

# 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>43</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	NICKNAME	LAST	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>3522 Paesano Pkwy San Antonio TX 78231</b>			Date Received <b>1/18/2024 4:19:07PM</b>	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( )	PHONE NUMBER -	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	
	NICKNAME	LAST	SUFFIX	Amount \$	
				Date Processed <b>1/18/2024 4:19:07PM</b>	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>3115 Pinto Pass San Antonio TX 78247</b>				
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 210 )	PHONE NUMBER 875-8747	EXTENSION		
9 REPORT TYPE	January 15: Semi-Annual				
10 PERIOD COVERED	Month Day Year 7/1/2023 THROUGH 12/31/2023				
11 ELECTION	ELECTION DATE Month Day Year 5/6/2023		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special    Description		
12 OFFICE	OFFICE HELD (if any) Council District 8		13 OFFICE SOUGHT (if known) Council District 8		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

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

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	<b>\$ 0</b>
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 20370.00</b>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	<b>\$ 333.10</b>
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	<b>\$ 41223.16</b>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 12484.78</b>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	<b>\$ 0</b>

## 18 AFFIDAVIT

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

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

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Manny Pelaez**, this the **18th** day of **January**, **2024**, to certify which, witness my hand and seal of office.

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

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

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

# SUBTOTALS - COH

## FORM C/OH COVER SHEET PG 3

<b>19</b> FILER NAME <b>Manny Pelaez</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	<b>\$ 20370.00</b>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	<b>\$ 0</b>
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	<b>\$ 0</b>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 39139.15</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>\$ 2084.01</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>\$ 2084.01</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 13**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**7/6/2023**

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

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

6 Contributor address; City; State; Zip Code  
**7319 Washita Way  
San Antonio, TX 78256**

8 Principal occupation / Job title (See instructions)  
**business owner**

9 Employer (See instructions)  
**self**

Date  
**7/6/2023**

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

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

Contributor address; City; State; Zip Code  
**111 W Huisache  
San Antonio, TX 78212**

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

Employer (See instructions)  
**UTSA**

Date  
**7/27/2023**

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

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

Contributor address; City; State; Zip Code  
**8918 Tesoro #401  
San Antonio, TX 78217**

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

Employer (See instructions)  
**Ardurra**

Date  
**8/24/2023**

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

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

Contributor address; City; State; Zip Code  
**22014 Ranier Ln  
San Antonio, TX 78237**

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

Employer (See instructions)  
**Quality Metals**

**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 13**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/4/2023**

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

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

6 Contributor address; City; State; Zip Code  
**106 S St Marys #200  
San Antonio, TX 78205**

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

9 Employer (See instructions)  
**self**

Date  
**9/12/2023**

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

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

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

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

Employer (See instructions)  
**AACOG**

Date  
**9/12/2023**

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

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

Contributor address; City; State; Zip Code  
**112 E Pecan #1616  
San Antonio, TX 78205**

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

Employer (See instructions)  
**self**

Date  
**9/13/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Lawrence & Cathy Mann**

Amount of contribution (\$)  
**1000.00**

Contributor address; City; State; Zip Code  
**8000 Donore Pl  
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:  
**3 of 13**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/13/2023**

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

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

6 Contributor address; City; State; Zip Code  
**1111 Austin Hwy #2109  
San Antonio, TX 78209**

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

9 Employer (See instructions)  
**Andrade, Van DePutte**

Date  
**9/14/2023**

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

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

Contributor address; City; State; Zip Code  
**4402 Golf View Dr  
San Antonio, TX 78223**

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

Employer (See instructions)  
**First Day Foundation**

Date  
**9/14/2023**

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

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

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

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

Employer (See instructions)  
**Cavender Auto Family**

Date  
**9/14/2023**

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

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

Contributor address; City; State; Zip Code  
**207 Cloudcroft  
San Antonio, TX 78228**

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

Employer (See instructions)  
**state of tx**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**4 of 13**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/14/2023**

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

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

6 Contributor address; City; State; Zip Code  
**1622 Wood Quail  
San Antonio, TX 78248**

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

9 Employer (See instructions)  
**Simmons bank**

Date  
**9/15/2023**

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

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

Contributor address; City; State; Zip Code  
**7317 Ashton Pl  
San Antonio, TX 78229**

