>Prytime Medical Devices Inc</b>
Date <b>3/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Shelby Najvar</b> ..... Contributor address; City; State; Zip Code <b>23210 Henness Pass</b> <b>San Antonio, TX 78255</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Management</b>		Employer (See instructions) <b>USAA</b>
Date <b>3/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Douglas Poneck</b> ..... Contributor address; City; State; Zip Code <b>127 West Woodlawn Ave</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Escamilla &amp; Poneck, LLP</b>
Date <b>3/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Marilu Reyna</b> ..... Contributor address; City; State; Zip Code <b>4402 Golf View Drive</b> <b>San Antonio, TX 78223</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>EVP of marketing</b>		Employer (See instructions) <b>FirstDay Foundation</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>52 of 54</b>
2 FILER NAME <b>Marina A Gavito</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/27/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Elizabeth LaBarge</b> ..... 6 Contributor address; City; State; Zip Code <b>17734 Cantera Golf</b> <b>San Antonio, TX 78256</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Business Owner/Attorney</b>		9 Employer (See instructions) <b>Texas Medical Legal Consultants LLC</b>
Date <b>3/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lonnie Limon</b> ..... Contributor address; City; State; Zip Code <b>1200 Kenwood Avenue</b> <b>Austin, TX 78704</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Advertising</b>		Employer (See instructions) <b>Dieste Inc.</b>
Date <b>3/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Nancy Martinez-Garcia</b> ..... Contributor address; City; State; Zip Code <b>210 Renner Drive</b> <b>San Antonio, TX 78201</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Home health owner</b>		Employer (See instructions) <b>Nancy Martinez-Garcia</b>
Date <b>3/27/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Dax Moreno</b> ..... Contributor address; City; State; Zip Code <b>10742 Palomino Bnd</b> <b>San Antonio, TX 78254</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Director</b>		Employer (See instructions) <b>ESO Ventures</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**53 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/27/2023**

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

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

6 Contributor address; City; State; Zip Code  
**121 East Mariposa Drive  
San Antonio, TX 78212**

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

9 Employer (See instructions)  
**Scaleworks**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**414 Prinz  
San Antonio, TX 78213**

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

Employer (See instructions)  
**SecureLogix**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**10050 Axis Drive  
Boerne, TX 78006**

Principal occupation / Job title (See instructions)  
**Director Innovation**

Employer (See instructions)  
**Usaa**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**1503 W Huisache Ave  
San Antonio, TX 78201**

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

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**54 of 54**

2 FILER NAME  
**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/27/2023**

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

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

6 Contributor address; City; State; Zip Code  
**8008 Journeyville Drive  
Austin, TX 78735**

8 Principal occupation / Job title (See instructions)  
**Director- Human Resources**

9 Employer (See instructions)  
**AT&T**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**10202 Heritage Boulevard  
San Antonio, TX 78216**

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

Employer (See instructions)  
**Espinoza Law Firm, PLLC**

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**1047 West 17th Street  
Houston, TX 77008**

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

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

Date  
**3/27/2023**

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

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

Contributor address; City; State; Zip Code  
**116 Bushnell Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Self**

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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 8
2 FILER NAME Marina A Gavito		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0
5 Date 1/27/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kazhim Fahim 7 Contributor address; City; State; Zip Code 409 E Olmos San Antonio, TX 78212	8 Amount of Contribution \$ 250.00 9 In-kind contribution description Logo <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Creative Director		11 Employer (FOR NON-JUDICIAL) (See instructions) Chamoy Creative
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aimee Stead Contributor address; City; State; Zip Code 3914 Royal Forest San Antonio, TX 78230	Amount of Contribution \$ 500.00 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker		Employer (FOR NON-JUDICIAL) (See instructions) Homemaker
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
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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: 2 of 8
2 FILER NAME Marina A Gavito		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 2/9/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jimmy Stead 7 Contributor address; City; State; Zip Code 3914 Royal Forest San Antonio, TX 78230	8 Amount of Contribution \$ 250.00 9 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Chief Digital Officer		11 Employer (FOR NON-JUDICIAL) (See instructions) Frost Bank
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 2/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sarah McIornan Contributor address; City; State; Zip Code 115 Paloma Dr. San Antonio, TX 78212	Amount of Contribution \$ 500.00 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Housewife		Employer (FOR NON-JUDICIAL) (See instructions) n/a
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
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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:  
**3 of 8**