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

Employer (See instructions)  
**SA Medical Foundation**

Date  
**9/18/2023**

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

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

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

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

Employer (See instructions)  
**Thomas j Henry**

Date  
**9/19/2023**

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

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

Contributor address; City; State; Zip Code  
**12835 Castle Bend  
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:  
**5 of 13**

**2** FILER NAME  
**Manny Pelaez**

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

**4** Date  
**9/20/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**5103 Newcastle Ln  
San Antonio, TX 78249**

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

**9** Employer (See instructions)  
**self**

Date  
**9/20/2023**

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

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

Contributor address; City; State; Zip Code  
**4423 Meredith Woods  
San Antonio, TX 78249**

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

Employer (See instructions)  
**self**

Date  
**9/21/2023**

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

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

Contributor address; City; State; Zip Code  
**4534 Stark Aly  
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)  
**VP Sales & Business Development**

Employer (See instructions)  
**ABH Hotels**

Date  
**9/21/2023**

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

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

Contributor address; City; State; Zip Code  
**000 0000  
San Antonio, TX 00000**

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>6 of 13</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/21/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gina Galaviz Eisenberg</b> ..... 6 Contributor address; City; State; Zip Code <b>16 Garden Sq</b> <b>San Antonio, TX 78209</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>Communications Consultant</b>		9 Employer (See instructions) <b>The Eisenberg Group</b>
Date <b>9/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Albert Carrizalez</b> ..... Contributor address; City; State; Zip Code <b>111 W Huisache</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Gov relations</b>		Employer (See instructions) <b>UTSA</b>
Date <b>9/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Michele Haussmann</b> ..... Contributor address; City; State; Zip Code <b>28 Tilbury Ln</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>business owner</b>		Employer (See instructions) <b>Land Use Solutions</b>
Date <b>9/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lauren Mandel</b> ..... Contributor address; City; State; Zip Code <b>528 Normandy</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>SA AGC</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:  
**7 of 13**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/21/2023**

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

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

6 Contributor address; City; State; Zip Code  
**602 Camp Bullis  
San Antonio, TX 78257**

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

9 Employer (See instructions)  
**Athena Domain Inc**

Date  
**9/21/2023**

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

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

Contributor address; City; State; Zip Code  
**20003 FM 1037  
San Antonio, TX 78221**

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

Employer (See instructions)  
**YL Consulting**

Date  
**9/21/2023**

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

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

Contributor address; City; State; Zip Code  
**12404 King Walnut St  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Andrade VDP**

Date  
**9/21/2023**

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

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

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

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

Employer (See instructions)  
**NuStar**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>8 of 13</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/21/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lauren Atterbury</b> ..... 6 Contributor address; City; State; Zip Code <b>24165 IH 10 #217</b> <b>San Antonio, TX 78257</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>business owner</b>		9 Employer (See instructions) <b>self</b>
Date <b>9/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Ortiz</b> ..... Contributor address; City; State; Zip Code <b>9103 Melbrook St</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>self</b>
Date <b>9/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>HNB Investment LLC</b> ..... Contributor address; City; State; Zip Code <b>10623 Cavalier Pt</b> <b>San Antonio, TX 78254</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>commercial</b>		Employer (See instructions) <b>n/a</b>
Date <b>9/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sohail &amp; Sarah Shakil</b> ..... Contributor address; City; State; Zip Code <b>1507 Palmer</b> <b>San Antonio, TX 78260</b>	Amount of contribution (\$) <b>1000.00</b>
Principal occupation / Job title (See instructions) <b>business owners</b>		Employer (See instructions) <b>Caars inc</b>

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**9 of 13**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/21/2023**

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

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

6 Contributor address; City; State; Zip Code  
**28 Tilbury Ln  
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)  
**Commercial Development**

9 Employer (See instructions)  
**Fulcrum**

Date  
**9/21/2023**

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

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

Contributor address; City; State; Zip Code  
**25607 Texas Ash  
San Antonio, TX 78261**

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

Employer (See instructions)  
**New York Life**

Date  
**9/21/2023**

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

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

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

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

Employer (See instructions)  
**Valero Energy**

Date  
**9/21/2023**

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

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

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

Principal occupation / Job title (See instructions)  
**RK Group**

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.

**1** Total pages Schedule A1:  
**10 of 13**

**2** FILER NAME  
**Manny Pelaez**

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

**4** Date  
**9/21/2023**

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

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

**6** Contributor address; City; State; Zip Code  
**110 Broadway #360  
San Antonio, TX 78205**

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

**9** Employer (See instructions)  
**Marco Barros Management**

Date  
**9/21/2023**

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

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

Contributor address; City; State; Zip Code  
**23227 Whisper Cyn  
San Antonio, TX 78258**

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

Employer (See instructions)  
**Uno Capital**

Date  
**9/21/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Muhammed & Khursid Choudary**

Amount of contribution (\$)  
**1000.00**

Contributor address; City; State; Zip Code  
**1507 Parmerview  
San Antonio, TX 78260**

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

Employer (See instructions)  
**Mission Towing**

Date  
**9/21/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Matthew & Amy Oliver**

Amount of contribution (\$)  
**1000.00**

Contributor address; City; State; Zip Code  
**1224 Country Rd  
Hobson, TX 78117**

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

Employer (See instructions)  
**Mission Wrecker**

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

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**11 of 13**

**2** FILER NAME  
**Manny Pelaez**

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

**4** Date  
**9/21/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Vernon & Vanessa Oliver**

**7** Amount of contribution (\$)  
**1000.00**

**6** Contributor address; City; State; Zip Code  
**PO Box 961  
Converse, TX 78109**

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

**9** Employer (See instructions)  
**Mission Wrecker**

Date  
**9/22/2023**

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

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

Contributor address; City; State; Zip Code  
**19003 IH 10 W  
San Antonio, TX 78257**

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

Employer (See instructions)  
**Nustar**

Date  
**9/22/2023**

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

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

Contributor address; City; State; Zip Code  
**135 W Grammercy Pl  
San Antonio, TX 78212**

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

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

Date  
**9/22/2023**

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

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

Contributor address; City; State; Zip Code  
**2019 Flint Oak  
San Antonio, TX 78248**

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

Employer (See instructions)  
**Self**

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

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**12 of 13**

**2** FILER NAME  
**Manny Pelaez**

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

**4** Date  
**9/25/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Robert & Mary Worth**

**7** Amount of contribution (\$)  
**1000.00**

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

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

**9** Employer (See instructions)  
**Worth & Associates**

Date  
**9/25/2023**

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

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

Contributor address; City; State; Zip Code  
**514 El Paso St**  
**San Antonio, TX 78207**

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

Employer (See instructions)  
**Milmo Group**

Date  
**9/29/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**George & Julie Meri**

Amount of contribution (\$)  
**1000.00**

Contributor address; City; State; Zip Code  
**105 Town Vue Dr**  
**San Antonio, TX 78216**

Principal occupation / Job title (See instructions)  
**business owner**

Employer (See instructions)  
**self**

Date  
**10/2/2023**

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

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

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

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

Employer (See instructions)  
**development**

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

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>13 of 13</b>
<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/17/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Helen Cronenberger</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>000 00000</b> <b>San Antonio, TX 78230</b>	<b>7</b> Amount of contribution (\$) <b>100.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>retired</b>		<b>9</b> Employer (See instructions) <b>retired</b>
Date <b>12/13/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Alex Zepeda</b> ..... Contributor address; City; State; Zip Code <b>322 Inspiration Way</b> <b>Del Rio, TX 78840</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Real estate</b>		Employer (See instructions) <b>owner/self</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		



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

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1	
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Contributor address; City; State; Zip Code	8 Amount of Contribution \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of Contribution \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

## SCHEDULE B

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Forms provided by Texas Ethics Commission      [www.ethics.state.tx.us](http://www.ethics.state.tx.us)      Revised 01/01/2020

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:  
1 of 1

2 FILER NAME  
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

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

9 Loan Amount (\$)

6 Is lender a  
financial  
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral  
☐ none

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

16 GUARANTOR  
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

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

Loan Amount (\$)

Is lender a  
financial  
institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral  
☐ none

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

GUARANTOR  
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>1 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/6/2023</b>	<b>5</b> Payee name <b>Viva Strategy Group</b>	
<b>6</b> Amount (\$) <b>5000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1850 Fredericksburg San Antonio, TX 78201</b>	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	<b>(b)</b> Description <b>consulting</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 Office sought Office held		

  