2 FILER NAME

**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
**2/21/2023**

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

8 Amount of Contribution \$ **500.00**

9 In-kind contribution description  
**Event food/drink**

7 Contributor address; City; State; Zip Code  
**130 Park Dr  
San Antonio, TX 78212**

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)  
**Lawyer**

11 Employer (FOR NON-JUDICIAL) (See instructions)  
**Cubeta Law Firm**

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
**2/21/2023**

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

Amount of Contribution \$ **500.00**

In-kind contribution description  
**Event food/drink**

Contributor address; City; State; Zip Code  
**130 Park Dr  
San Antonio, TX 78212**

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)  
**Senior VP**

Employer (FOR NON-JUDICIAL) (See instructions)  
**Security Service Federal Credit Union**

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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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: 4 of 8
2 FILER NAME Marina A Gavito		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 2/25/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steven Moya 7 Contributor address; City; State; Zip Code 423 Blue Star #1138 San Antonio, TX 78204	8 Amount of Contribution \$ 200.00 9 In-kind contribution description DJ at kick-off <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) DJ		11 Employer (FOR NON-JUDICIAL) (See instructions) Self Employed
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 3/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexa-Rae Bocanegra Contributor address; City; State; Zip Code 7035 Pickwell Dr #2107 San Antonio , TX 78223	Amount of Contribution \$ 500.00 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Medical Student		Employer (FOR NON-JUDICIAL) (See instructions) None
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
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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: 5 of 8
2 FILER NAME Marina A Gavito		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 3/21/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edward Guerrero 7 Contributor address; City; State; Zip Code 150 E Lynwood Ave San Antonio, TX 78212	8 Amount of Contribution \$ 250.00 9 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Engineering Manager		11 Employer (FOR NON-JUDICIAL) (See instructions) AMD
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 3/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Claudette Guerrero Contributor address; City; State; Zip Code 150 E Lynwood Ave San Antonio , TX 78212	Amount of Contribution \$ 100.00 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) HR		Employer (FOR NON-JUDICIAL) (See instructions) USAA
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

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

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 6 of 8	
2 FILER NAME Marina A Gavito		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/23/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mayra Rivera 7 Contributor address; City; State; Zip Code 219 Lakeridge Dr San Antonio, TX 78229	8 Amount of Contribution \$ 500.00 9 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CMO		11 Employer (FOR NON-JUDICIAL) (See instructions) USAA	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 3/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Javier C Bocanegra Contributor address; City; State; Zip Code 6505 Laurel Hill Drive San Antonio , TX 78229	Amount of Contribution \$ 500.00 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Community Family Medicne		Employer (FOR NON-JUDICIAL) (See instructions) Physician	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:  
**7 of 8**

2 FILER NAME

**Marina A Gavito**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
**3/25/2023**

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

8 Amount of Contribution \$ **250.00**

9 In-kind contribution description  
**Event food/drink**

7 Contributor address; City; State; Zip Code  
**6318 Sun View  
San Antonio, TX 78238**

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)  
**Community Family Medicine**

11 Employer (FOR NON-JUDICIAL) (See instructions)  
**X-Ray Technician**

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
**3/26/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Nicole Van de Putte**

Amount of Contribution \$ **500.00**

In-kind contribution description  
**Event food/drink**

Contributor address; City; State; Zip Code  
**4017 Greensboro  
San Antonio, TX 78229**

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)  
**Director of Women Services**

Employer (FOR NON-JUDICIAL) (See instructions)  
**Communicare**

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

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



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

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 8 of 8
2 FILER NAME Marina A Gavito		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 3/26/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jason Stiles 7 Contributor address; City; State; Zip Code 4017 Greensboro San Antonio , TX 78229	8 Amount of Contribution \$ 348.16 9 In-kind contribution description Event food/drink <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Realtor		11 Employer (FOR NON-JUDICIAL) (See instructions) Self Employed
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 3/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leticia Vargas Contributor address; City; State; Zip Code 13042 Hunters Ridge San Antonio, TX 78230	Amount of Contribution \$ 400.00 In-kind contribution description Flowers <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) MD		Employer (FOR NON-JUDICIAL) (See instructions) Metropolitan Methodist
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

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

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:  
1 of 1

2 FILER NAME  
Marina A Gavito

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan  
3/27/2023

7 Name of lender ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mrs Marina A Gavito

9 Loan Amount (\$)  
2075.00

6 Is lender a  
financial  
institution?  
  
N

8 Lender address; City; State; Zip Code  
1931 W French Pl  
San Antonio TX 78201

10 Interest rate  
0.000000

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral  
☐ none

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

16 GUARANTOR  
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)  
0.00

18 Guarantor address; City; State; Zip Code

☒ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

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

Loan Amount (\$)

Is lender a  
financial  
institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral  
☐ none