Date <b>7/7/2023</b>	Payee name <b>Constant Contact</b>	
Amount (\$) <b>154.57</b>	Payee address; City; State; Zip Code <b>3675 Precision Drive Loveland, CO 80538</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>email</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

  

Date <b>7/10/2023</b>	Payee name <b>Extra Space</b>	
Amount (\$) <b>198.00</b>	Payee address; City; State; Zip Code <b>9738 Huebner Rd San Antonio, TX 78240</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>storage</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>2 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/19/2023</b>	<b>5</b> Payee name <b>St Marys Hispanic Law Association</b>		
<b>6</b> Amount (\$) <b>2500.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1 Camino Santa Maria St San Antonio, TX 78228</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>		<b>(b)</b> Description <b>contribution</b>
	<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 <b>7/20/2023</b>	Payee name <b>Cates Legal Group</b>		
Amount (\$) <b>3000.00</b>	Payee address; City; State; Zip Code <b>5910 Clermont Austin, TX 78744</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Legal Services</b>		Description <b>services</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date <b>7/24/2023</b>	Payee name <b>Roland Gutierrez Campaign</b>		
Amount (\$) <b>1000.00</b>	Payee address; City; State; Zip Code <b>PO Box 15232 San Antonio, TX 78212</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>		Description <b>contribution</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

**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 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/26/2023</b>	<b>5</b> Payee name <b>Viva Politics</b>		
<b>6</b> Amount (\$) <b>7000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1850 Fredericksburg San Antonio, TX 78201</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>		<b>(b)</b> Description <b>consulting</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 Office sought Office held			
Date <b>7/28/2023</b>	Payee name <b>Nationbuilder</b>		
Amount (\$) <b>104.00</b>	Payee address; City; State; Zip Code <b>520 S Grand Ave Los Angeles , CA 90071</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</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 Office sought Office held			
Date <b>8/6/2023</b>	Payee name <b>Viva Strategy Group</b>		
Amount (\$) <b>5600.00</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg San Antonio, TX 78201</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>		Description <b>consulting</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>4 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/7/2023</b>	<b>5</b> Payee name <b>Constant Contact</b>		
<b>6</b> Amount (\$) <b>154.57</b>	<b>7</b> Payee address; City; State; Zip Code <b>3675 Precision Dr San Antonio, TX 80538</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>		<b>(b)</b> Description <b>email</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 Office sought Office held			
Date <b>8/9/2023</b>	Payee name <b>Extra Space</b>		
Amount (\$) <b>198.00</b>	Payee address; City; State; Zip Code <b>9738 9738 Huebner Rd San Antonio, TX 78240</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>storage</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>8/28/2023</b>	Payee name <b>Nationbuilder</b>		
Amount (\$) <b>104.00</b>	Payee address; City; State; Zip Code <b>520 S Grand Ave Los Angeles , CA 90071</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</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 Office sought Office held			

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>5 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/30/2023</b>	<b>5</b> Payee name <b>WIX</b>		
<b>6</b> Amount (\$) <b>220.83</b>	<b>7</b> Payee address; City; State; Zip Code <b>500 Terry Francois Blvd San Francisco, CA 94158</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>		<b>(b)</b> Description <b>hosting</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 Office sought Office held			
Date <b>8/30/2023</b>	Payee name <b>Wix</b>		
Amount (\$) <b>155.88</b>	Payee address; City; State; Zip Code <b>500 500 Terry Francois Blvd San Francisco, CA 94158</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>web hosting</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>8/31/2023</b>	Payee name <b>AC Hotel Riverwalk</b>		
Amount (\$) <b>173.05</b>	Payee address; City; State; Zip Code <b>111 Soledad St San Antonio, TX 78205</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>		Description <b>campaign work meeting</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			



# 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 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/6/2023</b>	<b>5</b> Payee name <b>Viva Strategy Group</b>		
<b>6</b> Amount (\$) <b>5000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1850 Fredricksburg Rd San Antonio, TX 78201</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>		<b>(b)</b> Description <b>consulting</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 Office sought Office held			
Date <b>9/7/2023</b>	Payee name <b>Constant Contact</b>		
Amount (\$) <b>154.57</b>	Payee address; City; State; Zip Code <b>3675 Precision Dr Loveland, CO 80538</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>email program</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>9/8/2023</b>	Payee name <b>Extra Space</b>		
Amount (\$) <b>198.00</b>	Payee address; City; State; Zip Code <b>9738 Huebner Rd San Antonio, TX 78240</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>storage</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>7 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/28/2023</b>	<b>5</b> Payee name <b>Nationbuilder</b>	
<b>6</b> Amount (\$) <b>104.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>520 Grand Ave Los Angeles, CA 90071</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description <b>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 Office sought Office held		
Date <b>10/3/2023</b>	Payee name <b>United Airlines</b>	
Amount (\$) <b>300.00</b>	Payee address; City; State; Zip Code <b>9800 Airport Blvd San Antonio, TX 78216</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Travel Out Of District</b>	Description <b>COSA delegation - Korea trip expense</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name Office sought Office held		
Date <b>10/3/2023</b>	Payee name <b>United Airlines</b>	
Amount (\$) <b>1417.00</b>	Payee address; City; State; Zip Code <b>9800 Airport Blvd San Antonio, TX 78216</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Travel Out Of District</b>	Description <b>COSA delegation - Korea trip expense</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>8 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/3/2023</b>	<b>5</b> Payee name <b>United Airlines</b>		
<b>6</b> Amount (\$) <b>1417.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>9800 Airport Blvd 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>Travel Out Of District</b>		<b>(b)</b> Description <b>COSA delegation - Korea trip expenses</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			
Date <b>10/3/2023</b>	Candidate / Officeholder name <b>United Airines</b>		
Amount (\$) <b>300.00</b>	Payee address; City; State; Zip Code <b>9800 Airport Blvd San Antonio, TX 78216</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Travel Out Of District</b>		Description <b>COSA delegation - Korea trip expense</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			
Date <b>10/4/2023</b>	Candidate / Officeholder name <b>Dora Garcia</b>		
Amount (\$) <b>125.00</b>	Payee address; City; State; Zip Code <b>100 W Houston St San Antonio, TX 78205</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>		Description <b>food contribution for the homeless</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			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>9 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/10/2023</b>	<b>5</b> Payee name <b>Go Daddy</b>		
<b>6</b> Amount (\$) <b>76.62</b>	<b>7</b> Payee address; City; State; Zip Code <b>14455 N Hayden Street 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>Fees</b>		<b>(b)</b> Description <b>web hosting</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 Office sought Office held			
Date <b>10/10/2023</b>	Payee name <b>Extra Space Storage</b>		
Amount (\$) <b>198.00</b>	Payee address; City; State; Zip Code <b>9738 Huebner Rd San Antonio, TX 78240</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>storage</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>10/10/2023</b>	Payee name <b>Constant Contact</b>		
Amount (\$) <b>154.57</b>	Payee address; City; State; Zip Code <b>3675 Precision Drive Loveland, CO 80538</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>email program</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>10 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/17/2023</b>	<b>5</b> Payee name <b>Go Daddy</b>	
<b>6</b> Amount (\$) <b>102.85</b>	<b>7</b> Payee address; City; State; Zip Code <b>14455 N Hayden 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>Fees</b>	<b>(b)</b> Description <b>web hosting</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	Office sought Office held

Date <b>10/17/2023</b>	Payee name <b>Go Daddy</b>	
Amount (\$) <b>102.85</b>	Payee address; City; State; Zip Code <b>14455 N Hayden Scottsdale, AZ 85260</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>web hosting</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held