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

GUARANTOR  
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>1 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/30/2023</b>	<b>5</b> Payee name <b>GoDaddy</b>	
<b>6</b> Amount (\$) <b>51.83</b>	<b>7</b> Payee address; City; State; Zip Code <b>14455 North Hayden Road #219 Scottsdale, AZ 85260</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Website</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Marina A. Gavito</b>	Office sought <b>Council District 7</b>
		Office held <b>None</b>
Date <b>2/7/2023</b>	Payee name <b>FedEx</b>	
Amount (\$) <b>46.31</b>	Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Marina A. Gavito</b>	Office sought <b>Council District 7</b>
		Office held <b>None</b>
Date <b>2/14/2023</b>	Payee name <b>GoDaddy</b>	
Amount (\$) <b>127.79</b>	Payee address; City; State; Zip Code <b>14455 North Hayden Road #219 Scottsdale, AZ 85260</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Website</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Marina A. Gavito</b>	Office sought <b>Council District 7</b>
		Office held <b>None</b>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>2 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/15/2023</b>	<b>5</b> Payee name <b>Urban Land Institute</b>		
<b>6</b> Amount (\$) <b>35.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>2001 L Street NW #200 WASHINGTON, DC 20036</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: Event Expense</b>		<b>(b)</b> Description <b>Event</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>2/17/2023</b>	Payee name <b>Alamo Mailing Co</b>		
Amount (\$) <b>3247.08</b>	Payee address; City; State; Zip Code <b>13114 Lookout Run San Antonio, TX 78233</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Mailer</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>2/17/2023</b>	Payee name <b>FedEx</b>		
Amount (\$) <b>67.12</b>	Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>3 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/17/2023</b>	<b>5</b> Payee name <b>FedEx</b>		
<b>6</b> Amount (\$) <b>13.72</b>	<b>7</b> Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>Print material</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>2/21/2023</b>	Payee name <b>Henry Avila</b>		
Amount (\$) <b>1650.00</b>	Payee address; City; State; Zip Code <b>3126 Annarosa Lane San Antonio, TX 78211</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>		Description <b>Sign Placement labor</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>2/23/2023</b>	Payee name <b>2CentAutoCall</b>		
Amount (\$) <b>209.51</b>	Payee address; City; State; Zip Code <b>10 Tremont St #14 Boston, MA 02129</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Soliciation/Fundraising Expense</b>		Description <b>Robocall for Kickoff</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>4 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/23/2023</b>	<b>5</b> Payee name <b>Prestige Printing</b>		
<b>6</b> Amount (\$) <b>455.73</b>	<b>7</b> Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>Print material</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>2/24/2023</b>	Payee name <b>Panaderia Jimenez</b>		
Amount (\$) <b>81.19</b>	Payee address; City; State; Zip Code <b>1846 Fredericksburg Rd San Antonio, TX 78201</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Event Expense</b>		Description <b>Kickoff event food</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>2/27/2023</b>	Payee name <b>Mailchimp</b>		
Amount (\$) <b>25.42</b>	Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Email distro</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>5 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/27/2023</b>	<b>5</b> Payee name <b>JVC Media</b>		
<b>6</b> Amount (\$) <b>9164.83</b>	<b>7</b> Payee address; City; State; Zip Code <b>7113 San Pedro Ave #391 San Antonio, TX 78216</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>Signs and Shirts</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>2/27/2023</b>	Payee name <b>JC Good Life / Deco Pizza</b>		
Amount (\$) <b>471.87</b>	Payee address; City; State; Zip Code <b>1815 Fredericksburg Rd San Antonio, TX 78201</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Event Expense</b>		Description <b>Kickoff event food</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/3/2023</b>	Payee name <b>FedEx</b>		
Amount (\$) <b>50.34</b>	Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>6 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/3/2023</b>	<b>5</b> Payee name <b>FedEx</b>		
<b>6</b> Amount (\$) <b>19.47</b>	<b>7</b> Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>Print material</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/7/2023</b>	Payee name <b>Anedot</b>		
Amount (\$) <b>356.60</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street #1770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Fees</b>		Description <b>Online Contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/8/2023</b>	Payee name <b>Flagship Campaigns</b>		
Amount (\$) <b>1500.00</b>	Payee address; City; State; Zip Code <b>56 Oak Villa Rd Canyon Lake, TX 78133</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Polling Expense</b>		Description <b>Field data</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>7 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/9/2023</b>	<b>5</b> Payee name <b>FedEx</b>		
<b>6</b> Amount (\$) <b>29.77</b>	<b>7</b> Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>Print material</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name <b>Marina A. Gavito</b>	Office sought <b>Council District 7</b>	Office held <b>None</b>

  