Date <b>10/30/2023</b>	Payee name <b>Nationbuilder</b>	
Amount (\$) <b>104.00</b>	Payee address; City; State; Zip Code <b>520 S Grand Los Angeles, CA 90071</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</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	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>11 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/7/2023</b>	<b>5</b> Payee name <b>Constant Contact</b>		
<b>6</b> Amount (\$) <b>154.57</b>	<b>7</b> Payee address; City; State; Zip Code <b>3675 Precision Loveland, CO 80538</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>		<b>(b)</b> Description <b>email program</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 Office sought Office held			
Date <b>11/8/2023</b>	Payee name <b>Extra Space Storage</b>		
Amount (\$) <b>212.00</b>	Payee address; City; State; Zip Code <b>9738 Huebner Rd San Antonio, TX 78240</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>storage</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>11/27/2023</b>	Payee name <b>Total Wine</b>		
Amount (\$) <b>216.46</b>	Payee address; City; State; Zip Code <b>17530 La Cantera Pkwy San Antonio, TX 78527</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>		Description <b>fundraising gift basket</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>12 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/28/2023</b>	<b>5</b> Payee name <b>Nationbuilder</b>		
<b>6</b> Amount (\$) <b>104.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>520 S Grand Ave Los Angeles , CA 90071</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>		<b>(b)</b> Description <b>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 Office sought Office held			
Date <b>11/29/2023</b>	Payee name <b>Cates Legal Law Firm</b>		
Amount (\$) <b>750.00</b>	Payee address; City; State; Zip Code <b>5910 Clermont Austin, TX 78744</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Legal Services</b>		Description <b>campaign</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>11/30/2023</b>	Payee name <b>Double Good Popcorn</b>		
Amount (\$) <b>283.35</b>	Payee address; City; State; Zip Code <b>16 83rd St Burr Ridge, IL 60527</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>		Description <b>gift giveaways</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>13 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/7/2023</b>	<b>5</b> Payee name <b>Constant Contact</b>	
<b>6</b> Amount (\$) <b>154.57</b>	<b>7</b> Payee address; City; State; Zip Code <b>3675 Precision Dr Loveland, CO 80538</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description <b>email program</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		
Date <b>12/8/2023</b>	Candidate / Officeholder name <b>Extra Space Storage</b>	
Amount (\$) <b>212.00</b>	Office sought <b>San Antonio, TX 78240</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>storage</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <b>12/14/2023</b>	Candidate / Officeholder name <b>Cameo</b>	
Amount (\$) <b>446.54</b>	Office sought <b>Chicago, IL 60642</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: marketing promotion</b>	Description <b>promotion expense</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>14 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/15/2023</b>	<b>5</b> Payee name <b>Heifer International</b>		
<b>6</b> Amount (\$) <b>100.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1 World Ave Little Rock, AR 72202</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Gift/Awards/Memorials Expense</b>		<b>(b)</b> Description <b>Gifts to Council - donation to end hunger</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 Office sought Office held			
Date <b>12/20/2023</b>	Payee name <b>Walmart Supercenter</b>		
Amount (\$) <b>466.51</b>	Payee address; City; State; Zip Code <b>5555 DeZavala San Antonio, TX 78249</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>		Description <b>Bikes donated to Blue cares for a family</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>12/26/2023</b>	Payee name <b>Sushihana</b>		
Amount (\$) <b>284.69</b>	Payee address; City; State; Zip Code <b>1810 NW Military Hwy San Antonio, TX 78213</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>		Description <b>team meeting</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>15 of 15</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/28/2023</b>	<b>5</b> Payee name <b>Nationbuilder</b>		
<b>6</b> Amount (\$) <b>104.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>520 S Grand Los Angeles, CA 90071</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>		<b>(b)</b> Description <b>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 Office sought Office held			
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)		Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
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>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		<b>\$ 0</b>
<b>5</b> Date	<b>6</b> Payee name	
<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code	
<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description
	<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  
**Manny Pelaez**

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

**4** Date

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

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

**7** Description of investment

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

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

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

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking  
Advertising Expense  
Consulting Expense  
Contributions/Donations Made By  
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>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$ 0</b>
--	-------------

<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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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule G: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/7/2023</b>	<b>5</b> Payee Name <b>Carriqui Restaurant</b>	
<b>6</b> Amount (\$) <b>2084.01</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <b>239 E Grayson San Antonio, TX 78215</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Event Expense</b>	<b>(b)</b> Description <b>fundraiser 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	Office sought      Office held
Date	Payee name	
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

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

## SCHEDULE H

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

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

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

**SCHEDULE K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date

**10/7/2023**

5 Name of person from whom amount is received

**Manuel Pelaez**

8 Amount (\$)

**2084.01**

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

**3522 Paisano Parkway  
San Antonio, TX 78231**

7 Purpose for which amount is received

**Refund - Carriqui fundraiser event**

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

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

**SCHEDULE T**

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

Filer ID (Ethics Commission Filers)

## SIGNATURE

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

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

## FILER WHO IS NOT AN OFFICEHOLDER

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

### A. CAMPAIGN FUNDS

Check only one:

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

### B. ASSETS

Check only one:

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

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

## OFFICEHOLDER

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

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

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