Date <b>3/9/2023</b>	Payee name <b>FedEx</b>		
Amount (\$) <b>3.24</b>	Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name <b>Marina A. Gavito</b>	Office sought <b>Council District 7</b>	Office held <b>None</b>

  

Date <b>3/9/2023</b>	Payee name <b>FedEx</b>		
Amount (\$) <b>14.88</b>	Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name <b>Marina A. Gavito</b>	Office sought <b>Council District 7</b>	Office held <b>None</b>

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>8 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/13/2023</b>	<b>5</b> Payee name <b>Prestige Printing</b>		
<b>6</b> Amount (\$) <b>811.88</b>	<b>7</b> Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>Print material</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

  

Date <b>3/13/2023</b>	Payee name <b>Prestige Printing</b>		
Amount (\$) <b>2042.68</b>	Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

  

Date <b>3/13/2023</b>	Payee name <b>Prestige Printing</b>		
Amount (\$) <b>82.27</b>	Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>9 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/13/2023</b>	<b>5</b> Payee name <b>Prestige Printing</b>		
<b>6</b> Amount (\$) <b>411.35</b>	<b>7</b> Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>Print material</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/14/2023</b>	Payee name <b>CVS</b>		
Amount (\$) <b>129.66</b>	Payee address; City; State; Zip Code <b>4600 Broadway St. Alamo Heights, TX 78209</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Stamps</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/14/2023</b>	Payee name <b>FedEx</b>		
Amount (\$) <b>135.31</b>	Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>10 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/15/2023</b>	<b>5</b> Payee name <b>Alamo Mailing Co</b>		
<b>6</b> Amount (\$) <b>1050.36</b>	<b>7</b> Payee address; City; State; Zip Code <b>13114 Lookout Run San Antonio, TX 78233</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>Mailer</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/15/2023</b>	Payee name <b>SA Flavor</b>		
Amount (\$) <b>1214.82</b>	Payee address; City; State; Zip Code <b>PO Box 780524 San Antonio, TX 78278</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Fiesta Medals</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/20/2023</b>	Payee name <b>FedEx</b>		
Amount (\$) <b>14.09</b>	Payee address; City; State; Zip Code <b>942 S Shady Grove Rd. Memphis, TN 38120</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>Print material</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>11 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/22/2023</b>	<b>5</b> Payee name <b>HEB</b>		
<b>6</b> Amount (\$) <b>63.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>2118 Fredericksburg Rd San Antonio, TX 78202</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		<b>(b)</b> Description <b>Stamps</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/23/2023</b>	Payee name <b>HEB</b>		
Amount (\$) <b>29.26</b>	Payee address; City; State; Zip Code <b>2118 Fredericksburg Rd San Antonio, TX 78202</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Food/Beverage Expense</b>		Description <b>Food/materials</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			
Date <b>3/27/2023</b>	Payee name <b>Panaderia Jimenez</b>		
Amount (\$) <b>35.31</b>	Payee address; City; State; Zip Code <b>1846 Fredericksburg Rd San Antonio, TX 78201</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Event Expense</b>		Description <b>Event</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Marina A. Gavito</b> Office sought <b>Council District 7</b> Office held <b>None</b>			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>12 of 12</b>	<b>2</b> FILER NAME <b>Marina A Gavito</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/27/2023</b>	<b>5</b> Payee name <b>Mailchimp</b>	
<b>6</b> Amount (\$) <b>25.42</b>	<b>7</b> Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Email distro</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name <b>Marina A. Gavito</b>	Office sought <b>Council District 7</b>
		Office held <b>None</b>

Date <b>3/27/2023</b>	Payee name <b>Anedot</b>		
Amount (\$) <b>1468.70</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street #1770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Fees</b>	Description <b>Transaction Fees</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name <b>Marina A. Gavito</b>		Office sought <b>Council District 7</b>
			Office held <b>None</b>

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

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

# UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

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



# PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F3**

The Instruction Guide explains how to complete this form.

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

**2** FILER NAME  
**Marina A Gavito**

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

**4** Date

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

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

**7** Description of investment

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

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

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

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

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

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

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

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

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

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

Date	Payee name
------	------------

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

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

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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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 Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

## SCHEDULE H

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

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

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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

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

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

**SCHEDULE K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Marina A Gavito

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount (\$)

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

7 Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

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

**SCHEDULE T**

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

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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

C/OH NAME  
**Marina A Gavito**

Filer ID (Ethics Commission Filers)

## SIGNATURE

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

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

## FILER WHO IS NOT AN OFFICEHOLDER

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

### A. CAMPAIGN FUNDS

Check only one:

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

### B. ASSETS

Check only one:

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

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

## OFFICEHOLDER

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

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

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